

Lewisham CCG
Emergency Preparedness, Resilience and
Response (EPRR) Policy

Version 2.0

DRAFT

2018 09 03

Document Control

Review and Amendment History		
Version	Date	Amendment History
0.1	2018 01 22	New Document Aligned with 2015 EPRR Framework Draft for review
0.2	2018 01 31	Review and comments from V Medhurst
0.3	2018 02 08	Review following amendments L Lambert
1.0	2018 08 09	Approved at Integrated Governance Committee
1.1	2018 08 28	Minor amendments following feedback from IGC
2.0	2018 09 03	FINAL

Approval		
Committee	Date	Version
Integrated Governance Committee	09 August 2018	1.0
Delegated authority: Managing Director	03 September 2018	2.0

Related Documents and Policies		
Date Published (Y – M – D)	Title	Version
2015 11 10	NHSE EPRR Framework	2
2018 09 03	Lewisham CCG Corporate Continuity Plan	2
2018 08 09	Lewisham CCG Pandemic Flu Plan	2
2018 08 29	Southeast London Directors on Call Handbook	4

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Statement of Intent

Lewisham CCG is required to fulfil its obligations under the Health and Social Care Act (2012) and Civil Contingencies Act (2004) in respect to the response to internal and external incidents and disruptions.

The CCG must be able to maintain its own services in the event of a disruption to its normal working environment and must be able to participate as a responder to emergency incidents that affect the local population and health economy.

NHS organisations and providers of NHS funded care must:

- I. Nominate a director level Accountable Emergency Officer who will be responsible for EPRR; and
- II. Contribute to area planning for EPRR through local health resilience partnerships (LHRPs) and other relevant groups.

NHS organisations and providers of NHS funded care must:

- 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.

NHS organisations and providers of NHS funded care must have suitable, proportionate and up to date plans which set out how they will maintain prioritised activities when faced with disruption from identified local risks; for example, severe weather, IT failure, an infectious disease, a fuel shortage or industrial action.

This planning should be aligned to current nationally recognised business continuity standards.

Lewisham CCG recognises the importance of having the appropriate arrangements in place to enable it to discharge the duties listed above.

Accountable Emergency Officer

1. The Policy

1.1 Introduction

- 1.1.1 NHS England requires CCGs to have prepared and tested arrangements to respond to emergency and business continuity incidents.
- 1.1.2 This policy outlines the requirements to which Lewisham CCG must adhere and how these will be delivered.
- 1.1.3 This policy applies to all aspects of Lewisham CCG’s operations and services.
- 1.1.4 The process of EPRR is undertaken by the whole organisation and is driven by the Governing Body through the CCG Accountable Emergency Officer.
- 1.1.5 The goal of the EPRR policy is to ensure that Lewisham CCG can support the local health economy in the response to an emergency incident whilst maintaining high levels of service for the local population.
- 1.1.6 This Policy will be reviewed annually or in line with any changes to organisational structure, scope and/or responsibilities
- 1.1.7 This Policy will be signed off in line with internal governance requirements. The AEO will ensure that the document is shared with appropriate governance groups.

1.2 Scope

- 1.2.1 The scope of the arrangements for the response to emergency incidents covers Lewisham CCG’s response to all levels of incident as described by NHS England – See figure 1.
- 1.2.2 The CCG will be responsible for the coordination of Level 1 and 2 incidents within its area of operations. The CCG will provide support to NHS England in the response to Level 3 and 4 incidents.

Incident Levels	
Level 1	An incident that can be responded to and managed by a local health provider organisation within their respective business as usual capabilities and business continuity plans in liaison with local commissioners.
Level 2	An incident that requires the response of a number of health providers within a defined health economy and will require NHS coordination by the local commissioner(s) in liaison with the NHS England local office.
Level 3	An incident that requires the response of a number of health organisations across geographical areas within a NHS England region. NHS England to coordinate the NHS response in collaboration with local commissioners at the tactical level.
Level 4	An incident that requires NHS England National Command and Control to support the NHS response. NHS England to coordinate the NHS response in collaboration with local commissioners at the tactical level.

