

<b>Trust Board (Public)</b>	<b>Item: Emergency Preparedness, Resilience and Response (EPRR) Annual Report</b>
<b>Date: November 2021</b>	<b>Enclosure: 0</b>
<b>Purpose of the Report:</b> To report to the Board on the 2020 - 2021 Emergency Preparedness, Resilience and Response (EPRR) Assurance outcome and the Trust's declaration and self-assessment against the NHS Core Standards 2021 - 2022	
<b>For: Information</b> <input checked="" type="checkbox"/> <b>Assurance</b> <input checked="" type="checkbox"/> <b>Discussion and input</b> <input type="checkbox"/> <b>Decision/approval</b> <input type="checkbox"/>	
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<b>Risk Implications – Link to Assurance Framework or Corporate Risk Register:</b>	NHS England and Improvement EPRR Core Standards Statutory requirement under the Civil Contingences Act 2004
<b>Legal / Regulatory / Reputation Implications:</b>	Statutory requirement under the Civil Contingences Act 2004
<b>Link to Relevant CQC Domain:</b> <b>Safe</b> <input checked="" type="checkbox"/> <b>Effective</b> <input checked="" type="checkbox"/> <b>Caring</b> <input type="checkbox"/> <b>Responsive</b> <input checked="" type="checkbox"/> <b>Well Led</b> <input checked="" type="checkbox"/>	
<b>Link to Relevant Corporate Objective:</b>	All
<b>Document Previously Considered By:</b>	Emergency Preparedness Group Executive Management Committee
<b>Recommendations:</b> For information and assurance	

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# 2020 - 2021 Emergency Preparedness, Resilience and Response (EPRR) Annual Report

## Summary

The report provides assurance on the Trust's EPRR arrangements for 2021/22. The Trust's EPRR arrangements are in place to ensure the Trust is compliant with:

- Statutory obligations under the Civil Contingencies Act 2004
- NHS England EPRR Framework 2015

In summary, there continues to be a considerable amount of work in developing the Trust's EPRR arrangements due to the continuously changing landscape. Nationally, there is a high level of focus with the increasing amount of guidance and expanding range of threats the Trust must be prepared for. It is essential that there is a continued focus on the Trust's EPRR. It is important that the Trust maintains and continues to advance its reputation within the EPRR arena and contributes towards the Trusts and wider healthcare system Preparedness.

## Recommendations

The Trust Board is asked to note:

- That Kingston Hospital is 100% compliant with the core standards and therefore has an assessed level of compliance of fully compliant.
- The work conducted by the EPRR Team over the past 12 months as detailed below
- The exceptional work of colleagues in the Trust who have supported the work of the EPRR team, with credit to the Emergency Department Major Incident lead (Matron Kay Philcox) and Trusts Security and Parking Manager (Mr Liam Topham)

## **Introduction**

EPRR is defined by a series of statutory responsibilities under the Civil Contingencies Act (2004) and the Health and Social Care Act (2012), which requires NHS, funded organisations to maintain robust capabilities to plan for, and respond to incidents or emergencies that could impact on health or services to patients. The Civil Contingencies Act 2004 delivers a legislative framework for the provision of civil protection in the United Kingdom, ensuring consistency of planning, whilst setting clear responsibilities for frontline responders for responding and recovering from incidents.

It is a requirement of NHS funded organisations to annually complete a self-assessment against the NHS Core Standards for EPRR, along with an additional section on a specific aspect in order for NHS England and NHS Improvement to carry out a deep dive exercise. This year's EPRR assurance deep dive topic was severe weather and climate adaptation.

## **Background**

The Civil Contingencies Act (2004) outlines a single framework for civil protection in the United Kingdom. Part 1 of the Act establishes a clear set of roles and responsibilities for those involved in emergency preparedness and response at the local level. As a category one responder, the Trust is subject to the following civil protection duties:

- assess the risk of emergencies occurring and use this to inform contingency planning.
- put in place emergency plans.
- put in place business continuity management arrangements.
- put in place arrangements to make information available to the public about civil protection matters and maintain arrangements to warn,
- inform and advise the public in the event of an emergency.
- share information with other local responders to enhance coordination.
- cooperate with other local responders to enhance coordination and efficiency.

