NHS Waltham Forest Clinical Commissioning Group

Emergency Preparedness, Resilience and Response (EPRR) Policy

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Version	1.0
Amendments to Version	
Review date:	November 2018

Contents:

Document History:

Version	Approved	Date
1.0	WFCCG Executive Management Team	November 2016

1. Introduction

The NHS needs to plan for, and respond to a wide range of incidents and emergencies that could affect health or patient care. These could be anything from extreme weather conditions to an outbreak of an infectious disease or a major transport accident. The Civil Contingencies Act (2004) requires NHS organisations, and providers of NHS-funded care to show that they can deal with such incidents while maintaining services to patients.

Under the Civil Contingencies Act 2004 NHS Waltham Forest Clinical Commissioning Group (WFCCG) are defined as Category 2 responders, meaning that there is a duty to cooperate and share information with the Category 1 responders.

In addition to meeting legislative duties, WFCCG are required to comply with guidance and framework documents, including but not limited to:

- NHS England Business Continuity Management Framework
- NHS England Core Standards for Emergency Preparedness Resilience and Response (EPRR)
- NHS England EPRR Framework (2015)
- NHS England Operating Framework – Response to Pandemic Influenza

WFCCG are also committed to implementing an integrated and robust Business Continuity Management System by meeting a number of statutory duties in relation to Emergency and Business Continuity Planning, to ensure the continued delivery of safe and effective healthcare commissioning and management.

This is achieved through the publication, testing and exercising of plans for critical functions and key services in accordance with the aforementioned guidance.

This policy outlines how compliance will be achieved against NHS England's national standards for Emergency Preparedness, Resilience and Response (EPRR) and Business Continuity (BC) across WFCCG, detailing the minimum requirements for planning and responding to a major incident whilst maintaining key services via business continuity arrangements.

2. Policy Statement

WFCCG will ensure that they are capable of responding to major incidents of any scale in a way that delivers optimum care and assistance to those affected, and one that minimises the consequential disruption to healthcare services and help brings about a speedy return to normal levels of functioning.

Furthermore the CCG will have in place business continuity and contingency plans that allow it to continue to provide its core functions during a major incident, so far as is practicable and to recover from the additional pressure that an incident may place on an organisation.

In addition to its duties contained within the Civil Contingency Act, the CCG recognises its EPRR responsibilities as detailed within section 46 of the Health & Social Care Act 2012 (H&SCA) and will, in partnership with its commissioned services, meet this responsibility through:

- Building upon the existing strengths of current multi-agency coordination, and co-operation which includes local NHS Trusts and other Category 1 Responders.
- Ensuring that responsibilities of the Borough Resilience Forums and Local Health Resilience Partnership enhance any response to emergency arrangements, both during the response and recovery phase.
- Fully integrating with partner agencies emergency arrangements, in supporting the local health economy.
- Reviewing the state of readiness and operability to extend further, with the assistance of new and improved partnerships, the capability to handle a new kind and potential magnitude of threat.
- Ensuring that plans for business continuity are in place.
- Cultivating a culture within the CCG to make emergency preparedness an intrinsic element of management and operations.

In order to achieve this WFCCG directors are part of the WELC 24/7 On-Call Director Function. The On-Call Director will hold a pager and will receive calls and respond to:

- Major Incident Notifications
- Surge Management/Capacity Issues

The on-call rota is managed by North East London CSU surge team, and published along with all other relevant on call information, via a weekly EPRR email circulated to all directors, and assistant directors.

3. Purpose

The purpose of this document is to ensure that Waltham Forest CCG acts in accordance with the CCA, H&SCA and the NHS England national policy and guidance by undertaking the duties listed below:
- To ensure that major incident and continuity plans have been established and are well communicated.
- To ensure that the plans address the consequences of all situations that might feasibly occur.
- To ensure that plans involve robust arrangements for the operational recovery from all such incidents.
- To ensure that all key stakeholders are consulted and collaborated with concerning their role in the plan and that they understand those responsibilities.
- To ensure that the plans are tested and are regularly reviewed.
- To ensure that funding and resources are available to respond effectively to major incidents and business disruptions
- To ensure that staff receive BC/EPRR training that is commensurate with their role and responsibilities.
- To ensure that a risk based approach to planning is undertaken, and that all risks are assessed, mitigated and recorded.
- To ensure that indicators demonstrating emergency preparedness and/or early warning of risk are used within contracts and service specifications.
- To ensure that the whole system is monitored and audited regularly.

