

**Agenda item 3.iii**

Report to:	Trust Board	7 October 2021
Report from:	Chief Operating Officer	
<b>Principal Objective/ Strategy and Title</b>	<b>Assessment of Emergency Planning Core Standards</b>	
Board Assurance Framework Entries	N/A	
Regulatory Requirement	N/A	
Equality Considerations	N/A	
Key Risks	As above	
For:	Note	

**PURPOSE**

The purpose of this paper is to update the Board on the annual assessment of Trust compliance against the Emergency Planning Core Standards.

**ANNUAL ASSURANCE PROCESS**

NHS England maintains a statutory duty to seek formal assurance of both its own and the NHS in England's EPRR (Emergency preparedness, resilience and response) readiness. This is discharged through the EPRR annual assurance process. Due to the demands on the NHS, the 2020 process was much reduced and focused on learning from the first COVID-19 wave and the preparation for future waves and winter. In July 2021, NHSE/I notified all providers that the 2021 EPRR assurance process would return some of the previous mechanisms to the process, but also acknowledged the previous 18 months and the changing landscape of the NHS.

The EPRR assurance process usually uses the NHS England Core Standards for EPRR. However, as a result of the events of 2020, these standards did not receive their tri-annual review and, as a consequence, not all standards reflect current best practice. It has been decided, therefore, to remove a small number of standards to accommodate this year's assurance process. The adapted standards and the Trust's self-assessment against them is attached in appendix 1.

Organisations have been requested to undertake a self-assessment against individual core standards relevant to their organisation type and rate their compliance for each. The compliance level for each standard is defines as:

**Compliance level**

Fully compliant  
Partially compliant

**Definition**

Fully compliant with core standard.  
Not compliant with core standard.  
The organisation's EPRR work programme demonstrates evidence of progress and an action plan to achieve full compliance within the next 12 months.

Non-compliant

Not compliant with the standard.  
In line with the organisation's EPRR work programme, compliance will not be reached within the next 12 months.

Through the national response to the COVID-19 pandemic a number of factors that inhibited some organisation's ability to increase inpatient capacity have been identified. One of these factors is internal piped oxygen system capacity, which have a number of interdependent components to increasing volume and flow rates. In order to better understand the resilience of our internal piped oxygen systems the 2021-2022 EPRR annual assurance process includes a deep dive on this area.

The number of core standards applicable to each organisation type is different. The overall EPRR assurance rating is based on the percentage of core standards the organisations assess itself as being 'fully compliant' with. This is explained in more detail below:

<b>Organisational rating</b>	<b>Criteria</b>
Fully compliant	The organisation is fully compliant against 100% of the relevant NHS EPRR Core Standards
Substantial compliance	The organisation is fully compliant against 89-99% of the relevant NHS EPRR Core Standards
Partial compliance	The organisation is fully compliant against 77-88% of the relevant NHS EPRR Core Standards
Non-compliant	The organisation is fully compliant up to 76% of the relevant NHS EPRR Core Standards

All NHS organisations have a requirement to undertake a self-assessment against the 2021 amended core standards relevant to their organisation. These should then be taken to a public board or governing body meeting for agreement. Local Health Resilience Partnerships (LHRP), have then have been asked to work with their constituent organisations to agree a process to gain confidence with organisational ratings and provide an environment to promote the sharing of good practice.

NHS England and NHS Improvement regional Heads of EPRR will then work with LHRP co-chairs to agree a process to obtain organisation level assurance ratings and provide an environment to promote the sharing of good practice across their region. NHS England and NHS Improvement regional heads of EPRR are required to submit the assurance ratings for each of their organisations and description of their regional process to myself before Friday 31 December 2021.

## **ROYAL PAPWORTH ASSESSMENT**

The Trust leads and Emergency Accountable Officer undertook the assurance self- assessment over the month of August and collected evidence to support it's rating of each of the 42 adjusted standards that are applicable to it. The conclusion of the assessment is that the Trust is fully compliant against 100% of the relevant NHS EPRR Core Standards.

The Trust assessment against the additional seven deep dive criteria concluded that there is substantial compliance against these criteria, with full compliance achieved against all but one criteria. Partial compliance was recorded against the criteria for medical gas workforce as there is training

planned but outstanding for designated nursing officers. It is anticipated that this will be resolved in quarter 3 of this year.

The assessment conclusions were shared with Sue Fox, co-chair of the Cambridge and Peterborough LHRP at a meeting on 17 September 2021.

**Recommendation**

The Board is asked to note the contents of this report and the conclusion of our self-assessment against the EPRR core standards.