Figure 1: NHS Incident Response Levels

- 1.2.3 The scope of the arrangements for the response to Business Continuity incidents is limited to the activities of Lewisham CCG. Any staff directly employed by, or contracted to work for the CCG are covered. It does not cover activities related to provider's premises, processes, staff or systems where they are not related to a core contractual term with the CCG.
- 1.2.4 Lewisham CCG is also responsible for ensuring that contracts with provider organisations contain relevant emergency preparedness, resilience (including business continuity) and response elements. In this respect, the scope of this policy includes the arrangements directly commissioned by the CCG or where the CCG is the lead commissioner of a service provider.

1.3 Accountability

- 1.3.1 The person with senior level responsibility for the delivery of Lewisham CCG's EPRR arrangements is the Accountable Emergency Officer.
- 1.3.2 The Accountable Emergency Officer will report no less than annually to the CCG Governing Body on the progress against EPRR assurance framework and the response to incidents and disruptions when they occur.
- 1.3.3 The operational function and delivery of EPRR activities is provided under contract by the Corporate Team within Lewisham CCG, with the Associate Director of Integrated Governance taking on the role of Emergency Planning Liaison Officer (EPLO)
- 1.3.4 Designated leads in each directorate are responsible for delivering the information required for the directorate's EPRR arrangements. Professionally qualified resilience associates contracted from NEL CSU are involved in the process and available to provide specialist support to all parts of the organisation.

1.4 Implementation

- 1.4.1 Lewisham CCG will maintain appropriate plans and procedures documenting their response to emergency and business continuity incidents.
- 1.4.2 This will include:
 - i. This EPRR policy
 - ii. South East London Director on Call Pack
 - iii. Business Continuity Plan
 - iv. EPRR Risk Assessment
 - v. Pandemic Flu Plan
- 1.4.3 The SEL CCG Director on Call Pack will enable Lewisham CCG to respond to and coordinate local provider responses to Level 1 or 2 incidents. It will also enable the CCG to support NHS England to discharge its EPRR responsibilities for Level 3 and 4 incidents. Level 1 incidents will predominantly necessitate the management of pressures within provider organisations.

Lewisham CCG will maintain a corporate business continuity plan to enable it to respond to business disruptions. This plan will be scalable, enabling an individual directorate to manage low-level disruptions whilst also providing a framework for the Governing Body to manage disruptions that affect the whole organisation.
- 1.4.4 Business Continuity Plans will be developed with regard to best practice both within the NHS and from industry standards. This will include ISO 22301 Business Continuity Management.

- 1.4.5 All EPRR Policies, Plans and Procedures will be reviewed annually in line with national EPRR guidance, or upon invocation, or when significant changes occur which effect the organisation and its delivery or services.

2. Roles and Responsibilities

2.1 Lewisham CCG EPRR Roles and responsibilities

- 2.1.1 Ensure contracts with provider organisations contain relevant emergency preparedness, resilience (including business continuity) and response elements;
- 2.1.2 Support NHS England in discharging its EPRR functions and duties locally;
- 2.1.3 Provide a route of escalation for the LHRP should a provider fail to maintain necessary EPRR capacity and capability;
- 2.1.4 Fulfil the responsibilities as a Category two responder under the CCA including maintaining business continuity plans for their own organisation;
- 2.1.5 Be represented on the LHRP (either on their own behalf or through representation by a 'lead' CCG); and
- 2.1.6 Seek assurance provider organisations are delivering their contractual obligation. Full CCG roles and responsibilities are detailed in appendix 1.

2.2 Governing Body

- 2.2.1 Act to ensure/monitor the overall strategic direction of the EPRR programme across the CCG.
- 2.2.2 Ensure that the EPRR programme is enforced and resourced appropriately.
- 2.2.3 In the event of a serious or widespread disruption to the activities of the CCG, it may be necessary to invoke the Business Continuity Plan. In this case, the Governing Body may need to lead the response or delegate incident management coordination to named officers.