4. Command and Control (including On Call)

4.1 Command and Control

The WFCCG's command and control duties are managed by NEL CSU. The link to the on call Manual is below.

N:\WalthamForestCCG\Governance\Emergency Preparedness EPRR\On Call Director and Surge\On call Manual 2016

5. Roles and Responsibilities

5.1 CCG Executive Board
The CCG Executive Board are accountable to the public and NHS England for ensuring that the EPRR/BC framework is in place to ensure effective responses to incidents and to safeguard that in the event of a disruption to services the public continue to receive the best quality and range of services it is reasonable practical to deliver and that key services are maintained.

5.2 Chief Officer/ Accountable Emergency Officer
The Chief Officer has overall responsibility for ensuring there are effective arrangements for EPRR and Business Continuity management in place within WFCCG and for meeting statutory requirements and guidance. The Chief Office is also the Accountable Emergency officer

The Accountable Emergency Officer (AEO) as required under the H&SC Act 2012, is responsible for the strategic implementation of major incident and business continuity planning in accordance with the aims as detailed within section three (3) of this policy.

5.3 On-Call Director
The on-call director is responsible for handling the initial response to an incident, responding to any NHS England (London) resource requests and is responsible for providing NHS England (London) with situation reports. The on-call director is responsible for briefing and updating the AEO and Chief Operating Officers of the incident response.

5.4 CCGs EPRR Lead
The CCGs EPRR Lead is responsible for all aspects of operational implementation of the EPRR policy.

Specific responsibilities include:
- Ensuring WFCCGs fulfils its responsibly as a category 2 responder under the CCA and other associated guidance
- Ensuring that the CCG jointly plans with NHS England London, Acute Trusts, Community and Mental Health Providers, Primary Care, Local Authorities, and other category 1&2 responders as required.

Developing and continuously monitoring the BC/EPRR arrangements.
- Ensuring that staff are appropriately trained and have the necessary skills to carry out their role.
- Providing regular updates and reports as required to the Accountable Emergency Officer and CCG board/governing body.
- Overseeing the audit and fit for purpose requirements for both EPRR and business continuity.

- Represent the CCG at Borough Resilience Forums, NHS EPRR Network meetings and multi-agency EPRR events.
- Providing guidance, advice and support for health emergency preparedness to the WFCCG.

5.5 North East London CCGs Resilience Forum

This group is made up of representatives from NHS CCGS in North East London. Members of this Group have responsibility for their operational area and also have responsibility for ensuring that the resilience policies and procedures and emergency plans are adopted and that appropriate staff are trained and made aware of their roles and responsibilities. The Resilience Forum is also be responsible for ensuring that exercises are undertaken and that improvements are implemented where required.

5.6 North East London Local Health Resilience Partnership (LHRP)

The AEO or a nominated representative have a duty to attend the North East London LHRP. The LHRP provides a strategic forum for NHS organisations to facilitate health sector preparedness and planning for emergencies.

5.7 Staff with Specific EPRR Resilience Roles

Members of staff identified in EPRR arrangements have a responsibility for attending training and responding to any incidents as detailed within the appropriate plans. It is the responsibility of each member of staff to identify a suitable substitute representative and ensure they are trained in accordance with the relevant EPRR functions.

5.8 BCMS Specific Roles

CCG executive directors, heads of departments, and business continuity leads:

The aforementioned staff have a responsibility to ensure the provision of;
- Maintained and reviewed Business Impact Analysis
- Maintained and review local Business Continuity Plans in response to the outcomes of Business Impact Analysis and Risk Assessment
- Promote a preparedness and resilience culture within their team;
- Ensure an appropriate response is made during an emergency or Business continuity event.

5.9 All CCG Staff

All staff are responsible for co-operating with the implementation of this Policy and any relevant plans as part of their normal duties and responsibilities.

