

### Emergency Preparedness Resilience and Response

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| <b>Trust Board</b>  | <b>Item: 13</b>  |
| <b>Date: 28 July 2022</b>   | <b>Enclosure: I</b>  |
| <b>Purpose of the Report:</b><br>To report to the Board on the 2021 - 2022 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 checked="" type="checkbox"/>  |  |
| <b>Sponsor (Executive Lead):</b>  | Tracey Moore, Accountable executive Office (AEO) of EPRR, Director of Operations                                       |
| <b>Author:</b>  | M Laing EPRR Lead<br>D Parker EPRR Officer<br><a href="mailto:khft.preparedness@nhs.net">khft.preparedness@nhs.net</a> |
| <b>Author Contact Details:</b>  |  |
| <b>Risk Implications – Link to Assurance Framework or Corporate Risk Register:</b>  | NHS England and Improvement EPRR Core Standards<br>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><br><b>Safe</b> <input checked="" type="checkbox"/> <b>Effective</b> <input type="checkbox"/> <b>Caring</b> <input type="checkbox"/> <b>Responsive</b> <input type="checkbox"/> <b>Well Led</b> <input checked="" type="checkbox"/>  |  |
| <b>Link to Relevant Corporate Objective:</b>  |  |
| <b>Document Previously Considered By:</b>   | Emergency Preparedness Group   |
| <b>Recommendations:</b><br>The Trust Board is asked to note: <ul style="list-style-type: none"> <li>• The level of EPRR Assurance achieved – substantial compliance based on only 1 amber rating and 45 green ratings.</li> <li>• That all the direct EPRR elements of the assurance review were rated as fully compliant</li> <li>• Core Standard CS50 Data Protection and Security Toolkit is outside of the remit of the Trusts EPRR Team but was assessed as non-compliant in the assurance process</li> <li>• Identified areas of good practice</li> <li>• The key priorities for the next twelve months</li> <li>• Recommendations</li> </ul> |  |

# 2021-2022 Emergency Preparedness, Resilience and Response (EPRR)

## Assurance outcome

### 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.

### Overall level of compliance

In accordance with the requirements laid out in the EPRR 2021-22 Assurance Process Letter (27 July 2021), the overall level of compliance is based on the total percentage of amber and red ratings.

#### 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

| Green ratings | Amber ratings | Red ratings |
|---------------|---------------|-------------|
| 45            | 1             | 0           |

This means Trust has an assessed level of compliance of **Substantially Compliant**.

Amber rating was received for the following core standard:

- CS 50 Data Protection and Security Toolkit

The agreed pan London approach employed by the review panel to this standard is to use the Trust status on the NHS Digital website. NHS Digital lead on the assessment and monitoring of the Data Protection and Security Toolkit with internal Trust IT teams managing the actions required to meet the standards. The Trust is currently showing as '2021/22 approaching standards' hence a partially compliant rating.

The review panel acknowledged that this standard CS50 is outside of the remit of the Trust EPRR team. It is reflected within the report (1.0 FINAL) "that all the direct EPRR elements of the assurance review were rated as fully compliant". The IMT representative within the Emergency Preparedness Group will provide update on the deliver of the Data Protection and Security Toolkit, to ensure that the Trust AEO is fully sighted on the progress made in achieving this standard.

\*18 of the EPRR Core Standards were not assessed this year and 5 have been removed from EPRR Core Standard list

## **Deep Dive Assurance**

An additional set of questions on Oxygen Supply formed the 'deep dive' topic for this year. In respect of Kingston Hospital for Deep Dive Standards 1 - 7 the following RAG ratings were agreed at the review meeting with NHS England and NHS Improvement.

| <b>Green ratings</b> | <b>Amber ratings</b> | <b>Red ratings</b> |
|----------------------|----------------------|--------------------|
| 4                    | 3                    | 0                  |

### **Deep dive outcomes –**

The deep dive was reviewed by EPRR practitioners and not technical experts or authorised individuals. As such, the outcomes below are based on the expert opinion of the organisation. Amber ratings were received for the following core standards:

- DD4 Oxygen Supply
- DD6 Oxygen Systems
- DD7 Oxygen Systems

The Pharmacy and Estates representative within the Emergency Preparedness Group will provide update on the delivery of the actions undertaken to rectify the amber ratings (3), to ensure that the Trust AEO is fully sighted on the progress made in achieving these standards.

### **Assurance review meeting agreed actions**

NHS England and NHS Improvement (London) EPRR / Panel-agreed actions as follows:  
Kingston Hospital NHS Foundation Trust to:

- Confirm details of assurance report going to board
- Confirm details of future CBRN training dates for NHSEI attendance

### **Identified areas of good practice**

The review panel noted a high standard of documents submitted as evidence. Specific areas of good practice are listed below:

- CS 12 Major Incident – Good patient flow diagram
- CS 21 Lockdown – Trust training (Jupiter) programme (Exercise Jupiter is expanded upon in Appendix A)
- CS 48 BCMS Scope - inclusion of BC Risks; outline of BIAs and lists of essential/non-essential departments.
- CS 57 CBRNe Planning – Good plan and Action Cards (The Trusts CBRNe work is expanded upon in Appendix B)

### **Identified key priorities**

The key priorities as identified at the assurance review meeting for the next twelve months include:

- Resumption of in person training and exercising as and where restrictions permit.
- Continuation of the 'Jupiter' training regime.
- Review CBRNe Flow chart presentation (Colours in use may not be accessible for all).
- BC Audit Process to be fully explained within EPRR policy

- EPRR team to gain assurance from the information governance team and IT team that the actions required to ensure compliance against the data and security toolkit are achieved.
- EPRR team to obtain assurance from the estates team that the oxygen amber ratings are addressed.

### **2021 EPRR Assurance Report Conclusion**

The review panel concluded that despite the impacts of COVID, the Trust has continued to maintain a high level of preparedness.

The review Panel noted the ongoing provision of EPRR training throughout the challenging COVID response, however these standards were not assessed this year. It is anticipated that the Trust will be able to maintain and build on this provision when these standards return for the next EPRR assurance process in 2022-23.

The adaptability and resourcefulness of the Trust EPRR team in the continued provision of CBRNe training throughout the pandemic was commended by the panel. This combined with the sustained Command and Control oversight during this period, (currently being reinstated for the anticipated winter pressures), highlights to the panel the EPRR ethos that is embedded in the Trust.

Michael Laing

May 2022

## **Appendix A – Exercise Jupiter Programme**

### **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.

## **Appendix B – CBRNe Work**

The Trusts EPRR Team work closely with the Emergency Department (ED) Matron (Lead for CBRNe and Major Incident) to create a CBRNe Training syllabus that is fit for purpose. The EPRR Team and ED Matron have delivered 6 all day CBRNe Session to staff members of the ED. These sessions cover, both the theory and practical elements of the Trusts Response to a CBRNe Incident. To ensure that the staff have learn the theory of CBRNe there is a Tabletop Exercise (Exercise Mephitis, below) to valid the training. At the end of every session, there is a debrief. This allows the EPRR Team and ED Matron to capture lessons to improve the next training session.

### **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.