

EPRR Work Plan 2021

1. Introduction

This plan outlines the Emergency Preparedness, Resilience and Response (EPRR) work programme for Milton Keynes University Hospital (MKUH) covering the remaining period of 2021 following appointment of new Emergency Planning Officer (EPO) from March 2020.

This work programme outlines key areas and timeframes for EPRR work streams, underpinned by NHS England Core Standards, national guidance and statutory responsibility under the Civil Contingencies Act (2004).

Note that this work plan and milestones identified within may be impacted due to COVID-19 national, regional and local response requirements.

2. Background

The Trust has been supported by Emergency Planning Manager for a number of years with a new appointment made in March 2020. Following this appointment, a full review of the Trusts EPRR capabilities has been conducted internally with further discussions incorporated with key partners covering NHS England and Clinical Commission Group (CCG).

This work plan is in agreement with the Accountable Emergency Officer (AEO) for the Trust and agreed with NHS England and CCG for the period it will cover before further review.

3. Role and Responsibilities

3.1 General

NHS organisations and providers of NHS funded care must:

- Nominate an director level accountable emergency officer who will be responsible for EPRR; and
- Contribute to area planning for EPRR through local health resilience partnerships (LHRPs) and other relevant groups.

3.2 Provider Trust

Providers of NHS funded services are to:

- Support CCGs and NHS England, within their health economies, in discharging their EPRR functions and duties, locally and regionally, under the CCA 2004
- Have robust and effective structures in place to adequately plan, prepare and exercise the tactical and operational response arrangements both internally and with their local healthcare partners
- Ensure business continuity plans mitigate the impact of any emergency, so far as is reasonably practicable
- Ensure robust 24/7 communication “cascade and escalation” policies and procedures are in place, to inform CCGs and healthcare partners, as appropriate, of any incident impacting on service delivery
- Ensure that recovery planning is an integral part of its EPRR function
- Provide assurance that organisations are delivering their contractual obligations with respect to EPRR
- Ensure organisational planning and preparedness is based on current risk registers
- Provide appropriate director level representation at LHRP(s) and appropriate tactical and/or operational representation at local health economy planning groups in support of EPRR requirements

3.3 Accountable Emergency Officer

The AEO for the Trust is the Director of Operations who sits at board level holding the legal and policy requirements as underpinned by EPRR.

Their role is outlined from the 2015 EPRR Framework to:

- Ensuring that the organisation, and any sub-contractors, is compliant with the EPRR requirements as set out in the CCA 2004, the NHS Act 2006 (as amended) and the NHS Standard Contract, including the NHS England Emergency Preparedness, Resilience and Response Framework and the NHS England Core Standards for EPRR

- Ensuring that the organisation is properly prepared and resourced for dealing with an incident
- Ensuring that their organisation, any providers they commission and any sub-contractors have robust business continuity planning arrangements in place which are aligned to ISO 22301 or subsequent guidance which may supersede this
- Ensuring that the organisation has a robust surge capacity plan that provides an integrated organisational response and that it has been tested with other providers and partner organisations in the local area served
- Ensuring that the organisation complies with any requirements of NHS England, or agents of NHS England, in respect of monitoring compliance
- Providing NHS England with such information as it may require for the purpose of discharging its functions
- Ensuring that the organisation is appropriately represented by director level engagement with, and effectively contributes to any governance meetings, sub-groups or working groups of the LHRP and/or LRF, as appropriate

4 EPRR Assurance

The Trust will ensure all Core Standard Assurance requirements are done on an annual basis following LHRP outlined process.

In Summary the Core Standards Assurance measure providers to:

- Have suitable, proportionate and up to date plans which set out how they plan for, respond to and recover from emergency and business continuity incidents as identified in national and community risk registers;
- Exercise these plans through:
 - A communications exercise every six months;
 - A desktop exercise once a year; and
 - A major live exercise every three years;
- Have appropriately trained, competent staff and suitable facilities available round the clock to effectively manage an emergency and business continuity incident; and

- Share their resources as required to respond to an emergency or business continuity incident.

Currently there has been no national steer if 2020 Core Standards Assurance will go ahead following COVID-19 national response.

However, if NHSE&I take the decision the Trust would not be required to provide exercise reports due to current COVID-19 incident response meeting national guidance requirements.

5 EPRR Scrutiny and Review

This work programme will be reviewed and scrutinised firstly through the EPRR Committee Meeting chaired by Trust AEO, with update reports presented to Management Board (quarterly) and Public Board (annually). Final version will be forwarded onto NHS England and CCG to ensure clear oversight is maintained.

6 NHE England Assurance 2019

In 2020 MKUH Core Standards were presented to the Local Health Resilience Partnership Trust (LHRP).

LHRP agreed to our self-assessment as **Substantial Compliant**, with the outlined rectification plan to be implemented to ensure the Trust in Full Compliant by next self-assessment in 2021 due to delay in work programme following COVID-19.

