# EMERGENCY PREPAREDNESS RESILIENCE & RESPONSE (EPRR)

## The Framework
March 2015

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This Policy is for annual review by Emergency Accountable Officer
EMERGENCY PREPAREDNESS RESILIENCE & RESPONSE (EPRR)

1.0 Introduction

1.1 The NHS needs to be able to plan for and respond to a wide range of incidents and emergencies that could affect health or patient care. These could be anything from severe weather to an infectious disease outbreak or a major transport accident.

1.2 Under the Health and Social Care Act 2012, NHS England must be ‘properly prepared for dealing with an emergency’ and must monitor and control all service providers to make sure they too are prepared.

1.3 Under the Civil Contingencies Act (2004), NHS organisations and providers of NHS funded care must show that they can deal with these incidents while maintaining services to patients. This work is referred to in the health community as ‘emergency preparedness resilience and response’ (EPRR). These organisations are also required to have business continuity plans in place, which are embedded.

1.4 Telford and Wrekin Clinical Commissioning Group (CCG) would act as a category 2 responder in the event of an incident, working with a clear line of command to NHS England North Midlands Team (the category 1 responder)

2.0 NHS England Overarching Documents

2.1 NHS England has a suite of documents to cover this area. These can be found described at:
http://www.england.nhs.uk/ourwork/eprr/

Key Strategic Plans include:
- Mass Casualty
- Major Incident
- CBRN – Chemical, biological, radiological, nuclear
- Lockdown & evacuation
- Pandemic
- Fuel
- Severe weather
- Psychological support
- Surge
- Evacuation and Shelter

2.2 Access to all documents can be found at:
http://www.england.nhs.uk/ourwork/eprr/gf/

2.3 On call Executives have these documents stored on a secure USB stick for access in the event of an out of hours incident when they will be called upon to activate the CGs response.
2.4 These documents are shared on a shared drive for Executives to access and a hard copy is kept by the Executive leads for Governance and Engagement and Executive Nurse.

3.0 CCG plans

Accountability

- The CCG Accountable Officer is accountable for the activity of the CCG in this area.

- The Accountable Emergency Officer is the CCG Executive Nurse. The post holder is responsible for the maintenance of CCG plans, documentation; submissions required on behalf of the CCG. The post holder is required to ensure the Governing Body are aware of actions in place and associated risks to the organisation. The post holder is a member of the Local Health Resilience Partnership representing the CCG. There is a requirement for the post holder to adhere to the job description developed by NHS England at:


- Team managers are required to maintain up to date records for their teams, to participate in training and testing and to disseminate information to their teams.

The CCG has the following plans in place:

3.1 Business Continuity Plan.

3.1.1 This is to be reviewed annually and on the CCG website for ease of access. All staff is directed to read it (communicated by CCG staff newsletter) and Managers are required to ensure they have full accurate and up to date contact information for all members of their teams.

3.1.2 There is a plan for a test of the communication cascade twice yearly. March and September.

3.2 Incident Response Plan

3.2.1 The Incident response plan is tailored to the NHS England North Midlands plan and details the role of the CCG as a category 2 responder.

3.2.2 Similarly it details the CCG requirements to set up a control room –

Venue: Room B, NHS Telford & Wrekin Halesfield 6, Telford TF7 4BF
All required equipment is stored within this room as detailed within the plan.

A standard operating plan for surge events has been developed for use. In the event of an incident the On Call Executive will be either notified by an agency (NHS England) of an incident to respond as category 2 or will initiate a discussion with NHS England if notified by a provider to initiate a response.

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In the case of surge in demand for local services the CCG will work with Shropshire CCG and local providers to manage the health system according to the agreed escalation plans. In this case the siting of the incident room will be agreed and the CCG will work in partnership with all parties.

All decisions taken during such an event will be logged in decision logs. The CCG will have suitably trained loggists to call upon as required.

The On call Executive Policy has been shared with all CCG provider organisations and is stored on the secure USB sticks of participating Executives and on the secure shared drive.

### 3.3 Debriefing process

Following any incident involving initiation of the CCG business continuity plan or Incident Response Plan a formal debriefing process will take place.

This will take the form of a review and if necessary root cause analysis to determine if lessons can be learned for incorporation in future planning. The views of those engaged in the incident will be considered.

Any risks will be recorded within the CCG risk register.

### 4.0 Training

All On Call Managers will undergo annual training and will have attended the Strategic Leadership in a Crisis. Opportunities to join system wide exercises will be offered to all on call manager for engagement as available.

All line managers will participate in an annual review of business continuity risk assessments and table top exercise.

All staff will receive an annual information update to alert them to their personal responsibilities via the staff newsletter.
5.0 Conclusion and EPRR statement

The CCG is required to respond to all NHS England directives in relation to emergency planning and there is a process in place for this to happen.

No one document can address every eventuality however the CCG is committed to working with partners in planning, testing and initiating and resourcing procedures should the need arise.

Chris Morris
Emergency Accountable Officer
March 2015

Reviewed 29th September 2017

Reviews 13th September 2018.