



Somerset NHS Foundation Trust	
REPORT TO:	QUALITY AND GOVERNANCE ASSURANCE COMMITTEE
REPORT TITLE:	EPRR ANNUAL REPORT 2023
SPONSORING EXEC:	Director of Corporate Services and Affairs
REPORT BY:	Head of Emergency Preparedness, Resilience and Response (EPRR)
PRESENTED BY:	Head of EPRR
DATE:	06/09/2024

Purpose of Paper/Action Required (Please select any which are relevant to this paper)		
<input checked="" type="checkbox"/> For Assurance	<input type="checkbox"/> For Approval / Decision	<input type="checkbox"/> For Information

Executive Summary and Reason for presentation to Committee/Board	<p>The Trust must plan for and be able to respond to a wide range of incidents and emergencies which could affect its ability to deliver effective and responsive health or patient care. This paper provides the annual report of EPRR assurance for the Trust and the 2024 statement of compliance against the national NHS EPRR core standards.</p> <p>The paper provides oversight and assurance on the Trust’s continued resilience to plan for and recover from a wide range of incidents and emergencies which could affect their ability to deliver effective and responsive health care.</p> <p>The core standards set out the minimum requirements expected of NHS organisations and providers of NHS-funded care. The Trust self-assesses its EPRR activities against these standards on an annual basis, backed-up by a substantial review of evidence. They enable agencies to co-ordinate activities and provide a consistent framework for self-assessment, peer review and more formal control processes carried out by regulatory organisations.</p> <p>Somerset NHS Foundation Trust again achieved full compliance this year, when completing the self-assessment process, providing evidence and declaring full compliance against 62 of the 62 core standards.</p> <p>This year’s deep dive assessment was focussed on cyber security and IT incident related response. The Trust’s self-assessment for the deep dive achieved full compliance. Please note this does not contribute to the Trust’s overall compliance rating.</p>
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	The evidence that forms the basis for the level of compliance against the core standards provides a level of assurance, but it is important to acknowledge that our EPRR activity needs to be continually adaptive and improving based on dynamic learning and action.
Recommendation	<p>The Committee are asked to discuss and note the following:</p> <ul style="list-style-type: none"> • The Trust’s compliance ratings against the national EPRR core standards. • The EPRR workstream activities to ensure the resilience of the organisation.

Links to Joint Strategic Objectives (Please select any which are impacted on / relevant to this paper)	
<input checked="" type="checkbox"/>	Obj 1 Improve health and wellbeing of population
<input checked="" type="checkbox"/>	Obj 2 Provide the best care and support to children and adults
<input checked="" type="checkbox"/>	Obj 3 Strengthen care and support in local communities
<input checked="" type="checkbox"/>	Obj 4 Reduce inequalities
<input checked="" type="checkbox"/>	Obj 5 Respond well to complex needs
<input checked="" type="checkbox"/>	Obj 6 Support our colleagues to deliver the best care and support through a compassionate, inclusive and learning culture
<input checked="" type="checkbox"/>	Obj 7 Live within our means and use our resources wisely
<input checked="" type="checkbox"/>	Obj 8 Develop a high performing organisation delivering the vision of the Trust

Implications/Requirements (Please select any which are relevant to this paper)					
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Financial	Legislation	Workforce	Estates	ICT	Patient Safety/Quality
Details: N/A					

Equality and Inclusion	
The Trust aims to make its services as accessible as possible, to as many people as possible. We also aim to support all colleagues to thrive within our organisation to be able to provide the best care we can.	
How have you considered the needs and potential impacts on people with protected characteristics in relation to the issues covered in this report?	
All major service changes, business cases and service redesigns must have a Quality and Equality Impact Assessment (QEIA) completed at each stage. Please attach the QEIA to the report and identify actions to address any negative impacts, where appropriate.	

Public/Staff Involvement History

How have you considered the views of service users and / or the public in relation to the issues covered in this report? Please can you describe how you have engaged and involved people when compiling this report.