2.3 Accountable Emergency Officer

- 2.3.1 Undertake leadership and sponsorship of the EPRR programme under the direction of the Governing Body.
- 2.3.2 Act as a point of tactical leadership in support of the Programme Managers.
- 2.3.3 Liaise with EPLO Business Resilience Team to ensure that the delivered EPRR programme meets the needs of the CCG.
- 2.3.4 Manage, monitor and report on the progress of the EPRR programme as required.
- 2.3.5 Ensure that where appropriate, sections of EPRR Plans and Policy are published and accessible to the public.
- 2.3.6 Identify individuals within the CCG to assist EPLO in the development and completion of the EPRR programme.

2.4 Department Leads

- 2.4.1 Ensure that where necessary, relevant department level plans, business impact analyses and training requirements are currently being completed and maintained
- 2.4.2 Support the management team in the response to emergency and business continuity incidents.

2.4.3 Ensure that staff attend training and complete follow up actions relevant to their role.

3. Communications and Awareness

3.1.1 The EPRR Policy, supporting plans and other associated documents will be placed in an appropriate place on the Lewisham CCG intranet site and will actively be promoted to both new starters as part of the induction process and existing staff.

4. Sharing information

4.1.1 Lewisham CCG will ensure that it shares relevant information with partner organisation in a timely and efficient manner during incidents as per the responsibilities under the Civil Contingencies Act (2004).

4.1.2 In line with data protection legislation the information shared will always be the minimum required for the specific purpose of the request.

4.1.3 The CCG may need to share information both internally within the NHS (to provider organisations or NHS England) and externally to responding organisations at the Borough Resilience Forum level.

4.1.4 The sharing of information will follow the principles set out in the HM Government Data Protection and Sharing – Guidance for Emergency Planners and Responders (2007) and Caldicott Principles.

- Is it unfair to the individual to disclose their information?
- What expectations would they have in the emergency at hand?
- Am I acting for their benefit and is it in the public interest to share this information?

5. Maintenance

5.1.1 The Accountable Emergency Officer will be responsible for ensuring that the EPRR Policy and associated plans and procedures are maintained in line with the standard Lewisham CCG process for document control and version management.

5.1.2 The EPRR Policy and associated plans will be reviewed at least annually or in the event of any changes to:

- Business objectives, processes and organisational function
- Organisational structures and staff
- Key suppliers or contractual arrangements
- If an updated risk assessment highlights a new or changed vulnerability

5.1.3 The Policy, plans and procedures may also be reviewed following the response to a real incident or exercise.

5.1.4 Where changes are made these will be communicated with all relevant staff and partner organisations and where necessary, updated documents will be circulated.

6. Testing and Training

6.1.1 The Accountable Emergency Officer (AEO) is responsible for identifying appropriate levels of training and awareness sessions for relevant CCG staff who will be involved with a response to an emergency or business continuity incident.

- 6.1.2 Lewisham CCG Directors on Call must undertake training that meets the relevant National Occupational Standards and NHS England competencies.
- 6.1.3 Lewisham CCG will maintain a training plan which is based on a training needs analysis in Appendix 2&3 this will ensure staff are appropriately trained within the organisation
- 6.1.4 The AEO will ensure that staff attend required training and that training records are maintained by the CCG. Directors on Call will maintain individual training portfolios that demonstrate their competencies.
- 6.1.5 Plans and procedures will be tested on a regular basis, no less than annually or following significant changes to the organisation.
- 6.1.6 Plans and procedures will be exercised in line with the requirements of the NHS England Emergency Preparedness Framework (2015) and will involve
 - a communications exercise every six months;
 - a desktop exercise once a year
 - a major live exercise every three years

Note. The NHSE EPRR Framework (2015) states; if an organisation activates its plan for response to a live incident this replaces the need to run an exercise, providing lessons are identified and logged and an action plan developed.

