Outstanding Care,
Compassionate People,
Healthier Communities

NHS
Sherwood Forest Hospitals
NHS Foundation Trust

<u>Public Board – Emergency Preparedness Update</u>
November 2024

Introduction

The report will highlight the current status of the Trusts emergency preparedness, and the governance processes in place to ensure compliance with legal requirements and national standards.

It will cover;

- Resilience Assurance Committee (RAC) Attendance

- Governance Arrangements

- The EPRR Core Standards Submission

- Annual EPRR Workplan

- Training Compliance Levels

- Exercises Completed

- Incidents

- Risks Identified

- Lessons Learned

In doing so, the report should provide an overview of the current state of preparedness for incidents and emergencies.

RAC Attendance

RAC is Chaired by the Chief or Deputy Chief Operating Officer.

There is excellent attendance and engagement from all areas of the Trust, as depicted in the following table:

Resilience Assurance Committee – Attendance Update Nov 2023 - Sept 2024		
Chief Operating Officer/Deputy Chief Operating Officer (Chair)	10 of 10	100%
Emergency Planning and Business Continuity Officer	10 of 10	100%
Risk and Assurance Manager	7 of 10	70%
Head of Communications	10 of 10	100%
EPRR Lead for Division of Urgent and Emergency Care – Divisional General Manger for UEC	10 of 10	100%
EPRR Lead for Division of Medicine - Divisional General Manager for Medicine	10 of 10	100%
EPRR Lead for Division of Surgery - Divisional General Manager for Surgery	9 of 10	90%
EPRR Lead for Division of Women and Children's – Divisional General Manager for Women's and Children's	9 of 10	90%
EPRR Lead for CSTO – Divisional General Manager for CSTO	10 of 10	100%
Associate Director of Estates & Facilities`	10 of 10	100%

EPRR Lead - NHIS Head of Corporate and Business Support	9 of 10	90%
Operations Manager – Central Nottinghamshire Hospitals Plc	10 of 10	100%
Contract Director – Medirest	9 of 10	90%
Senior General Manager – Skanska	10 of 10	100%

In 2024 there have been no concerns to escalate in respect of attendance by any core member.

Governance

The Emergency Planning service within SFH currently consists of a full time Emergency Planning Officer and an Emergency Planning Support Officer, also full time.

It provides support to and facilitates the Resilience Assurance Committee (RAC), which is chaired by the Chief or Deputy Chief Operating Officer and has membership at a senior level across the organisations' both clinical and corporate areas.

The RAC reports and escalates into the Risk Committee which is Chaired by the Chief Executive, with monthly reports capturing the outputs from RAC.

Notts ICB and NHS England Midlands Region host the Local health Resilience Partnership (LHRP) which is a system wide forum, containing all of the health organisations in the Nottinghamshire area, and is attended on SFH's behalf by the Chief Operating Officer, who is the Trusts' Accountable Emergency Officer (AEO).

Notts ICB and NHS England scrutinise and cross-check our compliance against the national core standards annually, after which the final assessment and compliance rating for the organisation is reported to the Board of Directors in a public setting.

The EPRR Core Standards

The Trust is obliged by law to comply with its responsibilities as a category One responder under the Civil Contingencies Act (2004), they being:

      a) To assess the risk of emergencies

      b) To plan for emergencies

      c) To develop business continuity management

      d) To cooperate with other responders

      e) To share information

      f) To communicate (warning and informing)

In order to ensure compliance with the foregoing, NHS England has developed a set of core standards for emergency preparedness, across ten domains with which to examine individual organisations levels of compliance, which can be seen in the following table:

There are four levels of compliance available as follows:

Full Compliance = 100% compliant across all domains

Substantial Compliance = 89-99%

Partial Compliance = 77-88%

Non-Compliant = below 77%

Although we await the formal confirmation letter from NHS England, the Trust has improved its overall Core Standards compliance rating from **"Partial"** (82%) in 2022 and 2023, to "Substantial" (91%) in 2024, with no areas deemed non-compliant. The overall outcome is described in the following table.