## **Risk Assessment**

The Civil Contingencies Act (2004) places a legal duty on responders to undertake risk assessments and publish risks in a Local Resilience Forum Community Risk Register. In the case for Trust within London, this is the Borough Resilience Forum. For the Trust this is Royal Borough of Kingston (RBK) Resilience Forum. The purpose of the Borough Risk Register is to reassure the community that the risk of potential hazards has been assessed, and that preparation arrangements are undertaken, and response plans exist. The Trust, internally, capture and quantify risk on the Datix system. Trust EPRR related risks are captured on the DATIX system. The EPRR Team are responsible for ensuring that these risks are mitigated and reviewed.

## **2020/21 NHS England and NHS Improvement EPRR Assurance Process**

Due to the impact of the Covid-19 pandemic the self-assessment process was adjusted to represent the impact that the response to Covid-19 was having within the field of EPRR. It was requested by NHS England and NHS Improvement EPRR London that organisations evidenced how they had made progress on their standards they had reported as partially or non-compliant in the 2019/20 process, the process of capturing and embedding the learning from the first wave of the COVID-19 pandemic and how the inclusion of progress and learning in winter planning preparations has been implemented within the organisation. Due

to the Trust fully compliant status with the 2019/20 EPRR Assurance Process, the EPRR Team completed the documentation and were not required to evidence progress against areas of non-compliance.

### Main Assurance

In respect of Kingston Hospital for Main Assurance Core Standards 1 – 69, the following RAG ratings were agreed at the review meeting with NHS England and NHS Improvement

Kingston Hospital is **100%** compliant with the core standards and therefore has an assessed level of compliance of **FULLY COMPLIANT**

Green ratings	Amber ratings	Red ratings
69	0	0

### Working with Partners

The Trusts EPRR Team works in collaboration with a range of partner agencies through formal standing meetings and ad hoc arrangements. Formal meetings of which the EPRR Team are members include the Royal Borough of Kingston Resilience Forum and the NHS England and NHS Improvement South Patch Meeting. The EPRR Team maintain a constant and proactive dialog with NHS England and NHS Improvement through the South Patch Team on through monthly catch-up meetings and ad hoc meetings. The purpose of these meetings is to ensure that effective and coordinated arrangements are in place for the Trust in accordance with the statutory obligations placed on the Trust by national policy and direction from NHS England and NHS Improvement.

### Community Engagement

#### Kingston Army Reservists

The EPRR Team has jointly exercised with members of the Army Reservist based at Kingston Army Reservist Centre. This afforded an opportunity for joint learning and continued and ongoing development of our EPRR Training and Exercising Programme.

#### Kingston University

The EPRR Team has also worked with Kingston University and students undertaken their degree in Hazards and Disaster Management. To give the students an opportunity to see the practical application of Emergency Planning within a healthcare setting. The EPRR Team is looking to build on this relationship and offer work experience placements within the team to afford a learning opportunity for both the students and the Trust EPRR Team.