- 6.1.7 Lewisham CCG will maintain an exercise plan based upon these requirements.
- 6.1.8 The responsibility to exercise plans can be discharged through participation in multi – agency exercises or the response to a real event.
- 6.1.9 A full training needs analysis can be found in Appendix 2

7. Continuous Organisational Development

- 7.1.1 As part of its commitment to continual development, Lewisham CCG will undertake reviews of its response and procedures following major exercises or real incident response. Where appropriate this may take place as part of a multi-agency process.
- 7.1.2 The CCG will maintain appropriate procedures for debriefing staff and identifying and acting on lessons.
- 7.1.3 Lessons identified will be addressed through changes to policy, plan and procedures and/or staff training. **The outcomes of these will be developed into action plans.**
- 7.1.4 The AEO will be responsible for ensuring that this process takes place and that appropriate actions are included in the EPRR work programme.

8. Equality Impact Assessment

- 8.1.1 The organisation aims to ensure that its policies meet the needs of its staff and customers and ensure they do not disadvantage any groups or individuals.
- 8.1.2 Equality Impact Assessments (EIA) or Equality Analysis provides a systematic way to ensure legal obligations are met and are a practical way of examining new and existing policies and practices to determine what effect they may have on equality for those affected by the outcomes.
- 8.1.3 The purpose of EIAs is to identify and address real or potential inequalities resulting from policy and practice development or service change. Through this process, an organisation

gains a greater understanding of its functions and is more able to be an equitable employer and service provider. This policy has been viewed to have no impact on protected characteristics and does not require a full EIA to be carried out.

9. References and underpinning materials

- ISO 22301 Societal Security
- The Civil Contingencies Act 2004 (as amended)
- The Health and Social Care Act 2012
- NHS England (and former NHS Commissioning Board) EPRR documents and supporting materials including:
- NHSE Emergency Preparedness, Resilience, and Response Framework (2015)
- NHS England Command and Control Framework for the NHS during significant incidents and emergencies (2013)
- NHS England Core Standards for Emergency Preparedness, Resilience and Response (EPRR)
- BSI PAS 2015 - Framework for Health Services Resilience
- JESIP

Appendix 1 Lewisham CCG EPRR Roles and Responsibilities

As detailed in the NHS England Emergency Preparedness Framework 2015

Planning and Prevention

a. Lewisham CCG will Co-operate and share relevant information with category one responders but they will be engaged in (LHRP) discussions where they will add value.

They must maintain robust business continuity plans for their own organisations.

b. Corporately, CCGs will support the NHSE in discharging its EPRR functions and duties locally, ensuring representation on the LHRP and engaging in health economy planning groups.

c. Lewisham CCG will Include relevant EPRR elements (including business continuity planning) in contracts with provider organisations in order to:

- Ensure that resilience is “commissioned-in” as part of standard provider contracts and to reflect local risks identified through wider, multi-agency planning;
- Reflect the need for providers to respond to routine operational pressures, e.g. winter, failure of providers to continue to deliver high quality patient care, provider trust internal major incidents;
- Enable NHS-funded providers to participate fully in EPRR exercise and testing programmes as part of NHSE EPRR assurance processes.

d. Lewisham CCG will Maintain performance levels, CCGs need to provide their commissioned providers with a route of escalation on a 24/7 basis. Conversely, the NHSE will need a conduit in which to mobilise relevant support provider arrangements during significant and widespread incidents (see Response below).

e. Lewisham CCG will Develop, test and update their own business continuity plans to ensure they are able to maintain business resilience during any disruptive event or incident.

Escalation

f. Lewisham CCG will Ensure robust escalation procedures are in place such that if an NHS funded provider has a problem (rather than an immediate emergency or significant incident), the locally agreed route for escalation (whether out of hours or during normal business hours) is available via the CCGs. This will require CCGs to establish their own 24/7 on-call arrangements, this may include working in collaboration with other local CCGs to provide cost effective robust arrangements.