<u>The 2024 Core Standards Final Assessment:</u>

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	11	10	1	0
Command and control	2	1	1	0
Training and exercising	4	4	0	0
Response	7	6	1	0
Warning and informing	4	4	0	0
Cooperation	4	4	0	0
Business Continuity	10	7	3	0
CBRN	12	12	0	0
Total	62	56	6	0

The areas not fully compliant are:

- CS13 - Pandemic Surge Plan – our existing copy was slightly overdue its formal review.

- CS21- Trained on call staff to maintain a Personal Development Portfolio – unable to evidence.

- CS26 – ability to run a virtual ICC – unable to evidence.

- CS47 – Business Continuity Plans – insufficient evidence in compliant standard (self-declared)

- CS50 – BCP weakness in performance monitoring (self-declared)

- CS53 – BCMS of commissioned suppliers/providers – insufficient evidence.

The EPO will work to improve the areas deemed partially compliant over the coming weeks and months, to progress further towards a Full Compliance rating.

The formal letter of confirmation, addressed to the Chief Executive, is expected on 15th November.

RAC Annual Workplan

The annual workplan is presented to the RAC in November each year for agreement/amendment as a schedule for the following year.

The workplan is designed around the core standards but will also incorporate any actions and learning from incidents and exercises and recommendations arising from the annual core standards assessment process. It will also set out plans for training and exercises throughout the year.

The RAC regularly reviews progress on the workplan and any significant challenge with completing any elements may be escalated to the Risk Committee via the monthly Quadrant report.

The workplan for 2024 was set out as follows and has been completed apart from two exercises:

1. The Mass Countermeasures exercise – this requires coordinating with system colleagues, but it was decided to carry out a regional evacuation exercise instead, so this will be deferred until 2025 and included in the Workplan.

2. Missing child exercise in maternity – due to severe operational pressures this has been postponed a couple of times. The EPO will continue to work with Divisional colleagues to make this event happen before the year end.

Otherwise there has been 100% completion rate against the plan (see Appendix 1).

Training Compliance

The priority task of the EPO is to ensure incident commanders at both Strategic (Gold) and Tactical (Silver) are trained to respond effectively to any incident. Additionally, a considerable monthly effort to train emergency department staff (at all levels) on being prepared for incidents, including the particular requirements to respond effectively to Chemical, Biological, Radiological, Nuclear (CBRN) or HazMat (hazardous materials) incidents.

All responders are provided with training in incident response and command and control prior to enrolment on to the on-call rotas. Training is refreshed annually and compliance levels for 2024 for incident commanders at both levels is currently as follows, which is exceptional when compared to peer organisations:

Strategic (Gold) = 100%

Tactical (Silver) = 91%

Exercises

In accordance with the NHS England EPRR Framework guidance the trust has an obligation to carry out exercises, as follows:

ICC Equipment test – every three months

Communications (Cascade test) exercise – every six months

Tabletop exercise – annually

Live Play exercise – every three years

ICC Command Post exercise – every three years

This is rigorously examined as part of the Trust core standards submission, and we are again fully compliant with this section, as more exercises are being conducted now than at any time in the past.

The Trust has conducted or taken part in the following exercises in line with the above:

- CBRN exercise at NUH (Exercise Triton)
- Equipment tested every two weeks
- Cyber resilience exercise (exercise Viper) with NHIS (tabletop).
- Measles presentation in ED (exercise Rasher) – live play.
- Water supply disruption exercise (exercise Dry Run) involving Severn Trent Water (tabletop).
- VIP Admission exercise Star Attraction (during election campaign) – live play.
- Trust wide business continuity exercise (exercise Trident with three scenarios) in tabletop format.
- Regional evacuation exercise (exercise Dynamo) in tabletop format.
- Site-wide power failure exercise (Blackstart) – live play.

