

Board of Directors (in Public) Item 2.4

Subject: Emergency Preparedness Resilience Response (EPRR) Core Standards Self-Assessment
Date of Meeting: Tuesday 26th November 2019
Prepared by: Helen Martin, Risk and Safety Lead
Presented by: Dr Margarita Perez-Casal, Director of Research & Innovation
Purpose of Report: For Approval

BAF Ref	Impact on BAF
3.2	None

1. Executive Summary

Each year, NHS England request that healthcare organisations self-assess their emergency readiness against a core set of emergency preparedness and resilience response (EPRR) standards in order to highlight any weaknesses in systems and develop action plans to mitigate same.

An assurance deep dive is undertaken each year. For 2019, the emphasis is on extreme weather conditions.

The Board of Directors is requested to review and agree the results of the EPRR core standards self-assessment and the recommendations made.

2. Background

Attached is the completed core standard for Liverpool Heart and Chest Hospital. The standards relevant to LHCH are concentrated on EPRR core standards and business continuity.

The majority of the evidence of compliance is contained within the Major Incident Plan, which is subject to regular review to ensure it remains up to date. Other policies that link to the Major Incident Plan comprise of the Heatwave plan, Cold weather plan, Pandemic flu policy, Infectious disease policy, Evacuation and Lockdown policies.

A table top exercise is conducted on an annual basis as per the requirements of current national guidance. Learning from exercising is monitored via the Emergency Planning Group. The membership of the Emergency Planning Group is multidisciplinary. An annual report for the Emergency Planning Group is presented to the Risk Management and Corporate Governance

committee.

A schedule of business continuity exercises is in place and is monitored via the Risk Management and Corporate Governance Committee. Business continuity plans have been developed for all areas across the organisation and are reviewed at Divisional Governance at least annually.

Command and control training for relevant staff takes place on a 3 yearly basis as per current national guidance.

3. Self-Assessment 2019:

The NHS England Core Standards for EPRR are split into ten domains:

1. Governance
2. Duty to risk assess
3. Duty to maintain plans
4. Command and control
5. Training and exercising
6. Response
7. Warning and informing
8. Cooperation
9. Business continuity
10. Chemical Biological Radiological Nuclear (CBRN).

For the 2019 self-assessment of the relevant EPRR core standards, LHCH can demonstrate full compliance.

Command and control training was completed by the Executive team, On Call Managers, Hospital Coordinators and members of the Emergency Planning Group in March 2019. It was delivered by NHS England Head of Emergency Planning.

Additionally, the deep dive review has asked twenty specific questions regarding how the organisation has prepared for severe weather

Deep Dive Severe weather response	LHCH Position	Action
The organisations heatwave plan allows for the identification and monitoring of inpatient and staff areas that overheat	Yes	None
The organisation has contingency arrangements in place to reduce temperatures	Partial – Air conditioning where possible, fans and mobile air con units in other places.	Meeting held with Infection Prevention Specialist re use of mobile air con units. Further action for Estates Manager regarding identification of companies who will hire suitable mobile air con units in times of need.
The organisation has plans to ensure staff can attend work during a period of severe weather (snow, flooding or heatwave) and has suitable arrangements should transport	Yes – included in Cold Weather Plan	None

Deep Dive Severe weather response	LHCH Position	Action
fail and staff need to remain on site (includes provision of 4x4 where needed)		
Organisations providing services in the community have arrangements to allow for caseloads to be clinically prioritised and alternative support delivered during periods of severe weather disruption	Yes – included in BCPs	None
The organisation has processes in place to ensure that vulnerable patients are discharged to a warm home or are referred to a local point of contact health and housing referral system	Yes – discharge planning on wards and in discharge policy	None
The organisation has arrangements in place to ensure site access is maintained during periods of snow or cold weather including gritting and clearance plans	Yes – included in Cold Weather plan	None
The organisation has arrangements in place to assess the impact of National Severe weather warnings (Met office alerts)	Yes – Risk Management and Communications Manager receive alerts	None
The organisation has planned preventative maintenance programmes to ensure that on site drainage is clear to reduce flooding risk from surface water	Yes -via estates	None
The organisation is aware of and where applicable contributed to the Local Resilience Forum (LRF) Multi Agency flood Plan	Yes – LHCH is a member of the LRF	None
The organisations communications arrangements include working with LRF and multi-agency partners to warn and inform before and during periods of severe weather	Yes	None
The organisation has plans in place for any pre identified areas of their site at risk of flooding	Yes – via estates	None
The organisation has identified which severe weather events are likely to impact on patients, services and staff and takes account of these	Yes – included on BCPs	None
The organisation is assured that suppliers can maintain services during periods of severed	Yes – included in Suppliers' BCP	

Deep Dive Severe weather response	LHCH Position	Action
weather		
The organisation has exercised its arrangements	Yes	Table top booked for 17 th Sept 2019
The organisation's IT services have been exercised and equipment tested which allows for remote access	Yes – as part of new IT strategy	IT advice data centre air-con is tested 4 times a year, is away from flood risk and has a large UPS attached. Remote access tested.
Are all relevant organisation's risks highlighted in the Climate Change Risk register	LHCH is a member of the Regional Risk Register Group so contributes as necessary	None
The organisation has identified and recorded those parts of their buildings that regularly overheat on their risk register.	Yes	
The organisation has in place an adaptation plan which includes necessary modifications to buildings and infrastructure to maintain normal business during extreme weather	Yes – as part of capital plan	
The organisation's adaptation plans include modifications to reduce their buildings impact on surrounding environment	Yes – as part of building regulations	
The organisation considers for all its new facilities relevant adaptation requirements for long term climate change.	Yes – as part of building regulations	

The Trust will be declaring partial compliance against the deep dive standards. The results of the deep dive are not included in the overall result of the EPRR assurance process for which LHCH is declaring compliance (green) against all standards.

4. Conclusion

The 2019 self-assessment of the EPRR core standards has been undertaken and LHCH can demonstrate compliance with the relevant standards.

Some minor work is to be completed to the deep dive standards with regards to extreme weather to ensure full compliance.

5. Recommendations

The Board of Directors is requested to:

- Review and agree the self-assessment for submission to NHS England