7 Current Guidance or Contracts

- NHSE England EPRR Framework (2015)
- NHSE Core Standards for EPRR
- NHS England Standard Contract (SC30 'Emergencies and Incidents')
- ISO22301 (Business Continuity Management System)
- NHS Standard Contract 'Service Condition' – 2019/20 and 2020/21
'SC30 - EMERGENCIES AND INCIDENTS (page 33)'

Appendix A: EPRR Actions following review

Work Stream	Project	Action	EPRR Review	EPRR Work Plan 2021
Governance	EPRR Policy	To be developed to outline MKUH compliances to EPRR national expectations and guidelines	COMPLETED	Review 2023
	Business Continuity Policy	Existing BC Policy to be reviewed in line with new EPRR Framework 2015	COMPLETED	Review 2023
	Work Programme	Developed and revised annually in line with Core Standards review	In Place	Agreed March 2021
	Emergency Planning Steering Committee Meeting	TOR, Agenda and frequency of meeting to be agreed with AEO and group	In Place	Held Quarterly

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Work Stream	Project	Action	EPRR Review	EPRR Work Plan 2021
	Appointment of Accountable Emergency Officer	COO –	N/A	N/A
Business Continuity Management Systems	Identifying BC leads	All ADO's/OM's to identify appropriate BC leads for services in supporting BC development	Not in Place	July 2021
	Business Impact & Business Disruption Analysis	To be developed alongside BC leads when identified	Review date 2017	July 2021
	Mitigation Strategy	Tied into the BIA	Review date 2017	July 2021
	Business Continuity Plans	Templates to be populated for each service	Review date 2017	October 2021
	Corporate Business Continuity Plan	Plan outlining the most critical function of MKUH taken from the Divisional BCPs. This plan will form part of the MIP response at Strategic and Tactical level.	Review date 2017	November 2021

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	Evacuation Plan	Will form part of the BCP and existing evacuation planning arrangements	In Place	Review 2023
EPRR Plans and Arrangements	Incident Response Plan (Major Incident Plan)	To be reviewed to align against the EPRR Framework 2015	Review date 02/2021	
	CBRN Plan	To be reviewed to align against the IOR Framework	Review date 02/2021	
	A&E Trolley Audit	Review of current ED resources covering Triage process as outlined within MIP including CBRN & HAZAMT	In Place	Quarterly Review
	Review of internal cascade process	Current cascade process is carried out through switchboard	In Place	Review of notification systems
	Severe Weather Plan	Development of MKUH Cold Weather and Heatwave Plans	In Place	Annual review Heatwave – June CWP - Sept
	Pandemic Plan	To be reviewed in line with Core standards return	COVID-19	COVID-19

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	Fuel Disruption	To be reviewed in line with Core standards return	National Fuel Plan in Place	Review 2021
	Infectious Disease Outbreak	To be reviewed in line with Core standards return	N/A	IPC lead on
	IT Disaster Recovery	To be reviewed and aligned to BCP	Version 2014	TBC
	Crisis Communication Plan	To be developed and aligned to MKUH MIP	Not in Place	Under Review
	On Call Pack	To be reviewed and revised to ensure its aligned to best practice	Not in Place	Under Review
	Incident Co-ordination Centre (ICC)	Set-up guide to be developed	In Place	Potential move of Silver Command
	EPRR Risk Register	In line with CCA as Cat 1 responder outlining EPPR risks	In Place	Quarterly Review
	Loggists Identified	Oak House PA's have been trained to support as loggists	COMPLETE	Further roll out to invite new loggist to train

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	Resilience Direct Account	Account to be developed for MKUH through regional contact	COMPLETE	Quarterly Review
Training and Exercising Programme	National Occupational Standards	All training modules outline the standards received from NOS	COMPLETED	N/A
	Training Records	Strategic and Tactical training, with evidence of personal training captured within a portfolio	COMPLETED	Review of ongoing CPD and personal portfolio of key staff
	Loggists (PHE)	Training in place and on teams	COMPLETED	New training dates TBC

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Work Stream	Project	Action	EPRR Review	EPRR Work Plan 2021
	Annual Refresher Loggist Training	All loggist trained will receive PHE on-line refresher training course	COMPLETED	September-Dec
	ICC set-up	On-call staff will receive training in how to set-up the ICC when set-up guide is complete	Not in Place	Following review of Silver ICC move
	Incident Response Plan	All on-call directors will receive training on the new IRP (MIP) when revised	Not in Place	Review 2021
	IOR Training DVD (CBRN/HAZMAT)	National NARO training film for A&E staff	Not in place	ED Monthly training from May 2021 to September 2021
	PRPS Suit Training (CBRN/HAZMAT)	ED staff conducting annual PRPS training	Not in place	
	Decon Tent (CBRN/HAZMAT)	Training to get the Decon tent up in and out of hours	Not in place	
	LIVE EXERCISE (3 years)	Exercise to test Incident Response arrangements for MKUH	N/A	Review 2024

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Work Stream	Project	Action	EPRR Review	EPRR Work Plan 2021
	TABLE TOP EXERCISE (Annual)	Exercise to test BCMS arrangements and plans	N/A	Review 2021
	COMMS TEST (6 months)	Switchboard and Radio checks with exercise jigsaw to be rolled out	N/A	Review 2021
Communication	Intranet and Web Page	To put in place EPRR comms strategy for all staff available on Intranet accessing key plans and actions cards, with public info on web page of MKUH to meet Core Standards	Not In Place	Review 2021
Post Incident Report	COVID-19 (2 nd Wave)	Post Incident Report signed off through EDs	Phase 1 report in place	National team to outline requirement of further reports
	Water Loss (23/02/21)	Post Incident Report	Final Report to be drafted	Report to be signed off at SID
	IT Network Loss (04/03/21)	Post Incident Report	Final Report to be drafted	Report to be signed off at SID

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Work Stream	Project	Action	EPRR Review	EPRR Work Plan 2021
	POST INCIDENT RECOMMENDATIONS	All recommendations actioned and reviewed with appropriate leads identified	Ongoing	July 2020

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