The Trust has also carried two incident cascade tests (one in hours and one out of hours), with another two due in November.

Reports into all of the above are available on request.

All exercises are properly debriefed with agreed actions being captured and tracked through the RAC Action Log for completion.

Incidents

There have been no serious declared incidents through 2024, which is highly unusual and is perhaps a positive reflection on the resilience of our services.

It is worthy of note however that the Trust has managed extended periods of industrial action as EPRR events, using normal incident response processes and command and control arrangements.

The Trust has also recently had to deal with some malicious activity over its radio network making direct threats to the organisation. It has managed these through normal EPRR processes.

Risks Identified

Risks of a major disruptive incident are captured in and managed through the Board Assurance Framework, Principle Risk no.7.

This is reviewed on a monthly basis with the Trusts Risk & Assurance Manager, the Accountable Emergency Officer and the Emergency Planning Officer, and is currently rated as a 16, high risk, predominantly due to threat of cyber-attack.

Other than cyber, there are no high risks currently deemed a significant threat to the Trust.

Lessons Learned

In accordance with the Trusts Emergency Planning Policy, it is committed to learning lessons from incidents and exercises. This process is described within the policy and ensures a robust process is in place to ensure follow up actions are completed.

There is also a regional process in place for sharing lessons with partner organisations through submission of post incident and exercise reports, with oversight from NHS England.

The Trust wilfully engages with regional colleagues in sharing its lessons and acquiring those of other organisations.

Business Continuity Management System

The Trust has, throughout 2024, sought to upgrade its BCMS and bring into line with the NHS BC Toolkit, which itself is aligned to international standard ISO22301.

360 Assurance audited the upgraded BCMS in September 2024, and concluded that it should provide "Significant" assurance to the Trust Board.

Summary

Through the successful completion of its workplan, the number of exercises undertaken, training compliance levels, the smooth running of periods of industrial action and the assurances received from external partners, one can conclude that the Trust is well prepared to deal with incidents and emergencies.

The improvement in our core standards assessment is further evidence that the Trust is positively progressing in terms of its overall emergency preparedness and the Board is asked to be **Assured** by the contents of this report.

Report by Mark Stone

Emergency Planning Officer

October 2024

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Appendix 1

EPRR Work Programme 2024

Item	Action	Lead	J	F	M	A	M	J	J	A	S
Governance											
Agree Meeting Schedule for 2023	Approve	Chair	✓								
Review RAC Terms of Reference	Approve	Chair		✓							
Create Collaboration Log and append to all reviewed plans	Create	Emergency Planning Officer	✓								
Six monthly assurance and performance progress report to be sent to the Risk Committee	Present	Chair					✓				
Update RAC action log	Update	Chair	✓	✓	✓	✓	✓	✓	✓	✓	✓
Update RAC attendance report	Update	Chair	✓	✓	✓	✓	✓	✓	✓	✓	✓
Complete EPRR Self-Assessment	Update	Emergency Planning Officer								✓	
EPRR Core Standard Self-Assessment to RAC	Approve	Emergency Planning Officer									
Annual EPRR Self-Assessment Report to Board	Approve	Chair									
Feedback from Regional Groups	Update	Chair	✓	✓	✓	✓	✓	✓	✓	✓	✓
Corporate/Divisional/Contracted Function Resilience Update											

