



Item: 8.2

Report to:	NHS Hull Clinical Commissioning Group Board			
Date of Meeting:	23 November 2018			
Title of Report:	Emergency Preparedness, Resilience and Response 2018/19			
Presented by:	Erica Daley, Director of Integrated Commissioning			
Author:	Karen Ellis, Deputy Director of Commissioning			
STATUS OF THE R	EPORT:			
To approv	ve To endorse			
To ratify	√ To discuss			
To consid	er For information			
To note				
PURPOSE OF REPORT: This report seeks ratification of the Planning and Commissioning Committee's approval of the attached self-assessment of CCG Compliance with the national Emergency Preparedness, Response and Resilience/Business Continuity Management constandards. The self-assessment identified that substantial compliance was demonstrate against the Core Standards relating to Emergency Preparedness, Resilience an Response (EPRR) 2017/18 including business continuity management (BCM) and the deep dive topic of Command and Control. In addition an action plan that has been put in place to address the gaps identified. The report also presents the annual report for Business Continuity / Emergency Preparedness, Response Annual Report 2017/18 for the Board's information. RECOMMENDATIONS: It is recommended that the CCG Board: (1) Considers and ratifies the self-assessed level of compliance identifying the substantial compliance was demonstrated against the core standards relating to Emergency Preparedness, Resilience and Response (EPRR) 2018/19 (2) Notes the Business Continuity / Emergency Preparedness, Response Annual Report 2017/18				

REPORT EXEMPT FROM PUBLIC DISCLOSURE

No √ Yes

If yes, detail grounds for exemption

CCG STRATEGIC OBJECTIVE

Emergency Preparedness, Resilience and Response supports the CCG to delivery strategic objectives:

- 2. Integrated Delivery
- 3. Delivery of Statutory Duties

By ensuring the CCG is working in partnership with other agencies to ensure that a coordinated response is deliverable in cases of emergency and the CCGs internal businesses will be maintained as required.

IMPLICATIONS: (summary of key implications, including risks, associated with the paper),				
Finance	There are no financial implications or risks associated with this report.			
HR	There are no HR implications or risks directly associated with this report.			
Quality	There are no direct quality implications or risks associated with this report			
Safety	By working to deliver the core competencies relating to EPRR we are supporting the organisation to be a safer place to work by ensuring that systems and processes are in place to enable a coordinated response to major incidents or items that impact on the day to day working of the CCG.			

ENGAGEMENT:

The self-assessment has been undertaken by members of the CCG's EPRR and BCM Group and it has also been shared with representatives of partner CCGs. The self-assessment, and its outcome, was supported by the Planning and Commissioning Committee at its meeting on 5 October 2018.

The EPRR / BCM annual report was reviewed by members of the CCG's EPRR and BCM Group and was considered by the Integrated Audit and Governance Committee on 11 September 2018.

LEGAL ISSUES:

There is a national legal requirement; Civil Contingencies Act 2004 and the Health and Social Care Act 2012 for organisations to put in place systems and processes to:

(i) Maintain their level of EPRR in line with their Civil Contingency response category. As a CCG we are a Category 2 Responder and this is reflected in the

core standards against which we are assessed.

(ii) Ensure that we have systems and processes in place to maintain our core business when normal business delivery is affected.

EQUALITY AND DIVERSITY ISSUES: (summary of impact, if any, of CCG's duty to promote equality and diversity based on Equality Impact Analysis (EIA). **All** reports relating to new services, changes to existing services or CCG strategies / policies **must** have a valid EIA and will not be received by the Committee if this is not appended to the report)

	Tick relevant box
An Equality Impact Analysis/Assessment is not required for this report.	V
An Equality Impact Analysis/Assessment has been completed and approved by the lead Director for Equality and Diversity. As a result of performing the analysis/assessment there are no actions arising from the analysis/assessment.	
An Equality Impact Analysis/Assessment has been completed and there are actions arising from the analysis/assessment and these are included in section xx in the enclosed report.	

