

Agenda item 4.iii

Report to:	Board of Directors	2 November 2023
Report from:	Harvey McEnroe – Chief Operating Officer Operational Lead EPRR	
Principal Objective/ Strategy and Title	EPRR Core Standards – Additional Update	
Board Assurance Framework Entries	N/A	
Regulatory Requirement	Civil Contingencies Act (2004) NHS E Emergency Preparedness Resilience and Response (EPRR) Framework The NHS Act (2006) (as amended) ISO22301:2019 Business continuity management	
Equality Considerations	Health Inequalities	
Key Risks	As above	
For:	Note	

1. PURPOSE

The purpose of this paper is to update the Board on the annual assessment of Trust Compliance against the Emergency preparedness, resilience, and response (EPRR) Core Standards post work completed this last six-month period. This is an additional report, please refer to EPRR Annual Assurance update report ‘EPRR Core Standards – 1st Submission 2023’ (Appendix 1 - Reference Pack).

2. UPDATE

As of October 4th, 2023, the Trust self-declaration has changed to ‘Substantial’ compliance, from the earlier ‘partial’ compliance. This is owing to work within the EPRR portfolio being completed thus far, changing five areas of the core standard domains to ‘fully compliant’. This brought our overall declaration to substantial compliance. The August 2023 submission we declared fully compliant in 48 sub-domains which gave us an overall rating of ‘partial compliance’. The October updated submission saw fully compliant in 52 sub-domains, giving an overall rating of ‘substantial compliance’.

The Integrated Care Board (ICB) have accepted this and our supporting evidence. Our dedicated EPRR Lead will continue with working toward a level of full compliance to support the Trusts legal compliance, resilience, and preparedness.

3. CHANGES

The following specific domains and sub-domains were changed to green ‘Fully compliant’, changing our overall ratings to ‘Substantial’.

3.1 Domain 1 Governance

The organisation now has a dedicated EPRR policy which has been specifically requested by the ICB and NHS contracts post self-assessment 2021-2022. Information that the EPRR Policy should contain is found in fragments across the Trust in several other documents, however, it was felt that an overarching EPRR Policy will simplify the situation and provide a central governance for the organisation and align us with the core standards framework.

This domain is fully compliant upon completion of the ratification process for the EPRR Policy October 2023. The EPRR Policy has been discussed at the Emergency Planning Committee in June 2023, there were amendments to be made. It was returned to the EPC in September 2023, then Quality and Risk for ratification and Board Performance Committee as a final step October 2023.

3.2 Domain 5 Testing and Exercising

This domain was the deep dive for 2023. For this domain we were deficit a training needs analysis (TNA) in line with the mandated national Minimum Occupational Standards (MoS) and a robust recording system of staff training records. In the past staff have held their own professional development training records. Since the submission of the self-assessment, a TNA has been authored and a centralised collation of training records reviewed. This has changed two sub-domains fully compliant.

Further work will be completed on the TNA and mapping this to training courses that are available for staff, as well as further work on the centralised holding of training records. However, the ICB are satisfied that these domains can be fully complaint in this assessment.

3.3 Domain 10 CBRNe

The formal ratification and publication of the EPRR policy has enabled this domain to be changed to fully compliant in all sub-domains. Further work is being undertaken to collaborate with Cambridge University Hospital (CUH) for the training and exercising in this domain and the self-presenter program is being reinitiated, after a post-Covid update, in November 2023.

4. TIMELINE

With current workloads, additional industrial action pressures and limited dedicated EPRR hours per week, the estimated timeline for full compliance is twelve months.

Recommendation

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

Annex A – Compliance definition and criteria

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 organisation assess itself as being ‘fully compliant’ with. This is explained in more detail below:

Organisational rating	Criteria
Fully compliant	The organisation is fully compliant against 100% of the relevant NHS EPRR Core Standards (59 core standard)
Substantial compliance	The organisation is fully compliant against 89-99% of the relevant NHS EPRR Core Standards (52-58 core standards)
Partial compliance	The organisation is fully compliant against 77-88% of the relevant NHS EPRR Core Standards (45-51 core standards)
Non-compliant	The organisation is fully compliant up to 76% or less of the relevant NHS EPRR Core Standards (44 or less core standards)

	Fully compliant	Substantially compliant	Partially compliant	Non-compliance
	100%	99-89%	88-77%	76% or less
Organisation type	Number of fully compliant core standards to achieve the percentage			
Acute providers	62	61-55	54-48	47 -0
Specialist providers	59	58-52	51-45	44-0

Table to show number of sub-domains that are required to be ‘fully compliant’ to update the overall compliance score.