

# Healthier Communities, Outstanding Care

## Meeting of The Board of Directors – 7<sup>th</sup> October 2021

### SFH – Emergency Preparedness Self- Assessment Against 2021 NHSE/I Core Standards

#### **Introduction**

Annually the Trust must submit an assessment of its preparedness to respond to emergencies and major incidents to NHS England/Improvement.

This is done via a spreadsheet submission, rating compliance against a number of core standards.

The standards are split (this year) into 49 questions within ten sub-categories as follows:

- Governance
- Duty to Assess Risk
- Duty to Maintain Plans
- Command and Control
- Training and Exercising
- Response
- Warning and Informing
- Cooperation
- Business Continuity
- CBRN

The organisation should rate whether it is Fully, Partially, or Non-compliant against each of the 49 questions, and of course be able to provide the necessary evidence.

The assessment is then subject to a “confirm and challenge” session with NHSE/I regional EPRR leads and our CCG.

For information the results since 2017 have been as follows:

2017- Partially Compliant

2018 - Substantially Compliant

2019 – Substantially Compliant

2020 - Process was suspended

## 2021 Submission

There are four possible outcomes from the self-assessment, which are:

Fig 1

| Organisational rating  | Criteria                                                                                   |
|------------------------|--------------------------------------------------------------------------------------------|
| 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      |

The individual ratings are prepared by the Emergency Planning Officer and agreed at the Trust's Resilience Assurance Committee (this year this was on 16<sup>th</sup> August).

The following submission was agreed for this year:

Fig 2

| Core Standards          | Total standards applicable | Fully compliant | Partially compliant | Non-compliant |
|-------------------------|----------------------------|-----------------|---------------------|---------------|
| Governance              | 6                          | 6               | 0                   | 0             |
| Duty to risk assess     | 2                          | 2               | 0                   | 0             |
| Duty to maintain plans  | 9                          | 9               | 0                   | 0             |
| Command and control     | 1                          | 1               | 0                   | 0             |
| Training and exercising | 0                          | 0               | 0                   | 0             |
| Response                | 5                          | 5               | 0                   | 0             |
| Warning and informing   | 3                          | 3               | 0                   | 0             |
| Cooperation             | 4                          | 4               | 0                   | 0             |
| Business Continuity     | 7                          | 7               | 0                   | 0             |
| CBRN                    | 12                         | 10              | 1                   | 1             |
| Total                   | 49                         | 47              | 1                   | 1             |

There are two areas within the CBRN (Chemical, Biological, Radiological & Nuclear) section in which it was felt that the Trust was unable to match our compliance with the assessment criteria, which are described below:

1. Non-compliant =

|           |             |                                       |                                                                                                                                          |
|-----------|-------------|---------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| <b>67</b> | <b>CBRN</b> | <b>HAZMAT / CBRN trained trainers</b> | The organisation has a sufficient number of trained decontamination trainers to fully support its staff HAZMAT/ CBRN training programme. |
|-----------|-------------|---------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|

Due to the sad death of one of the trainers and the redeployment of the other, we have a reduced number of trained trainers from x 3 down to x 1, which cannot be considered to be a “sufficient number”, despite the rather subjective nature of this requirement.

The EPO is currently working with Urgent Care colleagues and EMAS to deliver this training to a fresh group of volunteers, which it is hoped will be completed by the end of October 2021.

2. Partially Compliant =

|           |             |                                       |                                                                                                                                                                                                                                                                                                                 |
|-----------|-------------|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>58</b> | <b>CBRN</b> | <b>HAZMAT / CBRN risk assessments</b> | <p>HAZMAT/ CBRN decontamination risk assessments are in place appropriate to the organisation.</p> <p>This includes:</p> <ul style="list-style-type: none"> <li>• Documented systems of work</li> <li>• List of required competencies</li> <li>• Arrangements for the management of hazardous waste.</li> </ul> |
|-----------|-------------|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Whilst the Trust has a CBRN risk assessment, it does not include all of the component parts listed within the competence, ie;

- Documented systems of work
- List of required competencies
- Arrangements for the management of hazardous waste.

The above arrangements are however captured within other Trust policies, plans and procedures and we can demonstrate compliance by simple cross – referencing of these documents. This work is under way and will be completed before the end of October.

The EPO is upgrading the risk assessment in order to address this and to make it compliant.

In all other areas, the Trust has submitted, and can provide evidence of full compliance.

This is a positive reflection of the engagement and work done at Divisional level and the oversight applied by the Trust’s Resilience Assurance Committee.

### **Confirmation Process**

The submission was sent to NHSE/I Regional EPRR team on 27<sup>th</sup> August this year, with copy to our CCG, both of whom will shortly arrange a site visit for a “confirm and challenge” session. The Trust will be represented on this by the EPO and the Head of Operations, with delegated authority from the Trusts Accountable Emergency Officer, the Chief Operating Officer.

The submission will go through to Risk Committee on 12<sup>th</sup> October 2021 as part of the six monthly assurance report by the Resilience Assurance Committee.

Using the assessment table (Fig 1), we can therefore be confident that the Trust retains a Substantial compliance rating for 2021.

### **Recommendation**

The Board is requested to be UPDATED of the submission and the “Substantial” compliance rating.

End

By Mark Stone

Emergency Planning & Business Continuity Officer

October 2021