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Previous Consideration

(Indicate if the report has been reviewed by another Board, Committee or Governance Group before submission to the Board or is a follow up report to one previously considered by the Board – e.g., in Part B]

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Reference to CQC domains (Please select any which are relevant to this paper)

<input checked="" type="checkbox"/> Safe	<input checked="" type="checkbox"/> Effective	<input type="checkbox"/> Caring	<input checked="" type="checkbox"/> Responsive	<input checked="" type="checkbox"/> Well Led
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Is this paper clear for release under the Freedom of Information Act 2000?

<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
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SOMERSET NHS FOUNDATION TRUST

**EMERGENCY PREPAREDNESS RESILIENCE AND RESPONSE (EPRR)
REPORT 2024**

1. BACKGROUND AND PURPOSE

- 1.1 The Trust must plan for and be able to respond to a wide range of incidents and emergencies which could affect its ability to deliver effective and responsive health or patient care. These could be the effects of severe weather, another pandemic, mass casualty incidents, industrial action or a major transport accident. Under the Civil Contingencies Act (2004), NHS organisations must show they can deal with these incidents while maintaining their services to patients. This work is referred to as 'emergency preparedness, resilience and response' (EPRR).
- 1.2 Under the requirements of the NHS EPRR guidance, the Trust must:
- Have suitable and up-to-date incident response plans which set out how it would respond to and recover from a major incident/emergency affecting the wider community or the delivery of their services
 - Adopt business continuity plans to enable them to maintain or recover the delivery of its critical services in the event of a significant disruption.
- 1.3 The NHS England EPRR core standards set out the minimum requirements expected of NHS organisations and providers of NHS-funded care. The Trust self-assesses its EPRR activities against these standards on an annual basis, underpinned by a substantial bank of evidence. They enable agencies to co-ordinate activities and provide a consistent framework for self-assessment, peer review and more formal control processes carried out by regulatory organisations.

2 CORE STANDARDS 2024 SELF ASSESSMENT

- 2.1 The Trust is required to submit its self-assessment against the national EPRR core standards to the Somerset Integrated Care Board (ICB). This is then discussed with a view to agreement at a 'confirm and challenge' meeting which is taking place in October.
- 2.2 The assessment sets out sixty-two core standards divided into ten domains to provide an overall compliance rating:
- Governance
 - Duty to risk assess
 - Duty to maintain plans
 - Command and control
 - Training and exercising
 - Response
 - Warning and informing
 - Cooperation

- Business continuity
 - Chemical, Biological, Radiological, Nuclear (CBRN)
- 2.3 This year's deep dive assessed the Trust's cyber security resilience and IT incident related response plans, but this does not contribute to the Trust's overall compliance rating.
- 2.4 The self-assessment of Somerset NHS Foundation Trust demonstrates **full compliance**, being assessed as fully compliant against sixty-two out of the sixty-two core standards. It is a significant positive achievement we have maintained this position from 2023 in the context of our merger in 2023 which required an upscaled response footprint within a single team. The Trust resilience team are now responsible for EPRR for a significant proportion of healthcare services in Somerset.

3. CYBER SECURITY AND IT INCIDENT RELATED RESPONSE DEEP DIVE

- 3.1 This year's deep dive assessment was focussed on Trust cyber security and IT incident related response planning. Previous topics have included training, business continuity, emergency evacuation and climate adaptation.
- 3.2 The Trust's self-assessment for this deep dive achieved **full compliance** against the eleven given standards.

