

HSI21/068

GOVERNING BODY

Title of paper	Emergency Preparedness Resilience and Response (EPRR) Annual Report 2021		
Agenda item	8	Date of meeting	3 November 2021
Director lead	Jenny Erwin, HloW ICS Director of Mental Health Transformation and Delivery COVID-19 –Incident Commander and Deputy Accountable Emergency Officer.		
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

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).

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.

This report contains the 2021/22 EPRR Core Standards Assurance process for Hampshire, Southampton & Isle of Wight CCG.

Recommendations	The Governing Body is asked 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 Equality and Quality Impact Assessment.
Patient and stakeholder engagement	EPRR Plans and Policies are coproduced with input from key stakeholders in each local system and are shared with multi-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 also accepts delegated responsibilities from NHS England & Improvement as a category 1 responder.
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

Emergency Preparedness Resilience and Response (EPRR) Annual Report 2021

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.
- 1.3. The Accountable Emergency Officer of the CCG must ensure that the Governing Body receive reports as appropriate, no less frequently than annually, regarding EPRR.
- 1.4. This report will:
 - Summarise the outcomes of the EPRR annual core assurance process
 - Provide an update on EPRR exercises and events
 - Set out next steps

2. Accountable Emergency Officers/Non-Executive Directors

- 2.1. Each CCG is required to appoint a Governing Body level officer/director as Accountable Emergency Officer (AEO). Maggie Maclsaac is the AEO for both Hampshire, Southampton & Isle of Wight, and Portsmouth CCGs. She is supported in her role by Deputy AEOs:
 - Jenny Erwin, Director of Mental Health Transformation and Delivery & COVID-19 – Incident Commander
 - Jo York, Managing Director, Health and Care Portsmouth
- 2.2. Additionally, CCG's are required to have a Non-Executive Director (NED) which can be a Lay Member who is an independent member of the Governing Body 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/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.

- 3.3. EPRR plans and policies are co-produced and reviewed by stakeholders within local each system, and also 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 will be 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 local health system 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, with the exception of 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 is currently taking place of the On Call Policy to ensure the rotas are sustainable and adequately resourced.
- 4.5. The majority of calls to On Call Managers have been regarding:
 - Pressure in the local health system particularly related to ambulance queuing;
 - Staffing challenges;
 - Maternity demand and mutual aid.
- 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 3 sessions annually including; Surge and escalation, Major Incident Response, and Legislation and record keeping,

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 Director of Public Health. This is a change from previous years when NHS England/NHS Improvement co-chaired. They are now an attendee.

- 5.2. The CCGs Associate Director of EPRR has been an active member of, and now co-chairs, the sub group (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 has a Three-Year Strategy 2018-2021. It will be reviewed later this year. The LHRP plans its preparedness, resilience and response to identified risks culminating in a robust and collaborative annual training and exercising work programme. The programme is complete with milestones, deadlines and identified work stream to improve and enhance EPRR interoperability across the local health community.

6. Training

- 6.1. On call training sessions on Surge and Escalation, Major Incident Response and Legislation and Record Keeping took place throughout 2021 via MS Teams. Regular training sessions will be scheduled throughout 2022.
- 6.2. All on call staff are expected to have completed at least one training session in the year.
- 6.3. Due to the operational and Infection Prevention and Control (IPC) constraints of Covid19, the Local Resilience Forum have been unable to facilitate Strategic Coordinating Group and Tactical Coordinating Group training this year, however a programme has now been established for 2022.
- 6.4. For the same reason, loggist training has not been undertaken this year; however a programme will be established for 2022 including both full and refresher loggist courses. As mitigation, all on call staff are aware of their responsibilities to log their decisions and actions and trained in best practice.

7. Events

- 7.1 Hampshire, Southampton & Isle of Wight CCG took part in a multi-agency exercises ahead of the festivals including Victorious and Isle of Wight which took place over the summer months and also the Great South Run in October.
- 7.2 The EPRR team maintain strong connections between multi-agency partners to ensure awareness of local events that may impact the health system.

