

Board of Directors' Meeting 13 October 2022

Agenda item	193/22			
Report Title	Emergency Planning, Resilience and Response (EPRR) Annual Report 2021/2022			
Executive Lead	Chief Operating Officer			
Report Author	Emergency Planning Manager			
	Link to strategic goal:		Link to CQC domain:	
	Our patients and community	\checkmark	Safe	
	Our people	\checkmark	Effective	
	Our service delivery	\checkmark	Caring	
	Our governance	\checkmark	Responsive	
	Our partners	\checkmark	Well Led	
	Report recommendations:		Link to BAF / risk:	
	For assurance		BAF 2, BAF 3, BAF	8
	For decision / approval	\checkmark	Link to risk regist	er:
	For review / discussion			
	For noting			
	For information		-	
	For consent			
Presented to:	2022.08.23: Finance and Performance Assurance Committee 2022.08.25: Senior Leadership Committee – Operational 2022.09.15: Health, Safety, Security and Fire Committee 2022.09.23: Emergency Planning and Business Continuity Group			
Executive summary:	To provide the Board of Directors with assurance on the Trust's Emergency Preparedness, Resilience and Response arrangements. There continues to be a considerable amount of work in developing the Trust's EPRR arrangements due to the continuously changing risk and hazard landscape. Nationally, there is a high level of focus with the increasing amount of guidance and expanding range of threats the Trust must be prepared for. It is essential that there is a continued focus on the Trust's EPRR and Business Continuity arrangements and that the Trust maintains and continues to advance its reputation within the EPRR arena and contributes towards the Region's Preparedness.			
Appendices	Appendix 1: Core Standards Appendix 2: Plans/ Policies Compliance			
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1.0 Introduction

- 1.1 This paper provides a report on the Trust's emergency preparedness to meet the requirements of the Civil Contingencies Act (2004) and the NHS England Emergency Preparedness, Resilience and Response Framework (EPRR) 2015.
- 1.2. The Trust has a mature suite of plans to deal with Major Incidents and Business Continuity issues. These conform to the Civil Contingencies Act (2004) and current NHS-wide guidance. All plans have been developed in consultation with local and regional stakeholders to ensure cohesion with their plans.
- 1.3. The paper reports on the training and exercising programme and the development of emergency planning arrangements and plans. The report gives a summary of instances in which the Trust has had to respond to extraordinary circumstances.

2.0 Background

- 2.1 EPRR is a core function of the NHS and is a statutory requirement of the Civil Contingencies Act (CCA) 2004. Responding to emergencies is also a key function within the NHS Act (2006) as amended by the Health and Social Care Act (2012). The role of NHS England relates to potentially disruptive threats and the need to take command of the NHS, as required, during emergency situations. These are wide ranging and may be anything from extreme weather conditions to outbreak of an infectious disease, a major transport accident or a terrorist incident.
- 2.2 Government have committed to develop a new Resilience Strategy which will set out an ambitious new vision and approach to the UK's resilience to 2030, and as such a full review of the Civil Contingencies Act 2004 is underway.
- 2.3 The Civil Contingencies Act (2004) outlines a single framework for civil protection in the United Kingdom. Part 1 of the Act establishes a clear set of roles and responsibilities for those involved in emergency preparedness and response at the local level.

As a category one responder, the Trust is subject to the following civil protection duties:

- assess the risk of emergencies occurring and use this to inform contingency planning.
- put in place emergency plans.
- put in place business continuity management arrangements.
- put in place arrangements to make information available to the public about civil protection matters and maintain arrangements to warn, inform and advise the public in the event of an emergency.
- share information with other local responders to enhance coordination.
- cooperate with other local responders to enhance coordination and efficiency.

3.0 Overall Level of Compliance

3.1 In accordance with the requirements laid out in the EPRR 2021-2022 Assurance Process Letter (29th July 2022), the overall level of compliance is based on the total percentage of standards that the Trust is Fully Compliant with.