THE NHS CONSTITUTION:

Under the NHS Constitution the NHS is there to help the public when they need it most, this is especially true during an incident or emergency. By meeting the core standards we are demonstrating that we are organisationally in a position to continue to help the public, however indirectly, during an incident or emergency.

EMERGENCY PREPAREDNESS, RESILIENCE AND RESPONSE 2018/19

1. INTRODUCTION

This report seeks ratification of the Planning and Commissioning Committee's approval of the attached self-assessment of CCG Compliance with the national Emergency Preparedness, Response and Resilience/Business Continuity Management core standards. The self-assessment identified that substantial compliance was demonstrated against the Core Standards relating to Emergency Preparedness, Resilience and Response (EPRR) 2017/18 including business continuity management (BCM) and the deep dive topic of Command and Control. In addition an action plan that has been put in place to address the gaps identified.

The report also presents the annual report for Business Continuity / Emergency Preparedness, Response Annual Report 2017/18 for the Board's information.

2. BACKGROUND

Every year the CCG has to review itself to ascertain it meets the minimum core standards relating to EPRR and BCM and to assess itself against a deep dive into a specific aspect of the core standards. For 2018/19 the deep dive is into Command and Control.

Following the review the CCG has to submit the required template, attached as appendix 1, and statement of compliance, appendix 2, outlining the self-assessment, available evidence and action plans were partial or no compliance has been identified.

Part of the self-assessment is to confirm that the CCG has undertaken:

- A 'live test' at least every 3 years
- A 'desktop' exercise at least annually
- A communications exercise every 6 months

Part of the requirement on CCGs is to produce an EPRR annual report outlining activities relating to EPRR / BCM and to include the outcome of the self-assessment in the CCG's annual report, appendix 3. The outcome of the 2017/18 self-assessment was included in the CCG's annual report.

3. INFORMATION

3.1 Self-Assessment

This year's process has been amended and an excel spreadsheet is provided to record the self-assessment. The responses are collated into tables:

Core Standards	Total standards applicable	Fully compliant	Partially compliant	Non compliant
Governance	6	5	1	0
Duty to risk assess	2	2	0	0
Duty to maintain plans	9	9	0	0
Command and control	2	2	0	0
Training and exercising	3	2	1	0
Response	5	4	1	0

Warning and informing	3	3	0	0	
Cooperation	4	3	0	1	
Business Continuity	9	9	0	0	
CBRN	0	0	0	0	
Total	43	39	3	1	

Deep Dive	Total standards applicable	Fully compliant	Partially compliant	Non compliant
Incident Coordination Centres	4	2	2	0
Command structures	4	4	0	0
Total	8	6	2	0

This has resulted in an overall assessment of:

Overall assessment:	Substantially compliant
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With regard to the required tests the CCG has, in the last 12 months, undertaken:

Live Testing

- Building evacuation evacuation process only
- Overseen the local response to Wannacry IT incident
- Overseen the response to a localised East Hull IT failure affecting primary care

Desktop Exercise

• Director-on-call desktop exercise around a major incident

Communications Exercise

- Staff Cascade mechanisms
- IT on-call systems and processes

3.2 EPRR / BCM Annual Report

The EPRR / BCM annual report outlines the duties placed upon the CCG in relation to EPRR / BCM and the governance in place to support the CCG in discharging its duties including supporting plans. There is a joint EPRR / BCM Meeting across Hull CCG, East Riding of Yorkshire CCG and North Lincolnshire CCG to share systems, processes and best practice.

4. RECOMMENDATIONS

It is recommended that the CCG Board:

- Considers and ratifies the self-assessed level of compliance identifying that substantial compliance was demonstrated against the core standards relating to Emergency Preparedness, Resilience and Response (EPRR) 2018/19
- 2. Notes the Business Continuity / Emergency Preparedness, Response Annual Report 2017/18