8. Exercises

- 8.1 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 was also involved in the planning of the recent CBRN (Chemical, Biological, Radiological and Nuclear) awareness session, which was initially due to be a full exercise. The exercise has been postponed to 2022 due to heightened operational pressures experienced by several multi-agency partners.

9. Communications exercise

- 9.1 Hampshire, Southampton, and Isle of Wight CCG is required to undertake a 6 monthly communications test as part of EPRR core assurance. A light touch comms test was undertaken during March 2020 due to COVID-19 cascading management arrangements and location changes as work bases closed and working from home was implemented, followed by a full test as per 9.2. Appendix A outlines additional wider participation in communications testing.
- 9.2 On Thursday 3rd June 2021, the EPRR team undertook a communications test in order to confirm emergency contact numbers for partners were up to date, as well as to test the response from CCG staff to emergency communications. A full exercise report can be found in Appendix A.

10. Incidents

- 10.1 Since January 2020, the CCG has been operating in response to the Covid19 pandemic. The CCG's Incident Control Centre was set up virtually and remains in place due to the expectation that COVID-19 will likely remain endemic for some time to come and now is the single point of contact for other incidents as well as operational delivery. An operating framework is in place across Health & Social Care 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. COVID, Winter)
 - Respond to known drivers of high demand and capacity need in a whole system coordinated manor.
- 10.2 The Prime Minister has formally announced that there will be a statutory inquiry starting next Spring (2022) on the response to the COVID-19 pandemic. A 'Statutory Inquiry' will mean witnesses and evidence will be compelled. The inquiry will include restoration/recovery of services including lessons identified and so all relevant records will also need to be maintained. The CCG has set up an initial Public Inquiry Working Group which is meeting monthly and reporting into the Audit and Risk Committee.
- 10.3 The CCG has also been involved in responses to the Afghan Relocations and Assistance programme, Southern Water outage and the recent Fuel supply issues. Throughout these incidents, the CCG has participated in debriefs to identify lessons and best practice and the EPRR team maintains a lessons identified tracker.

11. EPRR Core Standards

- 11.1 In September 2021 NHS organisations carried out a self-assessment of their state of readiness against the NHS England published EPRR core standards. The full EPRR Core Assurance process was not conducted in 2020 due to the Covid19 pandemic.

11.2 The self-assessment of 29 core standards has been completed and it has been identified the following result:

- Hampshire, Southampton & Isle of Wight CCG – 26 fully compliant
- Portsmouth CCG – 27 fully compliant

11.3 The following core standards were rated as only partially compliant and form part of the improvement plan for the remainder of 21-22 to be managed via the EPRR whole system working group:

Core standard	CCG	Narrative
39 –Media Strategy	Hampshire Southampton & Isle of Wight CCG	Media policy drafted and awaiting ratification and publication.
51 – Business Continuity Plans	Hampshire Southampton & Isle of Wight CCG & Portsmouth CCG	Business continuity plans are in place per site, however a refresh by each locality is in progress taking into account news ways of working and utilisation of office space. An EPRR working group has also been established, starting in November 2021, and Business Continuity briefings will be undertaken within each local system during staff briefings.
55 - Assurance of commissioned providers / suppliers Business Continuity Plans (BCPs)	Hampshire, Southampton & Isle of Wight CCG & Portsmouth CCG	Providers demonstrated their ability to maintain critical services during the COVID-19 response, however audits of independent provider business continuity plans have not yet taken place this year. A dedicated lead has now been identified for Primary Care Business continuity to progress this.

12. NHS Providers self-assessment

12.1 The Associate Director of EPRR and Head of EPRR reviewed with the providers their self-assessment submission and resulting action plans.