In respect of the Shrewsbury and Telford Hospitals NHS Trust 1-68, the Trust has selfassessed against the Core Standards for Emergency Preparedness, Resilience and Response as follows:

Fully Compliant	Partially Compliant	Non-Compliant
59	5	0

According to the rating thresholds, SaTH has a self-assessed level of compliance of **Substantially Compliant.** Please note that this is subject to change depending on the outcome of the Confirm and Challenge Process.

4.0 Audits

4.1 NHS England maintains its statutory duty to seek formal assurance of NHS providers EPRR readiness, discharged through the EPRR annual assurance process. The 2020/2021 process was reduced due to the demands on the NHS as a result of the Covid-19 pandemic. The 2021/2022 EPRR assurance process requires SaTH to undertake a self- assessment against the full and updated Core Standards. SaTH will be reporting that the organisation is Substantially Compliant, being fully compliant with 58 out of the full 65 core standards, giving an overall 89% compliance.

There are no significant risks, however actions to be taken to improve compliance are included in the action plan for 2022/2023 and are noted in the Self-Assessment. A Business Continuity software solution would support divisions and departments in completing their Business Continuity Plans. A system wide approach would achieve economies of scale and a standardised approach across the ICS.

The completed Self-Assessment can be found at Appendix 1.

4.2 West Midlands Ambulance Service undertook and audit of the Trusts Chemical, Biological, Radiological, Nuclear (CBRN) capabilities in September 2021 on behalf of National Ambulance Resilience Unit (NARU). Areas of good practice were noted along with areas for improvement such as ED Reception Training, CBRN and the donning and doffing of associated Personal Protective Equipment which have been addressed throughout 2021/22. NARU continue to work with the NHS ambulance services to ensure they maintain specialist capabilities and are fully prepared to respond to any incidents that may occur. The recommendations set out within the audits have been accepted and actioned.

5.0 Debriefing from Live Events and Exercises

- 5.1 The primary focus of 2021-2022 has been the continued response to the coronavirus pandemic, which NHS England increased the Alert Level from a Level from a Level 3 (Regional Incident) to a Level 4 (National Incident) on the 12th December 2021, reverting back to a Level 3 on 19th May 2022. Incident Command Centres have been operating locally, regionally and nationally from the outset of the pandemic, with command, control, coordination and communication arrangements in place to ensure that the response to the pandemic is co-ordinated.
- 5.2 The Trust is currently still responding to the pandemic; however, debrief sessions with Divisions, Silver Command and Gold Command have been held to capture learning from the response to COVID-19 along with other incidents that have occurred concurrently. The full debrief reports are held on the Trust Intranet.

- 5.3 As well as supporting the Level 4 Covid-19 response, the SaTH has also responded to a number of incidents concurrently, post incident debriefs have taken place and post incident reports written with clear recommendations and action plans in place.
 - The Trust has declared Critical Incidents in light of extreme site pressures as follows:
 - 1. 11.02.22
 - 2. 16.02.2022-22.02.2022
 - 3. 13.03.2022- 14.03.2022
 - 4. 14.04.2022-25.04.2022
 - 5. 12.05.2022-14.05.2022
 - 6. 21.06.2022-22.06.2022
 - 7. 04.07.2022-11.07.2022
 - 8. 26.07.2022-06.08.2022
 - Chemical Incident PRH 04.11.2021 a patient attended ED and notified the reception team that they had been exposed to 2 x toxic substances. This resulted in the ED being evacuated and the Decontamination Tent being deployed to decontaminate a patient who had been exposed to what was thought to be a toxic substance.
 - Greenway Polymer Fire. 26.04.2021 SaTH attended regular Multi Agency Tactical Co-ordinating Groups in response to a large scale fire at a recycling plant adjacent to the M54, which was closed for a period of time. There were concerns that the toxic chemicals in the plume could cause harm to human health.
 - IT Outage 30.05.2021- A routine generator test had taken place and at approx. 07:00, the Digital Services on-call support team identified a number of email infrastructure related alerts indicating that the air-conditioning units and switch temperatures had exceeded 40 degrees. The UPS at RSH only lasts for 20 minutes which led to outages of key clinical systems along with the VOIP telephony system.
 - Operation Blueside 07.05.2022 A high profile Right Wing Activist arranged a large scale viewing of a documentary about CSE in Telford. West Mercia Police assessed the event as HIGH RISK and in light of this, SaTH stood up arrangements to respond in the event of any widespread violence resulting in a large number of casualties attending either hospital.
 - Blackstart Exercise- Fire 26.06.2022 A "Black Start" is a procedure to restore power in the event of a total or partial shutdown of the electricity system. SaTH has not undertaken a Blackstart Exercise before, and the National Security Risk Assessment places Risk R76 of "a Failure of the National Electricity Transmission System" as Very High. On the day of the exercise, Western Power Distribution isolated the mains power to the RSH site and the generators successfully powered up and temporary power to the site was

