

Report to the Trust Board

Title of Report	Emergency Preparedness, Resilience and Response (EPRR)- Annual Report 2015/16
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Executive Lead	Debbie Reape, Interim Executive Director of Nursing (Accountable Emergency Officer)
Responsible sub-committee	Emergency Preparedness Programme Board (EPPB)
Date of meeting	28 April 2016
Executive Summary	<p>This annual report provides assurance that Northumbria Healthcare NHS Foundation Trust meets the requirements of its statutory requirements relating to Emergency Preparedness, Resilience and Response, with some minor improvements for action.</p> <p>The Trust is compliant with all of its statutory and legal requirements with the exception of 2 of the NHS EPRR Core standard (2 out of 48). This is Core Standard 11 and an action plan is in place to ensure compliance with this standard during 2016/17.</p> <p>The EPPB achieved all of its priorities identified for 2015/16 with the exception of not achieving its internal target of staff to be trained in Incident Co-ordination Training. This remains a priority for 2016/17.</p> <p>EPPB priorities for 2016/17 include:</p> <ul style="list-style-type: none"> • Ensuring all statutory and regulatory assurances are met; • Emergency preparedness learning and development needs of the Trust are met; • Embedding of the Northumbria Incident Management System continues.
Assurance Framework reference	n/a
Alignment to Trusts Annual/Strategic Plans or business unit annual plans	n/a
Risk rating (very high, high, medium, low risk)/ any recommended changes	n/a
Compliance/ regulatory requirements (if applicable)	n/a
Actions required by the Board	The Board is asked to note and approve the content of the report and the NHS EPRR Core standards.

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1.1 Purpose Statement

This report outlines our local approach to improving the resilience of Northumbria Healthcare NHS Foundation Trust through the development of preventative, protective and responsive controls which are designed to mitigate the impacts of a range of internal and external emergencies.

The Emergency Preparedness Programme Board during 2015/16 was under the chairmanship of Rosemary Stephenson. However from April 16 this will change and in the interim Debbie Reape will oversee compliance with the Northumbria Incident Management System Policy and the Incident Command System Policy, while reflecting on wider systems improvements e.g. performance monitoring and compliance mechanisms.

1.2 Scope of report

This report is intended to provide assurance on all aspects of emergency preparedness, resilience and response across the Trust. To ensure transparency a list of inclusions and exclusions has been provided (see table 1) to reflect the scope of assurance provided by this report.





Table 1: Report inclusions and exclusions

Inclusions	Exclusions
Emergency Preparedness Programme Board	Commercial Services
Emergency Preparedness Department	Disaster Recovery – IT business continuity (this is the responsibility of Computer Services and is reported to the IM&T Committee)
Medicine and Emergency Care Business Unit	Information Governance (Information Governance Toolkit)
Emergency Surgery and Elective Care Business Unit	
Clinical Support and Cancer Services Business Unit	
Estates and Facilities	
Corporate Services	
Child Health	
Community Business Unit	

1.3 Trust Emergency Preparedness, Resilience and Response compliance and assurance summary





The Trust is required to make provision for the response to emergencies of varying scale, complexity and type. These requirements come in the form of both legislation and good practice guidance (see table 2a below). The Emergency Preparedness Programme Board ensures continuing compliance with national regional and local emergency preparedness, resilience and response requirements by reviewing and interpreting changes.

Table 2a: External emergency preparedness, resilience and response compliance requirements

Key:	 Fully compliant	 Partially compliant – action plan in place	 Not compliant	 Planned
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Ref	SOURCE	REQUIREMENTS	SELF ASSESSMENT OF COMPLIANCE
Statutory and Legal Requirements:			
2a.1	Civil Contingencies Act (2004)	9 requirements	Compliant with all requirements.
2a.2	Health and Social Care Act (2012)	3 requirements	Compliant with all requirements.
2a.3	NHS EPPR Core Standards Framework 2016/16	50 requirements	48 compliance requirements met. 1 compliance requirements is awaiting the Pandemic Flu Plan to be ratified at the Policy Group in May 16; 1 compliance has an action plans in place to ensure compliance by March 2017.
2a.4	NHS Standard Contract 2015/16	23 requirements	Compliant with all requirements.
2a.5	Care Quality Commission	1 requirement	Compliant with all requirements.
2a.6	National Occupational Standards	14 requirements	Compliant with all requirements.
Internal Requirements			
	Internal Audit NAM 4459	6 recommendations	All recommendations met
Suggested Good Practice			
2a.7	ISO 22301	187 requirements	110 compliance requirements met. 49 non-compliances with action plans in place. 28 non-compliances with no current action plans in place. <i>As a Trust we are not required to meet this standard – however, we will where appropriate plan to align to.</i>

Table 2b: Internal emergency preparedness, resilience and response compliance requirements

Key:	 Fully compliant	 Partially compliant – action plan in place	 Not compliant	 Planned
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Ref	SOURCE	REQUIREMENTS	SELF ASSESSMENT OF COMPLIANCE
2b.1	Exercise Programme	6 requirements	Compliant with all requirements.
2b.2	Training Programme	2 requirements	Compliant with all requirements.