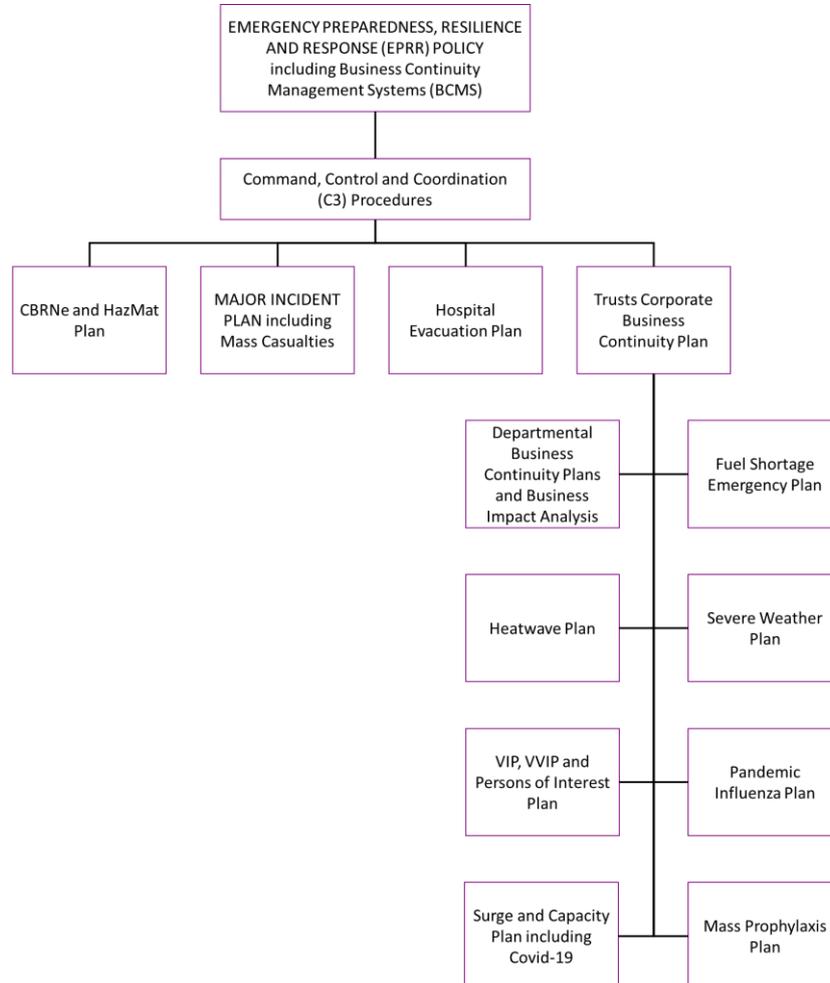
### Policies, Plans and Procedures

The EPRR Policy was updated and ratified by EMC on May 2021. This updated included the amalgamation of the Business Continuity Management Systems (BCMS) into one overarching document.

The EPRR Policy including BCMS is supported by a suite of EPRR Policies, Plans and Procedures to support the Trust in the management and mitigation of incident and/or disruptive events. These plans are supported by detailed aide memories (Action Cards) for use on activation of a plan.

The following diagram illustrates these plans:

### EPRR Policies, Plans and Procedures



### Training and Exercising

The Trust has a rolling training programme along with a programme of live, table-top, command post and communications exercises. The exercises are designed to test and develop our plans. The Trust is required to hold the following exercise under the NHS England EPRR Framework 2015 at a minimum:

- Communications exercise – minimum frequency – every six months
- Table-top exercise – minimum frequency – every 12 months
- Live play exercise – minimum frequency – every three years
- Command post exercise – minimum frequency – every three years

The EPRR Team has maintained training and exercising through the disruption caused by the Covid-19 pandemic. This has been achieved with liaising with the Infection, Prevention and Control Team and the department/service being trained and exercised. The EPRR Team have adapted the method of delivering this training and exercising by utilising new technologies and ways of working e.g., Microsoft Teams. Where possible, the EPRR Team have made a commitment to train face to face in a manner that's aides kinaesthetic-tactile learning.

### Exercise Jupiter Programme

The Exercise Jupiter Programme (Jupiter) comprises of a series of exercise that focus on the different stages of a Major Incident impacting the Trust. The exercise programme comprises of Communication Exercises, Tabletop Exercise and Live Exercises and Simulations. Jupiter is rolling and adapts to incorporate lessons identified from incidents, exercises, and participant's feedback. This maintains continued improvement and ensures that the programme stays relevant and fit for purpose. All exercises are created and facilitated by the EPRR Team in with liaison a departments Matron or Manager. Currently Jupiter has focused on the response activities undertaken by the Trust Emergency Department, Switchboard and Pharmacy. These departments are vital in the initial phase of a Major Incident. The Programme will continue to valid Major Incident Policies, Plans and Procedures across the Trust and will involve external partners.

