

Front sheet: Public Board of Directors
Item number: 20
Date: 29 January 2025

Private/ public paper:	Public
Report Title:	Emergency Planning Resilience and Response (EPRR)
Author(s) Accountable Director:	Neil Robertson, executive director of operations and accountable emergency officer
Presented by:	Neil Robertson, executive director of operations
Vision and values:	The Trust Emergency Planning Resilience and Response (EPRR) plan ensures that we can mobilise resources in the event of any incident (effective use of resources) and ensures delivery of continuity of care to an optimum level (deliver outstanding care). The plan aims to ensure a safe place for staff to work (great place to work) and that business continuity plans are inclusive in their development and delivery (ensuring our services are inclusive).
Purpose and key actions:	The purpose of this paper is to present the progress to date in SHSC achieving the NHSE core standards and to seek from the Board of Directors approval in the EPRR action/work plan for 2025.
Executive summary:	<p>SHSC has been rated as:</p> <ul style="list-style-type: none"> Compliant with 38 standards (green). Partially compliant with 20 standards (amber). Non-compliant with 0 standards (red). <p>As of 2025, SHSC is compliant with 65% of the NHSE EPRR core standards. Despite a significant improvement, our overall position is non-complaint. We are aiming to be fully compliant in 2 years.</p> <p>Further details of the areas of non-compliance and summary mitigating actions are included in the report. The EPRR Work Programme for 2025-26 is attached at appendix 1.</p> <p>The attached plan ensures that we address these gaps to bring us to full compliance in 2026/27.</p>

Which strategic objective does the item primarily contribute to:					
Effective Use of Resources	Yes	X	<i>No</i>		
Deliver Outstanding Care	Yes	X	<i>No</i>		
Great Place to Work	Yes	X	<i>No</i>		
Ensuring our services are inclusive	Yes	X	<i>No</i>		
What is the contribution to the delivery of standards, legal obligations and/or wider system and partnership working.					
Our Legal Requirements -					
<ul style="list-style-type: none"> <i>NHS Act 2006</i>: This Act places a duty on NHS England (including SHSC) to plan for and respond to a wide range of incidents and emergencies which could affect health or patient care 					

- *NHS England EPRR Framework 2022*: Enables the NHS in England (including SHSC) to meet its obligations under the CCA to ensure effective arrangements are in place to deliver appropriate care to patients affected by an emergency or incident. Sets the Core Standards that NHS organisations must meet as part of the NHS Standard Contracts.

Partnerships – working together to have a bigger impact.

- SHSC work in partnership with other Mental Health and Community Trusts through the coordination of the Yorkshire and Humber EPRR MH/Community Group. This group has established and tested a Northeast & Yorkshire Low & Medium Secure Adult Mental Health Services Evacuation Framework. In December 2024, representatives from SHSC attended Exercise Arcadia 2 which was an online exercise to test and validate the Framework Plan.
- SHSC attend Local and Regional Health Resilience Partnerships (LHRP/RHRP) whereby partners discuss any issues related to Emergency Preparedness Resilience and Response. During these meetings, partners share information on lessons learned from recent incidents or exercises.

BAF and corporate risk/s:	<p>No BAF or corporate risks, however, directorate risks are:</p> <ul style="list-style-type: none"> • There is a risk to the delivery of patient care due to an inability to provide 24hrs environment that meet national expectations for building design and safety following emergencies such as fire or flood due to a lack of contingency beds /wards. • There is a low risk of self-presenters attending SHSC sites caused by them having been exposed, or possibly exposed to Chemical, Biological, Radiological, Nuclear substances from a HAZMAT/CBRN incident resulting in potential harm to staff and service users. • There is a risk that we do not achieve full compliance against NHS EPRR standards due to the level of unavailability of training for relevant members of our work force. We could mitigate this by bringing in external trainers.
Any background papers/ items previously considered:	The plan was presented at the Audit and Risk Committee in January 2025, who supported the plan.
Recommendation:	<p>The Board of Directors are asked to:</p> <ul style="list-style-type: none"> • note the progress to date in achieving the NHSE core standards • to approve the EPPR action/work plan for 2025. • consider if they are satisfied with this plan for the next phase of reaching full compliance with the NHSE EPRR Core Standards.

Public Board of Directors Emergency Planning Resilience and Response (EPRR) 29 January 2025

1. Purpose of the report

The purpose of this paper is to present the progress to date in SHSC achieving the NHSE core standards and to seek from the Board of Directors support in the EPRR action/work plan for 2025.

The plan was presented at the Audit and Risk Committee on the 21 January 2025, who supported the plan.

2. Background

The Trust Emergency Preparedness Group aims to govern the Trust's readiness to respond to emergency incidents which may affect the health, safety or wellbeing of patients, our staff, or members of the public. The Trust Emergency Preparedness Group also governs our progress to becoming compliant with the NHS EPRR Framework. This is fundamental to our organisational aim to improve the mental, physical and social wellbeing of the people in our communities

3. Details of the areas of non-compliance and summary mitigating actions

Area of Non-Compliance	Mitigation Actions
Duty To Maintain Plans: <ul style="list-style-type: none"> • Major and Critical Incidents Response Plan and Business Continuity Plan • Protected Individuals (VIP) Policy • Business Continuity Plan • Cyber Incident Response Plan • CBRN/Hazmat Response Plan 	<p>These plans will be reviewed and updated according to the recommendations and suggestions received from the ICB EPRR Team and NHS E.</p> <p>Plans review will be part of the EPRR Work Programme for this year.</p> <p>If these plans are not reviewed and exercised, there is a risk of not being compliant with the legal obligations (Civil Contingencies Act 2004 and NHS England EPRR Framework 2022). As consequences, SHSC may not be able to respond to incidents. Health, life and security of staff, service users may be put at risk. This may also trigger a trust reputational issue.</p>
Training and exercising	<p>In the line of training need analysis, and as one of the Civil Contingencies Act 2004 and NHS EPRR Framework 2022</p>