Emergency Preparedness Programme Board

The Emergency Preparedness Programme Board was convened on four occasions during 2015/16 in line with its terms of reference. Table 2c below provides a summary of attendance.

Table 2c: Emergency Preparedness Programme Board member attendance.

Member	09.04.15	07.07.15	08.10.15	07.01.16	Total
Child Health Business Unit	X	√	√	√	75%
Clinical Support Business Unit	√	√	√	√	100%
Community Services Business Unit	X	√	√	√	75%
Communications Department	√	√	X	√	75%
Computer Services Department	√	√	√	√	100%
Emergency Care and Medicine Business Unit	√	√	√	√	100%
Emergency Surgery and Elective Care Business Unit	√	X	√	√	75%
Estates and Facilities Services	√	√	X	√	75%
Human Resources Department	X	X	√	√	50%
Supplies Department	√	√	√	√	100%
Emergency Preparedness Department	√	√	√	√	100%
Risk Manager	X	X	√	√	50%
Finance (inc Payroll)	X	√	√	√	75%

Overall level of assurance

Based on the activity conducted by the Emergency Preparedness Team and the Emergency Preparedness Programme Board in 2015/16 a **significant level** of assurance can be provided to the Trust Board.

This is based on there is a good system in place, a good proportion of appropriate staff have been trained in incident management, all wards and departments have a customised Incident/Emergency Response Guide; however further work needs to be carried out to ensure the Northumbria Incident Management System is fully embedded within the Trust