Response

g. As category two responders under the CCA, CCGs must respond to reasonable requests to assist and co-operate.

h. Lewisham CCG will Support the NHSE Area Team should any emergency require wider NHS resources to be mobilised. CCGs must have a mechanism in place to support NHS Area Teams to effectively mobilise and coordinate all applicable providers that support primary care services should the need arise.

i. Maintain service delivery across their local health economy to prevent business as usual pressures and minor incidents within individual providers from becoming significant or major incidents. This could include the management of commissioned providers to effectively coordinate increases in activity across their health economy, which may include support with surge in emergency

pressures. CCGs need a process that enables them to escalate incidents to the NHSE area team as applicable.

j. Some, but not all, CCGs may become more involved in the provision of emergency response, for example:

- Where there are specific risks identified in local risk registers, such as hazardous materials nuclear, chemical or biological; and
- Where there is a significant issue of geographic remoteness or complexity, which may compromise a NHSE area team to act alone as a category one responder. In such circumstances, the area team may request support from CCG members to become part of the initial health response. This will be through agreement between the area team and the relevant CCG staff who will act on behalf of the NHSE locally during the initial stages of an incident. Under any such agreement, the NHSE is still responsible for ensuring an effective response is delivered and retains command and control

Appendix 2 Lewisham CCG Training Needs Analysis

Required by who?	Training Requirement	How provided
<p>Members of Lewisham CCG Senior Management Team</p>	<ul style="list-style-type: none"> • BCM awareness – policy and plans in place • BCM awareness – roles and responsibilities • Awareness of the impact that a BC, Critical and/or major incident would have upon the daily business of the CCG • Activation of the BCM plan • Role of the Incident Director • Role of the Business Continuity Incident Response Team • Interaction with NHS England via NHS01 • Recovery planning and processes • Logging, Minute taking • Debriefing 	<ul style="list-style-type: none"> • EPRR Policy • Business Continuity Plan • SMT BC training session provided by NEL CSU Business Resilience Team • Annual SMT BC Exercise • Frequency: Annual
<p>Business Continuity Liaison Officers and the Business Continuity Incident Support Team (Support Role)</p>	<ul style="list-style-type: none"> • BCM awareness – policy and plans in place • BCM awareness – roles and responsibilities • Awareness of the impact that a BC, Critical and/or major incident would have upon the daily business of the CCG • Activation of the BCM plan • Role of the Business Continuity Incident Response Team • Logging, Minute taking • Debriefing 	<ul style="list-style-type: none"> • EPRR Policy • Business Continuity Plan • SMT BC training session provided by NEL CSU Business Resilience Team • Annual SMT BC Exercise • Frequency: Annual
<p>All staff</p>	<ul style="list-style-type: none"> • BCM awareness – policy and plans in place • Awareness of the impact that a BC, Critical and/or major incident could have upon the daily business of the CCG • Activation of the BCM plan and their role within it 	<ul style="list-style-type: none"> • Policy and plans on internal intranet • BC Staff Awareness Session • Frequency: Annual

Appendix 3 Lewisham CCG Annual Exercise Programme

Exercise/ Type	Date	Objectives
Strategic BCM Plan test - table top	Annually	<ul style="list-style-type: none"> • Test incident identification, plan activation and command and control arrangements • Identify if critical activities are up to date and appropriate • Identify accuracy of recovery plan details • Identify update needs • Raise awareness for staff • Provide simulation opportunity for BC Liaison Officers
Strategic BCM Plan test – Live exercise	Every 3 years	<ul style="list-style-type: none"> • Test effectiveness of identified recovery options • Enable staff to practice recovery options • Identify issues or update needs • Raise awareness of BCM
Call Cascade Exercise	Bi-Annually	<ul style="list-style-type: none"> • Test of the CCG incident communications cascade • Will be undertaken with relevant partners (as required)