

Voice at the Heart



	Agenda I	tem No: 17			
Report to:	Humber and North Yorkshire Integrated Care Board	d			
Date of Meeting:	9 October 2024				
Subject:	Emergency Preparedness, Resilience and Response (EPRR) Policy				
Director Sponsor:	Jane Hazelgrave, Deputy Chief Executive and Chie Officer	of Operating			
Author:	Levi Clements-Pearce, Head of Resilience and Op	erations			
STATUS OF THE REPORT: Approve Discuss Assurance Information A Regulatory Requirement					
SUMMARY OF REPORT: The ICB is required, as a Category 1 responder under the Civil Contingencies Act 2004, to have a policy stating its intent and framework for delivering its responsibilities in Emergency Preparedness, Resilience and Response (EPRR). The Policy was written in 2022 and last reviewed by the Board in 2023. Various changes have been made to reflect the change of structure to the ICB's EPRR Team, changes to the JESIP Doctrine 2024, and new and improved ways of working, including the roll out and governance associated with EPRR training portfolios and internal governance. RECOMMENDATIONS: Members are asked to: i) Review the contents of the EPRR Policy, noting the changes referred to in the amendments column. ii) Approve the revised EPRR policy for HNY ICB.					
ICB STRATEGIC OBJECTIVE					
Leading for Excellen	ce	\boxtimes			
Leading for Preventi	\boxtimes				
Leading for Sustaina	\boxtimes				

IMPLICATIONS

Finance	Whilst there is no specific financial impact associated with the policy, the response to an incident may give rise to financial consequences, dependent upon the incident.
Quality	The policy supports the ICB and providers to deliver incident specific care during declared incidents whilst recognising that some services may have to be risk assessed and ceased due to competing priorities. This supports harm mitigation based on assessed need
HR	N/A
Legal / Regulatory	The ICB is required to comply with its legal obligations under the Civil Contingencies Act 2004, the Civil Contingencies Act 2004 (Contingency Planning) Regulations 2005 and the NHS Act 2006. This policy sets out how the ICB will go about complying with that duty.
Data Protection / IG	N/A
Health inequality / equality	N/A
Conflict of Interest Aspects	N/A
Sustainability	EPRR related risks can include those in response to climate change, and workplan actions will often overlap with those for adaption from a sustainability perspective.

ASSESSED RISK:

The ICB requires an EPRR Policy to ensure a coordinated approach to assessing, declaring and responding to incidents in line with the legislation referred to in the report below. The lack of an approved policy could potentially, at its most significant, put staff and residents at risk of harm due to the inability to respond effectively to civil and other emergencies and to maintain clinically appropriate services, wherever possible, to minimise harm during these times. There is, in addition, an organisational risk of being unable to respond in line with the previously mentioned legislation which would be considered a significant breach of the ICB's duties.

Risk Mitigation

The ICB's EPRR Team will ensure that the policy is integrated into the working principles of the ICB, that supporting policies and action cards are developed to support the implementation of the principles and make the policy available to those individuals who are on the on-call rota so that they are aware of the working principles. The implementation of the policy will support the mitigation of some of the risks associated with responding to incidents.

MONITORING AND ASSURANCE:

As part of the ICB's annual self-assessment against national core standards for EPRR; all EPRR related policies and documentation are reviewed annually to ensure compliance with those requirements, lessons identified and emerging best practice. This will support the monitoring of the policies implementation and provide assurance that it is in place and principles utilised. This policy, once approved, will be submitted as evidence of compliance with Core Standard 2 of the NHS Core Standards for EPRR as part of the ICB's self-assessment due at the end of October 2024.

ENGAGEMENT:							
This policy has been aligned with the requirements of the identified legislation and reflects the policy put in place by the North East & Yorkshire Regional Team and partner ICBs working within the regional footprint. This ensures a consistent response across all organisations within the North East and Yorkshire footprint. An earlier version of the policy was also shared with partner organisations for awareness.							
REPORT EXEMPT FROM PUBLIC DISCLOSURE	No	\boxtimes	Yes				
If yes, please detail the specific grounds for exemption.							