2 EMERGENCY PREPAREDNESS DEPARTMENT (EPD) EPRR ACTIVITY 2015/16

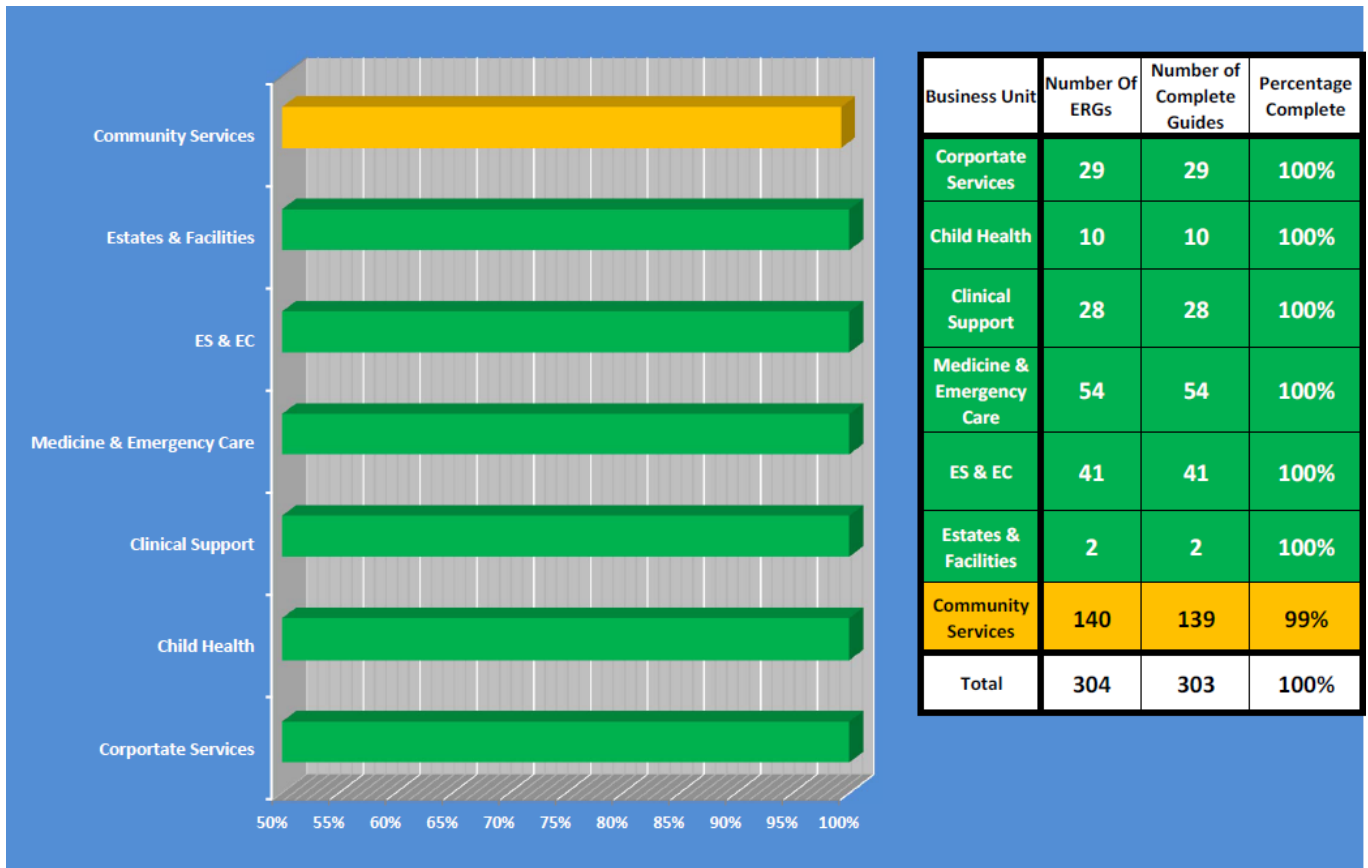
2.1 EMERGENCY PREPAREDNESS PROGRAMME BOARD PRIORITIES

What we said we would do	What has been done	Status (RAG)
Statutory and Regulatory Assurance		
Compliance with Emergency Preparedness, Resilience and Response (EPRR) NHS Core Standard (2015)	See table 2a for compliance status	
Compliance with Civil Contingencies Act (2004)		
Compliance with Care Quality Commission - Regulation 12: Safe Care and Treatment (Emergency Preparedness)		
Compliance with National Occupation Standards		
Emergency Preparedness Programme Board (EPPB)		
EPPB Members agreed to hold a development session to review controls, levels of assurances and any weaknesses.	<ul style="list-style-type: none"> A development session was held in May 2015. An action following this is that EPPB members present for their business unit/service area an emergency preparedness assurance declaration detailing how they are meeting the statutory and regulatory assurances (listed above). Any gaps have action plans in place. This is a robust process to give the Accountable Emergency Officer reassurance in the Trust's emergency preparedness capability. 	
Northumbria Incident Management System (NIMS)		
Undertake work with wards and departments to continue to customise their Emergency Response Guides	<ul style="list-style-type: none"> 303 out of 304 areas have a fully customised Emergency Response Guide. (236 ERG's were customised/reviewed in 2015/16). Outstanding = Community x 1 	
The Northumbria		
Set up and test the Incident Co-ordination Centre (G0.03 – Conference Centre)	<ul style="list-style-type: none"> Room fully operational and has been tested in live incidents e.g. junior doctor industrial action. The room is now being used as an office by the Mental Health Team which is a risk as the EPD have reduced accessibility to get in and carry out checks e.g. 	