	<p>requirements, the following training sessions will take place this year:</p> <ul style="list-style-type: none"> • The Principles of Health Command training (Tactical and strategic on Call Officers) • Business Continuity • Legal Training • Media Training • Loggist training <p>The following exercise are also expected to take place this year and will also be part of the EPRR Work Programme:</p> <ul style="list-style-type: none"> • Communication Exercise • Business Continuity Exercise • Command and Control • Incident Control Centre Test • Summer and winter preparedness sessions • Hazmat/CBRN
<p>Business Continuity</p>	<ul style="list-style-type: none"> • Business Continuity (BC) domain is one of the areas to focus on. <p>As part of the EPRR Work Programme, the following actions will be done:</p> <ul style="list-style-type: none"> • There will be a new BCP Template to make sure the plan contains or needed information • The following annexes will be added to BCPs: <ul style="list-style-type: none"> ➤ Plan activation and Escalation Process ➤ Draft Agenda for Tactical / Strategic commanders ➤ Actions Cards for different BC incident/ scenario (staffing issue, IT issue, supply issue, adverse weather issue, etc.) ➤ BC Incident Situation Report Form ➤ Incident Impact Assessment Form ➤ BC Incident Checklist Form
<p>Hazmat/ CBRN</p>	<p>SHSC will continue to work closely with Yorkshire Ambulance Service to make sure there an appropriate Hazmat/CBRN training packages for front line staff, clinical staff and on call staff.</p>

4. Recommendations

The Board of Directors are asked to:

- **note the progress to date in** achieving the NHSE core standards
- to **approve** the EPRR action/work plan for 2025.
- **consider if** they are satisfied with this plan for the next phase of reaching full compliance with the NHSE EPRR Core Standards

5. Appendices

Appendix 1 EPRR Work Programme for 2025-26

EPRR Programme 25/26

Exercise Table

Exercise type	Exercise Date	Review in period	Exercise due date	Requires Review
Communication Systems	10/09/2024	0.5	11/03/2025	Within date
ICC Equipment Test	05/12/2024	0.25	18/03/2025	Within date
Live Exercise	19/08/2023	3	20/08/2026	Within date
Tabletop Exercise	08/10/2023	1	17/09/2025	Within date
CBRN /Hazmat Exercise	01/08/2024	1	16/06/2025	Requires review
Business Continuity Exercise	05/01/2024	1	24/07/2025	Within date

NHS E EPRR Core Standards

Domain	Core Standards	Actions/Risks	Target Date	lead	Completed Date	Progression report
Governance	Duty to maintain Plans:	SHSC need to put in place VIP Policy to be able to respond and manage 'protected individuals' including Very Important Persons (VIPs), high profile patients and visitors to the site.	24/04/25	Emergency Planning Manager (EPM)	Within date	
	<ul style="list-style-type: none"> Protected individuals (VIP Policy) 					
	<ul style="list-style-type: none"> Emergency Preparedness, Resilience and Response (EPRR) Policy 	EPRR Policy needs to be reviewed and updated to meet the requirements of the Civil Contingencies Act (CCA)2004 and the EPRR Framework	28/03/2025	EPM	Within date	
	<ul style="list-style-type: none"> Business Continuity Policy 	Same as above	28/03/2025	EPM	Within date	

	<ul style="list-style-type: none"> • Lockdown Policy 	Same as above	28/03/2025	EPM	Within date	
	<ul style="list-style-type: none"> • Adverse Weather Plan 	To meet the requirements of CCA2004 and EPRR Framework	28/03/2025	EPM	Within date	
	<ul style="list-style-type: none"> • CBRN Response Plan 	Same as above	20/06/2025	EPM	Within date	
	<ul style="list-style-type: none"> • Fuel Shortage Contingency Plan 	Same as above	25/07/2025	EPM	Within date	
	<ul style="list-style-type: none"> • Pandemic Flu Plan 	Same as above	24/10/2025	EPM/ Lead Infection Prevention & Control Nurse	Within date	
	<ul style="list-style-type: none"> • Major and Critical Incidents Plan 	Same as above	31/01/2025	EPM	Within date	

Command and Control	Trained On Call Staff	<p>The identified individual especially those on Call (Senior Managers and Directors)</p> <ul style="list-style-type: none"> • Should be trained according to the NHS England EPRR competencies (National Minimum Occupational Standards) • Has a specific process to adopt during the decision making • Is aware who should be consulted and informed during decision making • Should ensure appropriate records are maintained throughout. • Trained in accordance with the TNA identified 	On going	EPM	Within date	

		frequency.				
Training and exercising	<ul style="list-style-type: none"> • Business Continuity • Loggist Training • CBRN Training • CBRN Awareness Session 	EPRR forms part of mandatory training on induction for all staff. Staff allocated to ICC duties will receive training to carry out the actions of their role as per the Major and Critical Incident Plan.	On going	EPM		
Cooperation	Local Health Resilience Partnerships (LHRP)	The EMP and Accountable Emergency Officer will continue to attend multi agency meetings, training and exercising sessions throughout the year	As and when	EPM, AEO		