6. Risk Management

In implementing an effective resilience system the BC/EPRR processes are integrated within the WFCCG Risk Management Framework allowing consistent risk identification, assessment, mitigation and escalation to the WFCCG Governing Body.

Risk and Hazard assessments will relate to both internal and external potential threats and will take into consideration risks outlined on the LHRP, National and Community Risk registers.

The EPRR lead with the heads of departments is be responsible for implementing risk mitigation to reduce likelihood and/or impact of risks identified (For further information please refer to the WFCCG Risk Management Framework)

7. Development of Plans

EPRR arrangements enable the CCG to respond to the identified risks

At present specific plans include:

- Major Incident Response Plan
- Severe Weather
- Heatwave Procedures
- Cold Weather Plan
- Bomb Threat Plan
- Fuel Plan
- Flu Pandemic Plan
- Infectious Outbreak Plan
- Recovery Plan
- IT Disaster Recovery Plan

The above list is maintained in accordance with NHS England's EPRR Core Standards. Multi agency plans will be developed through the Borough Resilience Forums (BRF) and Health Protection Forums (HPF). Assurance in respect of EPRR arrangements are regularly provided to the CCG Governing Body.

8. Business Continuity Management (BCM)

WFCCG Business Continuity plan provides a structure through which:
- A comprehensive BCM system is established and maintained;
- Business impact analysis and risk assessment is applied to key services and their supporting prioritised activities, processes and resources;
- Key services, together with their supporting prioritised activities, process and resources are identified;
- Risk mitigation strategies are applied to reduce the impact of disruption to key services in line with the Risk Management Strategy;
- Plans are developed to ensure restoration of key services to a minimum acceptable standard following disruption;
- Invocation of business continuity plans can be managed;
- Plans are subject to ongoing exercising and revision.

8.1 Benefits of Effective BCMs
An effective BCM plan enables WFCCG to;
- Continue to provide key services in times of disruption;
- Make best use of personnel and other resources in times when both may be scarce;
- Reduce the period of disruption to CCG and their users, partners and stakeholders;
- Resume normal working more efficiently and effectively after a period of disruption;
- Comply with standards of corporate governance;
- Improve the resilience of the CCG'S infrastructure to reduce the likelihood of disruption; and
- Reduce the operational, financial and reputational impact of any disruption.

The WFCCG business continuity management plan is available on its web site and internal shared drive.

9. BCM Definitions

9.1 Business Continuity
The strategic and tactical capability of the organisation to plan for, and respond to incidents, and business disruptions, in order to continue business operations at an acceptable pre-defined level.

9.2 Business Continuity Management (BCM)
Business Continuity Management (BCM) is a tool which enables organisations to safeguard their business operations against threats by ensuring that in the event of a business disruption or incident, regardless of cause, essential services can be maintained and normal service restored as soon as possible.

9.3 Business Disruption
An event or incident that disrupts personnel, buildings or the operational procedures of one or more services, requiring the implementation of continuity measures to restore normal function. Essential services must be maintained and normal services restored as soon as possible.

9.4 Business Continuity Plan (BCP)
Documented collection of procedures and information that is developed, compiled, and maintained; in readiness for use in an incident, to enable an organisation to continue to deliver its critical activities at an acceptable pre-defined level.

9.5 Business Impact Analysis (BIA)
The process of analysing activities and the effect that a business disruption may have upon them.

9.6 Maximum Tolerable Period of Disruption (MTPOD)
The time it would take for adverse impacts, which might arise as a result of not providing a product/service or performing an activity, to become unacceptable.

9.7 Minimum Business Continuity Objective (MBCO)
The minimum level of services and/or products that is acceptable to the organisation to achieve its business objectives during a disruption.

9.8 Recovery Time Objective (RTO)
The period of time following an incident within which:

- Service or function must be resumed
- Activity must be resumed; or
- Resources must be recovered.

The Recovery Time Objective must be less than the Maximum Tolerable Period of Disruption.