12.2 The assurance of the HIOW Acute Trusts was conducted via a peer review session across two days, facilitated by the CCG, which was well received by partners. All HIOW Acute Trusts are now substantially compliant.

12.3 A similar process was undertaken with the Community and Mental Health Trusts. Both are now substantially compliant.

12.4 Both South Central Ambulance Service (SCAS) and Isle of Wight Ambulance Service (IWAS) are substantially compliant against the standards. Due to the nature of the SCAS contract and interdependencies with Thames Valley CCGs, a peer review process was not conducted for the ambulance services in 21-22 but is being explored for 22-23. The

SCAS review was completed in partnership with Thames Valley and IWAS was undertaken separately with the Isle of Wight NHS trust.

12.5 Trusts have signed a statement of compliance and provided a report to their respective Boards as part of this process.

12.6 The CCG and Provider Accountable Emergency Officers, Associate Director of EPRR and Head of EPRR will meet with the Regional Head of Emergency Preparedness, Resilience and Response for NHS England and NHS Improvement (South East) as part of the LHRP Executive meeting on the 27th October. It is expected that they will agree a position of Substantially compliant for all Hampshire and Isle of Wight Providers and CCGs.

Organisation	Acute providers	Specialist providers	Ambulance services	Patient Transport Providers	NHS 111	Community services providers	Mental health providers	CCGs	Full / Substantial / Partial / Non		Change ↔ ↑ ↓
									2019/ 2020	2021/ 2022	
Hampshire, Southampton & Isle of Wight CCG								X	Substantial	Substantial	↔
Portsmouth CCG								X	Substantial	Substantial	↔
IOW NHS Trust incl IOW Ambulance Trust	X								Partial	Substantial	↑
Portsmouth Hospital Trust	X								Partial	Substantial	↑
Solent Trust						X	X		Full	Substantial	↓
SCAS			X	X	X				Substantial	Substantial	↔
Hampshire Hospitals	X								Substantial	Substantial	↔
Southern Health						X	X		Substantial	Substantial	↔
University Hospital Southampton	X								Substantial	Substantial	↔

13. Next Steps

13.1 The EPRR team will progress the EPRR Assurance action plan over the next five months and report back to the Governing Body in April 2022. The main focus will be the redesign of Business Continuity practice and plans ahead of the move to an Integrated Care System in 2022. A whole system working group has been established to develop the detailed actions and ensure they can be implemented by end of March 21-22 with oversight via the CCG Risk and Audit Committee.

13.2 The EPRR team will continue to report monthly to the Governing Body with key items of note as well as reporting to the Risk and Audit Committee the progress of the Public Inquiry Working Group.

Hampshire, Southampton & Isle of Wight CCG: Comms Test Report June 2021

1. Executive summary:

Hampshire, Southampton, and Isle of Wight CCG is required to undertake a 6 monthly communications test as part of EPRR core assurance. On Thursday 3rd June 2021, the Incident Control Centre undertook a communications test in order to confirm emergency contact numbers for partners were up to date, as well as to test the response from CCG staff to emergency communications.

The communications test consisted of three elements:

- Contacting our partners via their on call numbers
- Contacting each local on call manager and the HIOW Exec On Call
- Sending a CCG wide TextAnywhere message

The communications test highlighted 2 partner on call numbers that had changed or are no longer used, 19 staff who have left the organisation and encouraged 12 additional staff to sign up to TextAnywhere. There was a 68% response rate to the Text Anywhere message, with several of those who did not respond indicating that this was due to concerns that the message was spam. The ICC will work with the CCG communications team to mitigate these concerns for future communications exercises utilising StayConnected.

The CCG also participated in the NHS England and Improvement communications exercise, Exercise Talk Talk on 6th July 2021.