maintained. After circa 60 minutes, one of the generator exhausts caught fire. This was extinguished and a full Root Cause Analysis is taking place.

• Heatwave 18.07.2022-20.07.2022

A Red Extreme heat national severe weather warning was issued by the Met Office and UKHSA issued its first Level 4 heat- health alert. As a result of this, SaTH invoked the Trusts Heatwave Plan and established command and control arrangements to ensure that any issues in relation to patient and staff welfare were addressed in a timely manner.

5.4 Exercising

In line with the Core Standards, the Trust has developed and facilitated a number of exercises during 2021/2022 as follows:

• Exercise Astral Bend - 29.09.2022

Demonstration ASTRAL BEND 2021 was the annual assessed Immediate Response Force (Air) Operational Response Assessment (ORA) for 2021.

The Demonstration took place at RAF Cosford on the 29th September 2021, with live play throughout. The Joint Operations Centre (JOC) at AWE Aldermaston will be manned throughout the duration of the Demonstration and will initiate the Civilian Emergency Services (CES) and MOD Defence Nuclear Organisation (DNO) Response.

To support Shrewsbury and Telford Hospital NHS Foundation Trust in meeting their objectives for the reception of contaminated casualties and to test the interface between the wider health authorities, four NIMSKI casualties were transported from the Demonstration site at the RAF Cosford to Royal Shrewsbury Hospital.

Exercise Cyber Storm - 12.10.2022
Exercise Cyber Storm was a Multi - Agency Local Resilience Forum Exercise facilitated via MS Teams. 9 members of staff from SaTH attended the exercise,

with representatives from Operational and IT Teams. The aim of the exercise was to validate the West Mercia LRF ICT & Cyber Response Framework.

 Exercise Gone Phishing - 24.03.2022
NHSE MIDSROC requested trusts to complete Task 43735 Cyber Security and Business Continuity and submit by 14:00 on 03/03/2022.
The National Cyber Security Centre (NCSC) urged organisations in the UK to bolster their cyber security resilience in response to malicious cyber incidents as a result of the ongoing situation in the Ukraine.

Hospital Trusts were tasked as follows:

 To confirm plans are in place to manage an <u>IT system outage</u> impacting on all clinical and patient management systems and that these plans allow for the continuity of delivery of clinical practice for a period up to <u>96 hours.</u>

- <u>AND</u> to confirm when these plans were last validated either through activation or exercise.
- To confirm that plans are in place to manage a <u>mobile telephony</u> <u>outage</u> for a period of up to <u>96 hours.</u>
- <u>AND</u> to confirm when these plans were last validated either through activation or exercise.

In light of this requirement, SaTH held a Table Top Exercise with representatives from Divisions and Departments. Shropshire Community Health Trust were also represented in an observer capacity.

• Exercise Rainbow – 19th May 2022

In line with NHS England's requirements outlined within the Core Standards for Emergency Preparedness, Resilience and Response, NHS Provider Organisations are required to hold a Live Exercise every 3 years.