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Item	Action	Lead	J	F	M	A	M	J	J	A	S
Skanska	Present	Skanska Lead	✓						✓		
SFH Estates	Present	SFH Estates Lead	✓						✓		
Medirest	Present	Medirest Lead	✓						✓		
Urgent & Emergency Care	Present	UEC Lead		✓						✓	
Surgery	Present	Surgery Lead		✓						✓	
CSTO	Present	CSTO Lead			✓						✓
Women's and Children's	Present	W & C Lead			✓						✓
Medicine	Present	Medicine Lead				✓					
NHIS	Present	NHIS Lead				✓					
Training Activity											
Complete Training Needs Analysis to include EPO	Create	Emergency Planning Officer	✓								
Silver Command	Conduct	Emergency Planning Officer	✓		✓		✓		✓		✓
Gold Command	Conduct	Emergency Planning Officer				✓		✓			✓
Loggist	Conduct	Emergency Planning Officer	✓		✓		✓		✓		✓
CBRN/Major Incident Training with ED Staff	Conduct	Emergency Planning Officer	✓	✓	✓	✓	✓	✓	✓	✓	✓
Principles of Health Command	Conduct	Strategic and Tactical Leads	✓	✓	✓	✓	✓	✓	✓	✓	✓
Exercise Activity											
Plan Trust wide Business Continuity Exercise	Plan	Emergency Planning Officer				✓					

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Item	Action	Lead	J	F	M	A	M	J	J	A	S
Conduct Trust Wide BC Exercise	Test	Emergency Planning Officer						✔			
Plan Cyber Security Exercise	Plan	Emergency Planning Officer		✔							
Carry Out Cyber Security Exercise	Test	Emergency Planning Officer			✔						
Plan Mass Countermeasures Exercise	Plan	Emergency Planning Officer						✔			
Carry Out Mass Countermeasures	Test	Emergency Planning Officer						✘			
Carry Out Six-Monthly Cascade Test	Test	Emergency Planning Officer				✔					
Plan test of Missing Child Procedure	Plan	Emergency Planning Officer				✔					
Carry out test of Missing Child Procedure	Test	Emergency Planning Officer					✘				
Carry Out Blackstart test at KMH	Test	Estates Lead		✔	✔						
Carry OUT Blackstart Test at NWK	Test	Estates Lead		✔							
Carry Out Test of NHIS IRP	Test	Emergency Planning Officer					✔				
Business Continuity											
Divisions to conduct review of all BCP's and bring up to date	Update	Emergency Planning Officer		✔							

Item	Action	Lead	J	F	M	A	M	J	J	A	S
All Updated BCP's to be uploaded on to intranet site	Update	Emergency Planning Officer		✓							
All updated BCP's to be placed in Divisional folders and DNM Master Folder	Update	Emergency Planning Officer									
Arrange Meeting of the SWPG	Arrange	Emergency Planning Officer					✓				
Review BC Policy and present to Public Board	Review	Emergency Planning Officer									
Emergency Planning											
Complete Review of Actions from 2023 CSSA and prepare 2024 submission	Complete	Emergency Planning Officer	✓	✓	✓	✓	✓	✓	✓	✓	✓
Complete Review of EMAS CBRN audit complete any outstanding actions	Complete	Emergency Planning Officer	✓	✓	✓						
Progress Mass Notification System with DSG	Progress	Emergency Planning Officer	✓		✓			✓			✓
Carry Out Radio and Battery Checks	Conduct	Emergency Planning Officer	✓	✓	✓	✓	✓	✓	✓	✓	✓
Update Silver and Gold On-call Lists	Update	Emergency Planning Officer			✓			✓			✓

Item	Action	Lead	J	F	M	A	M	J	J	A	S
Review Stock and Serviceability of Radio Pagers	Review	EPO/Estates Lead			✓						✓
Conduct Stock and Serviceability Check on Mobiles at NWK	Review	Emergency Planning Officer	✓	✓	✓	✓	✓	✓	✓	✓	✓
Review Community/ National Risk Register and Escalate to Risk Committee any Appropriate Concerns	Review	Emergency Planning Officer			✓			✓			✓
Arrange for Ramgene Calibration	Arrange	Emergency Planning Officer									✓
Arrange for PRPS Suit Servicing	Arrange	Emergency Planning Officer			✓			✓			✓
Arrange CBRN Equipment Service	Arrange	Emergency Planning Officer						✓			
Arrange Decon Tent Service	Arrange	Emergency Planning Officer			✓						

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