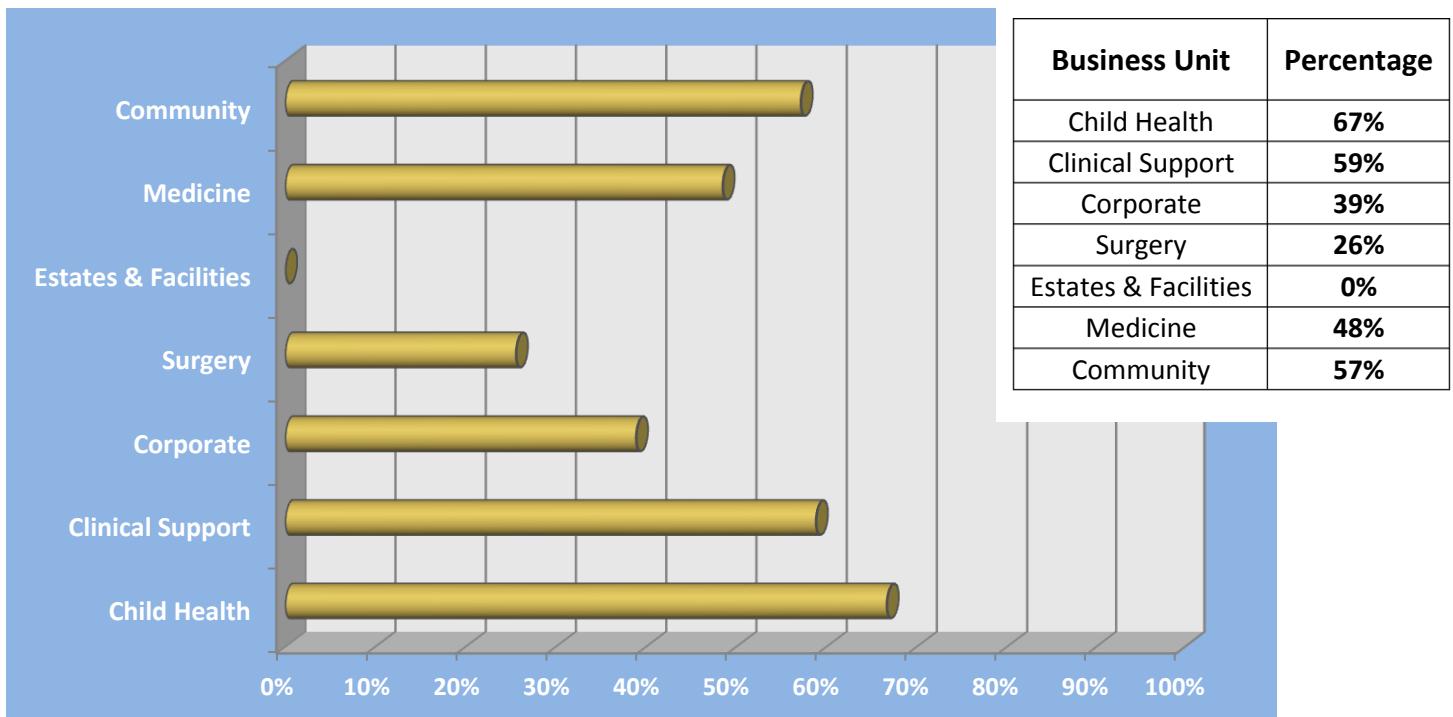
What we said we would do	What has been done	Status (RAG)
	network/telephone ports are functioning etc. However, the team are aware they have to leave in an emergency.	
Ensure all emergency preparedness plans are updated to reflect the changes in major incident response	<ul style="list-style-type: none"> • EP004 Major Casualty Management Plan was updated and ratified by the Emergency Preparedness Programme Board. 	
Support all wards and departments in customising their Emergency Response Guides	<ul style="list-style-type: none"> • All wards and departments at The Northumbria have a fully customised Emergency Response Guide. 	
Provide emergency preparedness advice and support in the transition	<ul style="list-style-type: none"> • Member of the Northumbria Commissioning Group. • Participated in the Command and Control during the transition. 	
Learning and Development		
Support the Trust's statutory and mandatory training programme for 2015/16 in the delivery of CBRN PPE training to all ED nurses and CBRN Decontamination tent training to all porters (as appropriate).	<ul style="list-style-type: none"> • Delivered 9 out of 9 CBRN PPE training sessions to the ED Nurses and HCA's. • Delivered 4 out of 4 training sessions to the porters at The Northumbria 	
Support the roll out of the Incident Co-ordination System developmental training for ward/department managers, on-call staff etc	<ul style="list-style-type: none"> • Offered 45 training sessions (675 places); 18 training sessions delivered – 27 cancelled due to no attendees being booked on. • 48% of the staff group identified have now been trained. 	
Deliver two live exercises to test staff knowledge in incident response.	<ul style="list-style-type: none"> • 13 exercises were delivered/participated in during 2015/16 	

3 BUSINESS UNIT ACTIVITY 2015/16

3.1 CUSTOMISATION OF EMERGENCY RESPONSE GUIDES



3.2 ICS002 TRAINING COMPLIANCE



4 EMERGENCY PREPAREDNESS PROGRAMME BOARD PRIORITIES FOR 2016/17

- **Statutory and Regulatory Assurance**
 - Emergency Preparedness, Resilience and Response (EPRR) NHS Core Standard (2016/17)
 - Civil Contingencies Act (2004)
 - Health and Social Care Act (2012)
 - Care Quality Commission
 - National Occupational Standards

- **Learning and Development**
 - Support the Trust's statutory and mandatory training programme for 2016/17 in the delivery of CBRN PPE (2 yearly) training to all Emergency Department Nurses and CBRN Decontamination Tent (one-off) training to all porters as appropriate.
 - Deliver ICS002 (this is incident co-ordination of level 1 incidents e.g. very localised issues affecting their area only e.g. small flood etc) training to all wards and departments to ensure they meet the minimum requirement (2) staff, as recommended by the Emergency Preparedness Programme Board.
 - Deliver two live/table top exercises to test staff knowledge in incident response.