Emergency Preparedness, Resilience and Response (EPRR) POLICY REVISION 2024

1. INTRODUCTION

The ICB is a Category 1 Responder under the Civil Contingencies Act 2004 ("CCA 2004"), the legislation which delivers a single framework for civil protection in the UK. This means the ICB is legally responsible for assessing the risk of emergencies, put in place emergency plans, put in place business continuity management arrangements, warn and inform the public, share information, and co-operate with other responders. These arrangements are collectively known within the NHS as EPRR ("Emergency Preparedness, Resilience and Response").

Further regulations were developed on each of these duties through the Civil Contingencies Act 2004 (Contingency Planning) Regulations 2005 ("the 2005 Regulations"); including the need for ICBs to represent the NHS at Local Resilience Forums. The NHS Act 2006 also requires that ICBs can ensure that the NHS is properly prepared to deal with an emergency.

The minimum requirements for EPRR that commissioners and NHS Funded organisations ought to meet are set out in the NHS Core Standards for EPRR which are in accordance with the above statute and guidance.

Core Standard 2 requires that the submitting organisation has an "overarching EPRR Policy or statement of intent", which should describe roles and responsibilities and set out governance processes for EPRR. Specifically, for ICB's, this should reflect their role in the system and management of the Local Health Resilience Partnership ("LHRP") and its role in system assurance. This document is not the organisation's incident response plan – this is contained within the Command and Control Framework overseen by the Executive Team.

Due to changes in the ICB's EPRR Team structure and new ways of working, the EPRR Policy has been amended and submitted to the Board for approval.

2. BACKGROUND

The ICB EPRR Policy was last reviewed by the board in June 2023 following its annual review and approved accordingly. Since then, there have been some small changes made to better align with the Core Standards including.

- Addition of information on risk management to ensure appropriate escalation and discussion of EPRR related risks.
- Amendments to the EPRR team composition following internal restructuring and resource review.
- Replacing references to the terminology "bronze, silver, and gold" with "operational, tactical and strategic" respectively following changes to the JESIP doctrine in 2024.
- Reference to EPRR personal development portfolios, which are newly rolled out for staff in a commander position for the ICB (EPRR staff, and first and second oncall). These portfolios align to the Minimum Occupational Standards for EPRR.
- Amendments to the governance section to refer to the consultation with partner organisations for emergency plans.

3. ASSESSMENT

The policy has been refreshed to ensure that it remains fit for purpose for the organisation, and in line with good practice. It continues to provide an overview of how the ICB will comply with its civil protection duties under the legislation referenced in this report, to ensure effective arrangements are in place to support the delivery of care to patients through risk assessment, collaborative planning, training and exercising, and finally identifying and sharing lessons to improve response.

The amendments to the policy have taken into account the feedback from last year's self-assessment process, particularly in relation to governance, risk and training. The ICB will be submitting its self-assessment against the NHS Core Standards for EPRR at the end of October 2024, and a full report will be shared with the board in December. This will include the results of the 24/25 self-assessment, a work programme stemming from this, and a summary of lessons identified through any responses or training and exercising.

4. CONCLUSION

The ICB has a duty in line with the legislation identified in this report to ensure that it is able to respond effectively to incidents affecting the health community in Humber and North Yorkshire in order to lead and co-ordinate the health response and minimise disruption to the health services it commissions.

The organisation's EPRR Policy has been refreshed in line with lessons identified, good practice and recommendations from the Core Standards self-assessment process 23/24 to set out how the ICB will comply with this duty.

5. RECOMMENDATIONS

5.1. Members are asked to:

- i) Consider the attached Emergency Preparedness, Resilience and Response (EPRR) policy.
- ii) Approve the attached Emergency Preparedness, Resilience and Response (EPRR) policy for implementation across the ICB.

6. APPENDICES

6.1. Humber and North Yorkshire ICB EPRR Policy V2.2