

Board of Directors

8th September 2022

Paper title:	NHS England Emergency Preparedness, Resilience & Response (EPRR) Assessment & Declaration	Agenda item 15
Presented by:	Tafadzwa Mugwagwa, Chief Operating Officer (and Accountable Emergency Officer)	
Prepared by:	Chris Wright, Emergency Planning & Resilience Officer	

Purpose of the report		
NHS England requires all NHS organisations to annually assess their ability to meet their Emergency Preparedness, Resilience & Response (EPRR) statutory obligations. This assurance is sought each autumn, and Trust Boards are to be made aware of the level of preparedness achieved. This report shows the results of our self-assessment for 2022.	For approval	
	For discussion	
	For information	X

Executive summary		
<p>NHS providers are required to provide annual assurance on their readiness to meet their Emergency Preparedness, Resilience & Response (EPRR) statutory obligations. Organisations must complete a formal self-assessment on several EPRR standards, as provided in the Civil Contingencies Act 2004, the Health & Social Care Act 2012, NHS guidance and the NHS Operating Framework.</p> <p>A regulated set of core items for all NHS providers is provided (as attached), with all questions to be answered showing the level achieved and actions to be taken to address any which fall below full compliance. BDCFT is assessed at 78.18% compliant (partial).</p>		
Do the recommendations in this paper have any impact upon the requirements of the protected groups identified by the Equality Act?	<p>State below 'Yes' or 'No'</p> <p>No</p>	If yes please set out what action has been taken to address this in your paper

Recommendation
<p>The Board of Directors is asked to:</p> <ul style="list-style-type: none"> Note the findings of this report. Agree with the assessment of compliance as PARTIAL

Strategic vision				
Please mark those that apply with an X				
Providing excellent quality services and seamless access	Creating the best place to work	Supporting people to live to their fullest potential	Financial sustainability growth and innovation	Governance and well-led
x	x	x	x	x

Care Quality Commission domains				
Please mark those that apply with an X				
Safe	Effective	Responsive	Caring	Well Led
x	x	x		x

Relationship to the Board Assurance Framework (BAF)	<p>The work contained with this report links to the following strategic risk(s) as identified in the BAF:</p> <ul style="list-style-type: none"> • All
Links to the Strategic Organisational Risk Register (SORR)	<p>The work contained with this report links to the following corporate risk(s) as identified in the SORR:</p> <ul style="list-style-type: none"> • All
Compliance and regulatory implications	<p>The following compliance and regulatory implications have been identified as a result of the work outlined in this report:</p> <ul style="list-style-type: none"> • Emergency Preparedness, Resilience & Response (EPRR) statutory obligations.

Comment by Accountable Emergency Officer

Pre-Covid BDCFT declared substantial levels of EPRR assurance with 52 of the 54 core standards being fully embedded in the last completed self-assessment in 2020. NHS England elected to suspend the annual self-assessment for the past two years due to the Covid pandemic, but have now re-introduced the EPRR Core Standards with an increased number of areas to address and with more stringent requirements, including some major new changes. These modifications are introduced primarily for the following reasons:

- As a direct result of the findings from legal proceedings in the Public Inquiries for Grenfell Tower and the Manchester Arena bombing.
- Lessons identified in the NHS response to the Covid-19 pandemic.
- Transformation of CCGs into ICBs, and the associated increase in EPRR responsibilities for the ICBs now that they are Category 1 responders.
- In preparation for the forthcoming Public Inquiry into the Covid-19 pandemic.

Overall the Core Standards have now been radically overhauled and contain some new aspects which have been created to enhance EPRR arrangements. The overall intent is to create a more robust and effective EPRR system for the entire NHS.

The self-assessment shows that overall BDCFT is partially compliant with the EPRR Core Standards for 2022, having fully completed (green rated) 43 out of the 55 standards required (equating to 78%). In addition, the Trust is partly compliant (amber rated) in the remaining 12 standards, and there are none where we have no level of compliance (red rated) in place at all (*see diagram below*).

Please choose your organisation type

Mental Health Providers

Domain	Total Applicable Standards	Fully Compliant	Partially Compliant	Not Compliant	Not Applicable
Governance	6	6	0	0	0
Duty to risk assess	2	0	2	0	0
Duty to maintain plans	11	7	4	0	0
Command and control	2	1	1	0	0
Training and exercising	4	3	1	0	0
Response	5	4	1	0	2
Warning and informing	4	4	0	0	0
Cooperation	4	4	0	0	3
Business continuity	10	9	1	0	1
CBRN	7	5	2	0	7
Total	55	43	12	0	13

Deep Dive	Total Applicable Standards	Fully Compliant	Partially Compliant	Non Compliant	Not Applicable
Evacuation and Shelter	13	13	0	0	0
Total	13	13	0	0	0

Percentage Compliance	78%
Overall Assessment	Partially Compliant

Assurance Rating Thresholds

- Fully Compliant = 100%
- Substantially Compliant = 99-89%
- Partially Compliant = 88-77%
- Non-Compliant = 76% or less

Calculated using the number of FULLY compliant standards

Notes

Please do not delete rows or columns from any sheet as this will stop the calculations

Please ensure you have the correct Organisation Type selected

The Overall Assessment excludes the Deep Dive questions

The areas where we are not fully compliant are due to two main factors; training/ exercising of staff and the review/update of plans. In consultation and agreement with regional NHS England EPRR leads for the North East and Yorkshire, these activities were suspended whilst the Trust was (and still is) responding to a real-life incident. NHS England EPRR leads readily accept that the majority of NHS providers will be 18-24 months behind where they would be if it wasn't for the need

to concentrate EPRR resources on real-life incident necessities. They concede that it is acceptable to show as amber where plans have been known to work previously but updates have been delayed due to Covid and Brexit operational work. This is the case for BDCFT, where work is underway to address the gaps, with lessons learned from the Covid pandemic being included in the review of planning documents. This work will be monitored to completion by the BDCFT Resilience Group and shared with health partners, to ensure that best practice is achieved.

Our evaluation reflects an accurate appraisal of our current status, and is purposely under-assessed to show our existing and realistic level of ability to respond to any emergency or untoward event, rather than show aspirational aims which would give an exaggerated impression of our proficiency.

Our completed assessment return has been compared and peer reviewed with other community and mental health provider organisations, and our findings largely reflect their own. BDCFT has the same level of compliance as both LYPFT and SWYFT.

Summary.

Overall, BDCFT retains a realistically reasonable level of assurance, and remains confident in our ability to maintain effective Emergency Preparedness, Resilience and Response measures for any incidents which may affect delivery of our services.

Those areas where actions can be taken to redress any shortfalls are already included in the EPRR workplan for the next 12 months, with the aim of once again achieving substantial assurance.

Signed:

Tafadzwa Mugwagwa
Chief Operating Officer (Accountable Emergency Officer)
Bradford District Care Foundation Trust
7th September 2022