- **Northumbria Incident Management System (NIMS)**
 - Expand the Emergency Response Guides to contain Standard Operating Procedures for all critical IT systems, ensuring all staff has a consistent manual workaround in the event of an IT failure.
 - Business Continuity – develop a Trust's Strategic Impact Analysis (business continuity tool) that will allow critical activities to be easily identified if a major casualty or business continuity incident should impact on the Trust.

5 ACTIONS REQUIRED BY TRUST BOARD MEMBERS

The Emergency Preparedness, Resilience and Response Manager on authorisation from the Executive Director of Nursing (Accountable Emergency Officer) ask the Trust Board to note the content of this report.

The Trust Board is requested to receive this report as assurance that Northumbria Healthcare NHS Foundation Trust meets the requirements of its statutory requirements relating to Emergency Preparedness, Resilience and Response, with some minor improvement actions required.

EXERCISES AND INCIDENTS ¹COVERING PERIOD 01.04.15 – 31.03.16

EVENT TYPE	DATE	PART(S) OF THE TRUST IMPACTED UPON	INCIDENT/EXERCISE DESCRIPTION
PLANNED OUTAGE	14.04.15	Trustwide	Switchboard Downtime for Upgrade
PLANNED EXERCISE	02.06.15	Trustwide	Major Incident Test Communication Cascade
PLANNED EXERCISE	11.03.15	The Northumbria	Emergo Exercises (Casualty Management - Train Crash)
PLANNING EXERCISE	15.06.15 & 16.06.15	Trustwide	Opening of The Northumbria - repatriation of Critical Care and acute patients from base sites to The Northumbria. Activation of command and control facilities and structures.
MULTI AGENCY EX	21.05.15	Trustwide	Cross Border Anthrax Exercise (Cumbria and Scotland)
PLANNED EXERCISE	08.07.15	Wansbeck General Hospital Incident Control Centre (WGH ICC)	IT set up in the event of additional IT support being requested from WGH ICC.
MULTI AGENCY EX	17.07.15	Trustwide	Multi Agency Exercise to test the Local Resilience Forum Fuel Plan and partner agency business continuity arrangements
PLANNED EXERCISE	20.07.15	North Tyneside General Hospital Incident Co-ordination Centre (NTGH ICC)	IT set up in the event of additional IT support being requested from NTGH ICC.
PLANNED OUTAGE	23.07.15	THE NORTHUMBRIA	Planned IT Outage

EVENT TYPE	DATE	PART(S) OF THE TRUST IMPACTED UPON	INCIDENT/EXERCISE DESCRIPTION
INTERNAL INCIDENT	25.07.15	Ward 4, The Northumbria	Fire Alarm activation
PLANNED EXERCISE	21.07.15	Trustwide	Major Incident Test Communication Cascade
PLANNING EVENT	31.07.15	The Northumbria	Presentation of potential Ebola patient
PLANNED EXERCISE	20.08.15	CHBU Operational Leads	Pandemic Flu Game
PLANNED EXERCISE	26.08.15	Portering Team, The Northumbria	Live Decontamination Tent Exercise
EXTERNAL INCIDENT	26.08.15	Trustwide	Major Incident Standby Message received from NEAS – potential mass casualty
PLANNED EXERCISE	08.09.15	Trustwide	Major Incident Test Communication Cascade
PLANNED DISRUPTION	09.09.15 & 10.09.15	Trustwide	Tour of Britain
PLANNED EXERCISE	22.10.15	Trustwide	Winter Surge/Pandemic Flu
EXTERNAL INCIDENT	04.12.15	Trustwide	Major Incident Standby Message received from NEAS – potential mass casualty
EXTERNAL INCIDENT	05.12.15	Community Business Unit	Flooding due to severe weather
INTERNAL INCIDENT	08.12.15	Trustwide	Bleep Failure test
INTERNAL INCIDENT	16.12.15	Trustwide	Telephone failure

EVENT TYPE	DATE	PART(S) OF THE TRUST IMPACTED UPON	INCIDENT/EXERCISE DESCRIPTION
PLANNED EXERCISE	05.01.16	Corporate Business Unit	Pandemic Flu Game
PLANNED EXERCISE	26.02.16	Portering Team, The Northumbria	Live (Unannounced) Decontamination Tent Exercise

¹ The incidents registered here only reflect those that the Emergency Preparedness Team have been privy to and may not reflect all internal incidents.