10. WFCCG Business Impact Analysis Process (BIA)

BIA documentation provides the framework by which BIAs will be undertaken by WFCCG to establish:

- Prioritised activities
- Locations for prioritised activities
- Resources required for prioritised activities
- Dependencies for prioritised activities
- Service level risk assessments.

Business impact analysis also determines the impact of a disruption to the prioritised activities, which support key services by;

- Assessing over time the impacts that may occur if the activity was disrupted
- Establishing the MTPOD identifying;
  - o the maximum time period after the start of the disruption within which the activity needs to be resumed
  - o the minimum level at which the activity needs to be performed on its resumption
  - o the level of time within which normal levels of operation need to be resumed or Recovery Time Objective.

Business impact analysis should be reviewed every three months or after any major changes to the service or any of the teams.

11. National Assurance Emergency Preparedness, Resilience and Response

The EPRR National Assurance Process, developed in 2013, ensures that NHS organisations are working towards meeting the requirements for EPRR, as set out in the NHS England Core Standards Matrix and the NHS England planning framework.

The EPRR team will ensure that the CCG meet the timescales outlined in the EPRR assurance process year on year, including:

- CCG self-assessment against the NHS England Core Standards for EPRR.
- Ensure CCG Boards (or equivalent) are sighted on the level of compliance achieved, the results of the self-assessment and the action/work plan for the forthcoming period
- Ensure that any additional assurance, e.g. 'Deep dive' into Pandemic Flu preparedness, is undertaken as required.

12. Training

Those individuals undertaking roles and responsibilities within Business Continuity/EPRR must undertake appropriate training for their function, including in line with the competencies for their role/function provided in NHS England's EPRR Framework and 'National Occupational Standards'.

Training will be undertaken in line with the annual training and exercise schedule agreed by CCG Executive Boards, and should occur regularly to familiarise staff with command and control procedures and to ensure there is no erosion of skills.

Senior managers are responsible for ensuring that all staff within their department are aware of the training available and encourage attendance on recommended courses.

13. Testing & Exercising

Plans developed to allow organisations to respond efficiently and effectively, must be tested regularly using recognised and agreed processes such as table top or live exercises.

Roles within the plan (not individuals) are exercised to ensure any specific role is fit for purpose and encapsulates all necessary functions and actions to be carried out during an incident.

Through the exercising process, individuals have the opportunity to practice their skills and increase their confidence, knowledge and skill base in preparation for responding at the time of a real incident.

Testing and exercising will be undertaken in line with the annual Training and Exercise Schedule agreed by CCG Executive Boards and in line with NHS England's EPRR Framework 2016 which defines the process and timescales for exercising. This includes a minimum expectation of a communications exercise every 6 months, a table top exercise ever year, and a live exercise every three years, in addition to any activation.

14. Dissemination, Implementation and Access to this Document

This policy will be available to all staff on the WFCCG web site and internal shared drive. Awareness will be raised to managers of this policy via the Global Email system and other relevant corporate communication channels. Each department is required to disseminate this policy through normal governance procedures.

15. Monitoring Arrangements

To ensure effectiveness, efficiency and compliance, the Accountable Emergency Officer with the assistance of the EPRR Lead, will carry out bi-annual reviews of this policy to ensure that is remains in line with current employment law and NHS guidance.

16. Audit arrangements

The policy will be audited throughout the year both internally and externally. The EPRR Lead will also ensure that any appropriate external audits tools and assurance processes are conducted on a regular basis, examples of external audit tools include:

- Civil Contingencies Secretariat assurance;
- Provision of assurance to NHS England;
- Cabinet Office Civil Contingencies Secretariat National Capabilities Survey.

17. Equality Statement

The CCG is committed to treating every individual equally and will not discriminate any groups of people or treat them differently because of their race, gender, disability, age, religion or belief systems or their sexual orientation

18. References

For further more detailed information regarding the contents of this policy please refer to the following documents:

- Civil Contingencies Act 2004;
- The NHS England EPRR Framework 2015;
- NHS England Business Continuity Management Framework (service resilience) (2013) ;
- NHS England Core Standards for Emergency Preparedness Resilience and Response;
- ISO 22301 – Societal Security – Business Continuity Management Systems – Requirements.