Exercise Rainbow was planned and executed to fulfil this standard, providing an opportunity for the Trust to train and exercise its response arrangements to a Mass Casualty and Hazmat Incident. A Pseudo Emergency Department was created in the Training Centre within the Copthorne Building at the Royal Shrewsbury Hospital. A second Bronze was established at the Decontamination Tent outside the Emergency Department at Royal Shrewsbury Hospital.

The Post Exercise Report focuses on areas for improvement and perceptions of what went well; it concludes with a series of recommendations to assist SaTH, and other agencies, to improve the planning and management of similar future events.

SLC-O are requested to note and accept the recommendations outlined within the report.

6.0 Training, Exercising and Testing

- 6.1 The Trust has a rolling programme of training along with a programme of live, tabletop and communication exercises. The exercises are designed to test and develop our plans and afford an opportunity for staff to participate as part of their continued professional development.
- 6.2 The Trust is required to carry out exercises as follows:
 - Communication Exercise minimum frequency every 6 months
 - Table-top Exercise minimum frequency every 12 months
 - Live Play Exercise- minimum frequency every 3 years
 - Command post exercise minimum frequency every three years
- 6.3 The table below details the training and exercises undertaken from April 2021 to July 2022. A total of 402 people have been trained or praticipated in exercises during this period.



- 6.4 It should be noted that several training, exercising and testing events have been cancelled/ rescheduled due to the Coronavirus Pandemic. These events have either been re-scheduled or will be at an appropriate time.
- 6.5 Wherever possible, the Trust strives to ensure that our testing and exercising is held in a multi-agency context. This is to provide familiarisation with other organisations and to assist with benchmarking our response with our partners. Exercises provide invaluable insight into the operationalisation of our plans and also highlight any gaps in our response arrangements that might need to be further developed.

7.0 Emergency Planning Apprenticeships

- 7.1 The Emergency Planning Manager for SaTH continues to chair the Emergency Planning Apprenticeship Trailblazer group established in May 2021.
- 7.2 On behalf of the group, the Chair submitted a bid through the Local Resilience Forum Innovation Fund with a view to funding a dedicated Project Manager. The bid was successful and the group were awarded £60,000.
- 7.3 Subsequently, the group were delighted to appoint Dr El Parker as the Project Lead. El has extensive experience of the Resilience movement along with demonstrable academic and curriculum design experience. The project is now developing at significant pace and it is anticipated that the first cohort of Undergraduate Degree Apprentice Resilience Practitioners will commence their study in Autumn 2023.

8.0 Risks and actions

8.1 The National Security Risk Assessment and the National Risk Register are reviewed every 2 years and are due for publication later on in 2022. These risks are considered at the Local Resilience Forum and plans, policies and procedures are developed in line with the most likely and highest impact risks.

- 8.2 The Top Risks identified on the West Midlands community risk register are:
 - Failure of National Electricity Transmission
 - Pandemic Influenza
 - Fluvial Flooding
 - Catastrophic Collapse within the Ironbridge Gorge
 - Animal Diseases
 - Low Temperatures and Heavy Snow
 - Industrial Action

9.0 Conclusion

- 9.1 The EPRR work programme for 2022/23 will include:
 - Ongoing response to the coronavirus pandemic and implementation of the learning identified frim the pandemic response during 2020-22.
 - Updating plans and standard operating procedures to take account of changes to the national security Risk Assessment and the National Risk Register.
 - Development of a Reservist Role to support in times of extreme site pressures, Major Incidents and Business Continuity Incidents.
 - Development of online training modules on the LMS platform.
- 9.2 The past year has seen good developments in the Trust's resilience arrangements; however, more work is required at the service level to achieve full resilience.
- 9.3 The Trust will be undertaking a more detailed and comprehensive training and exercising programme; however, this requires an agreement and commitment for staff to be released to attend.

Chief Operating Officer August 2022