2. Background:

Communication is critical in dealing with any adverse incident. For the HSI CCG the chosen form of emergency communication with staff is via a text service called TextAnywhere. This has a web based portal that can send message to all staff registered by the EPRR team. This was last used on the 22nd March 2020 to inform staff that CCG offices were closed as part of the national lockdown. As part of the annual EPRR core assurance process the CCG is required to demonstrate that we have delivered a six-monthly communications test as part of an exercising and testing programme to safely test major incident, critical incident and business continuity response arrangements.

3. External partners:

23 health partners were contacted as part of the communications test, using a total of 28 dedicated on call numbers. Of the 28 calls made, 17 were answered on the first call. 1 provider called back within 30 minutes, and 1 call went through to voicemail confirming it was the correct number.

As a result of the test, 1 number was removed and 1 number updated. Of the remaining 7 numbers that were not answered, 5 of these were for the unitary authorities that were followed up with EPRR leads, and the remaining 2 numbers were for Primary Care alliances that have been followed up with the local primary care teams.

All changes to these numbers as a result of the communications test have been captured within the local on call manager packs and the HIOW Exec on call pack.

4. CCG On Call Arrangements:

As part of the communications exercise, the 4 CCG On Call manager contact numbers were called, as well as the HIOW Exec On Call number. All 5 numbers were answered on the first call.

5. Text Anywhere:

Utilising TextAnywhere, the ICC sent out the following message to staff members registered on TextAnywhere:

'HSI CCG & PORTSMOUTH CCG staff - THIS IS A COMMS TEST. Please reply with YES to confirm receipt. If you are no longer a member of staff please let us know.'

The ICC received 595 responses to the text cascade. Of these, 19 people advised that they had either left or were soon to be leaving the organisation. 274 people did not respond (32%).

Unfortunately the TextAnywhere service uses a randomly generated mobile number when sending the message which changes each time a message is sent. Due to this anecdotal feedback on the day of the communications test was that staff were concerned the message was a scam or phishing message and therefore did not reply. Upon being advised of these concerns, the ICC arranged with the communications team for a message to be posted on StayConnected reassuring staff that the message was legitimate. This also encouraged staff who did not receive the message to sign up to the cascade, with 12 new staff signing up in the days that followed. There are some staff who have chosen not to register with TextAnywhere and these staff have to be manually notified by their own team cascade as agreed with their line manager.

6. Exercise Talk Talk:

NHS England and Improvement conducted their own communications exercise in July 2021; Exercise Talk Talk, which the CCG participated in. This communications exercise was the first test of new arrangements whereby the HIOW Exec On Call takes the initial alert instead of NHSE/I as part of delegation agreements. The message was received by the HIOW Exec On Call, who then alerted NHSE/I. A decision was made before the exercise that as the HIOW ICS had recently completed a local communications test, the usual onward cascade to Southern Health NHS Foundation Trust and Solent NHS Trust would not take place.

The exercise was conducted using the South Central Ambulance Service (SCAS) Everbridge system which reads an automated message to those on the cascade list. Whilst the exercise was successful, feedback from the HIOW Exec On Call who received the message was that the automated message is read too quickly. This has been fed back to NHS England /Improvement (NHSE/I) to capture in their exercise report.

7. Next Steps:

Following the exercise and the response received, the recommendations for next steps are as follows:

1. Establish process with CCG Communications team to pre-prepare a post for StayConnected that can be published shortly after the TextAnywhere message is sent. This will provide reassurance to staff with any concerns regarding the message being spam. All messages from the TextAnywhere service are started with 'HSI CCG' identifying the message as legitimate.

2. Advise local area business managers of future communications tests shortly before messages are circulated so that they may also reassure any staff contacting them directly that the message received is legitimate.
3. Continue to promote TextAnywhere to new starters at the CCG Corporate Induction.
4. Establish robust process with business managers and the communications team to capture new joiners to be added to TextAnywhere, as well as staff who are leaving the CCG, as part of the leavers form in order that they can promptly be removed from both TextAnywhere and StayConnected.
5. Review the transfer of global message to StayConnected when the majority of staff are registered with StayConnected.