4. CHEMICAL BIOLOGICAL, RADIOLOGICAL NUCLEAR (CBRN) ASSESSMENT

- 4.1 This year has seen a shift in approach of auditing CBRN planning and contingency arrangements. A 'capability assessment' was conducted at our two acute hospital sites, carried out by South Western Ambulance Service NHS Foundation Trust (SWAST), with representation from NHS England (NHSE) attending the YDH visit in late July 2024. This assessment is made against the national CBRN response standards which remain unchanged from previous years.
- 4.2 The Trust is awaiting finalisation of the reports from these visits; however, there is confidence (from both the Trust and SWAST/NHSE) the reports will confirm that, despite ongoing challenges with post Covid training, the Trust continues to have good CBRN response arrangements in place and is **fully compliant** with the core standards listed. We continue to maintain a significant, high-quality stock of equipment for decontamination at both Musgrove Park (MPH) and Yeovil District (YDH) Hospitals. The Trust currently holds at each acute site twenty-four powered respirator protective suits, plus training suits, a decontamination tent, Ramgene radiation monitors and ancillary equipment ready for use.
- 4.3 CBRN training was recognised as a national issue during the Covid-19 pandemic, particularly the use of respirator training suits due to infection concerns. It has continued to be challenging to deliver training due to operational pressures and lack of training for trainers (which was experienced by all Trusts across the southwest region). The Trust's CBRN trainers have developed a bespoke video training package which shows colleagues how to

don and doff respirator suits, decontaminate casualties and safely and correctly ready and use the specialist equipment, however; the ongoing lack of train-the-trainer courses on which to refresh trainers' knowledge and to train new colleagues along with identifying suitable colleagues to train has hampered wide release. There is now a documented training plan that includes this roll out of training across both acute and community sites. Two Trust wide tabletop exercises and two live exercises are planned over the next 12-month period. Tests have however been carried out to set up the tents and other equipment and a new robust programme of maintenance has been put in place with Estates colleagues at the MPH site replicating recognised good practice at the YDH site.

5. WORKSTREAM ACTIVITIES

- 5.1 To support the organisation's resilience and ability respond to and recover from disruptive incidents, solid arrangements which include collaboration with key partner agencies involved in response are now established.

The Resilience Team

- 5.2 The fully established team provide guidance, support and training to all services and teams within the Trust. This includes recent changes to the holder of the 'Accountable Emergency Officer' role following retirement.
- 5.3 The Team consists of the following:
- Director of Corporate Services and Affairs – Accountable Emergency Officer (this is a shared role with the ICB on a 12-month secondment basis)
 - Associate Director of Resilience B8C 1.0wte
 - Head of EPRR B8B 0.8wte
 - Resilience Support Administrator B4 1.0wte
- 5.4 In addition, the two Trust security managers and a MAPPA Coordinator are part of the Resilience Team as there are clear cross-cutting areas such as emergency lockdown and counter terrorism.

Command and Control

- 5.5 An EPRR Strategic Policy has been developed setting out the Trust's responsibility as a Category 1 responder, the legal frameworks for emergency response, arrangements for multi-agency working and internal and external command and control.
- 5.6 Each acute site has its own tactical plan which reflects local capabilities and services and coordination between the two plans is achieved through the strategic and tactical command and control arrangements.
- 5.7 There are now two established 'Trust Incident Control Rooms' located at each acute site these incident rooms are vital to maintain and ensure localised operational decision making relating to an incident affecting any part of our organisation. This function would be overseen by a tactical group across the

whole organisation. This group could be virtual/in person or both to fit the nature of the required response and location of incident.

- 5.8 A strategic on call system is in place and further work is being undertaken to refine and further develop the tactical and operational on call roles following a colleague consultation being led by the People Team.
- 5.9 The quarterly EPRR Strategic Group provides provide oversight and assurance on planning, response and recovery contingency arrangements.

EPRR Policies and Contingency Plans

- 5.10 All polices and specific contingency plans are in place (with annual review) across the organisation.
- 5.12 These documents include:
- EPRR Strategic Policy
 - MPH and YDH Tactical Major Incident Plans
 - Mass Casualties Plan
 - Winter Weather Plan
 - Heatwave Plan
 - Mass Countermeasures Plan
 - New Emerging Pandemic Plan
 - Evacuation and Shelter Policy
 - Lockdown Policy
 - Protected Individuals Plan.
 - Business Continuity and Critical Incident Management Plan
 - CBRN Response Plans
 - Fuel Contingency Plan
 - EPRR Communications Plan
- 5.13 In addition, specific contingency plans have been produced to support the Trust through challenges which it has faced over the last twelve months. These have included:

- Procurement Business Continuity Plan
- Strategic Business Continuity Plan for unplanned digital downtime
- Pager Outage Business Continuity Plan (MPH)
- Medical Colleagues Industrial Action Operational Plans
- Electrical Shutdown Plan (YDH)
- Critical Services Business Impact Analysis
- Civil Disorder Business Continuity Plans

Training and Exercising

- 5.14 The delivery of live and tabletop exercises continues to prove challenging across the Trust due to the ongoing operational pressures across its services; however, delivery of such training is proven to aid ability to respond so the resilience team remain committed to providing a full and varied programme. Engagement is positive and the resilience team continue to plan, prepare, create and deliver a wide range of exercises.
- 5.15 In addition to exercising there have of course been actual business continuity, critical and incidents to which colleagues have had to respond and recover

from. These have included ICT failures, civil unrest, industrial action, Glastonbury Festival, and lockdown incidents. A post incident review process is in place to ensure lessons are learnt and embedded in contingency plans. For example, a significant amount of feedback was received from a wide range of operational colleagues in response to recent IT outage, this was included in the post incident review report which has led to several changes in planning and response arrangements.

- 5.16 The Trust and the resilience team will participate as required in the Covid-19 Public Inquiry, which continues.
- 5.17 An EPRR training and exercising needs analysis has been carried out and a strategy to deliver training has been developed.
- 5.18 Despite the operational pressures and the difficulties in releasing colleagues to participate in exercises, a significant programme of exercising and testing has been rolled out. These have included:

EX MOTTO SERIES: SFT Digital Team BCM Tabletop Exercise	Ongoing
EX AQUILO SERIES MPH, YDH and MIUs Tactical MI Plan Tabletop Exercises (TTX) - preparing to receive casualties	Ongoing
EX CROWDED HOUSE SERIES MPH, YDH AND MIUs Tactical MI Plan Tabletop Exercises – Receiving casualties	Ongoing
EX HIGHTAIL SERIES: Acute hospital Live Evacuation Exercises (LX) – MPH and YDH	Second LX planned November 2024
EX LOCKING SERIES: TTX Lockdown Exercises Community and Mental Health sites	Ongoing
EX MISSING BRAVO SERIES Missing Baby Live Exercise MPH and YDH	Quarterly
EX GLOWING SKY LX	Two planned
EX MUNSTERBERG – Multi Agency Regional Mental Health	Sept 2024
EX ISADORE – SFT CBRN (TTX)	Sept 2024 (6 monthly)

6. SOMERSET LOCAL HEALTH AND CARE RESILIENCE PARTNERSHIP (LHCRP)

- 6.1 ICBs have Category 1 status under the Civil Contingencies Act and coordinates the Somerset health and care system during major and other incidents.
- 6.2 The Somerset Local Health and Care Resilience Partnership which was established in 2023 continues to be jointly chaired by Somerset ICB and the Director of Public Health with senior representatives from Somerset ICB, the Trust, Somerset Council, primary care, ambulance service and other partner agencies.
- 6.3 The LHCRP provides systemwide oversight and assurance of contingency arrangements and is aimed to be a critical forum for system planning, training and interagency discussion. Somerset NHS Foundation Trust continues to play an integral part in this group representing resilience for all our services.

7. CONCLUSION

- 7.1 The coming winter is once again likely to present significant continued operational challenges and pressures, the ongoing risk of further industrial action, the UK's economic situation and ongoing unrest both in the UK and overseas. However, the lessons which arise from incidents such as the pandemic and other local incidents over the past few years have been embedded into practice, along with more recent events provide continued assurance the Trust continues to be in a good position to tackle adversity and recover from further incidents if they occur. Our willingness and drive to work collaboratively across the county and beyond within EPRR, to ensure we can support the delivery of high levels of services has been recognised and commended by peers (both NHS and from other partner agencies).
- 7.2 This year's full compliance against the national EPRR standards provides further evidence of this ongoing preparedness and resilience, and it is important to acknowledge that our EPRR activity is continually adaptive and improving based on dynamic learning and action. We look forward to the coming year building on the strong foundations laid over the past 12 months.

Head of EPRR

October 2024