### Exercise Mephitis Programme

The Exercise Mephitis Programme (Mephitis) was created in direct response to lessons identified in the debrief of a chemical incident that impacted the Trusts Emergency Department in November 2019. The Tabletop Exercise involves a team of ED consisting of a mixture of Nurses, Doctors and HCA. The exercise is adapted to incorporate lessons identified from incidents, exercises, and participant's feedback. This exercise validates the Chemical, Biological, Radiological, Nuclear, and explosive (CBRNe) and Hazardous Material (HazMat) Plan and the training that the EPRR Team delivers.

The EPRR Team works with the Security and Car Parking Manager in direct response to an incident in ED, to facilitate Lockdown Exercise in the Emergency Department. This is a collaborative exercise between members of security and the ED. Learning is identified from these exercises that is feedback into security and ED to maintain improvement and that the Lockdown exercise are relevant and fit for purpose.

The EPRR Team have used external observers to ensure that the training and exercises delivered by the team are patient focused

### Training and Exercising Key highlights

- All new On-Call Manager and Directors have been training in incident response
- All Nurses-in-Charge within the Emergency Department have been trained in Major Incident and CBRNe
- All Nurses-in-Charge have been participants of an Exercise Jupiter. Major Incident and Exercise Mephitis CBRNe Tabletop Exercise
- The figures below show what percentage of ED staff members have undergone Major Incident and CBRNe training
  - Band 7 – 100%
  - Band 6 – 92% (1 on mat leave)
  - Resus Team – 73% (2 new members of staff have recently started)
  - Paediatric team – 50% (4 new starters)
  - Band 2-4 – 60%
  - Band 5 – 60% (1 on long term sick and 2 on mat leave)
- The numbers above mean that all the Band 6 and 7 Nurses who would take charge of the Emergency Department during an incident have been Major Incident trained.

This training has been validated through their participation of a Tabletop and Live exercise.

- To date the EPRR Team have facilitated:
  - 5 Major Incident Live/Tabletop Exercises with ED (Exercise Jupiter Summit)
  - 1 Major Incident Tabletop Exercises with Pharmacy (Exercise Jupiter Aquilo)
  - 2 Communication Exercise with ED and Switchboard (Exercise Jupiter Prime)
  - 5 CBRNe Tabletop Exercises with ED (Exercise Mephitis Spargo)

It should be noted that due to the constraints of social distancing and infection control measures, staff members were unable to train in (don) the use of the CBRNe Powered Respirator Protective Suits (PRPS). This was identified as a risk to our ability to respond to a CBRNe or HazMat incident. Through close liaison with NHS England and NHS Improvement London and CBRNe experts from the London Ambulance Service and the Trusts Infection Prevention and Control Team, the EPRR Team is, as of 6<sup>th</sup> October, full CBRNe training recommenced including the donning and doffing for the CBRNe PRPS. Additional dates have been added to accommodate the backlog.

## **Incident Response**

The EPRR Team provided support and advice to Strategic and Tactical Command throughout the Trust response to the impact of Covid-19. This response lasted 380 days of Command, Control and Coordination. The Frequent external and internal demands for information required, meant that the EPRR Team had to adopt a 7-day working pattern to assist Tactical Command in the collation and submission of daily Situational Awareness Reports. Further SITREPS covering discharges, staffing, daily hospital data, PPE stocks, etc. were also required. The trusts response to these required the input of staff from across the trust. The provision of this information, often required at short noticed, presented a considerable challenge to all Trusts and the impact of the national Situational Reporting demands on Trusts has been escalated by the EPRR Team during the debrief and feedback session to the NHS England London EPRR Team with the recommendation that this should be addressed at national level.

## **Debriefing**

After the first wave of Covid-19 the EPRR Team facilitated 19 separate debriefing sessions to identify lessons and capture best practises. This process went down Cluster Lines to ensure that all staff both Clinical and Non-Clinical were able to contribute to this process and were afforded and opportunity to shape and improve the way in which the Trust collectively responses to incident and disruptive events.