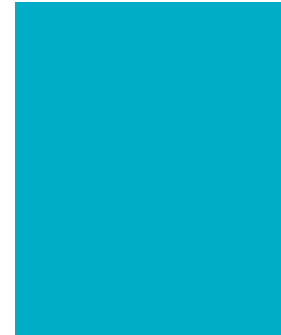


# Arrangements for NHS EPRR from April 2013

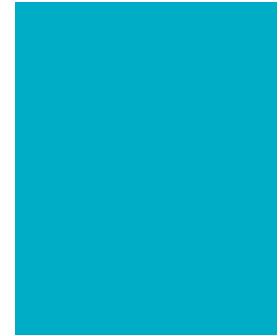


17 December 2012



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Head of Emergency Preparedness Resilience and Response (Midlands & East) - Designate



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## Major Incident / Emergency

***Any event whose impact cannot be handled within routine service arrangements. It requires the implementation of special procedures by one or more of the emergency services, the NHS, or a local authority to respond to it***

*(NHS Major Incident definition can be found in the NHS Emergency Planning Guidance 2005...and the update that will be published in the near future)*

# EPRR..?

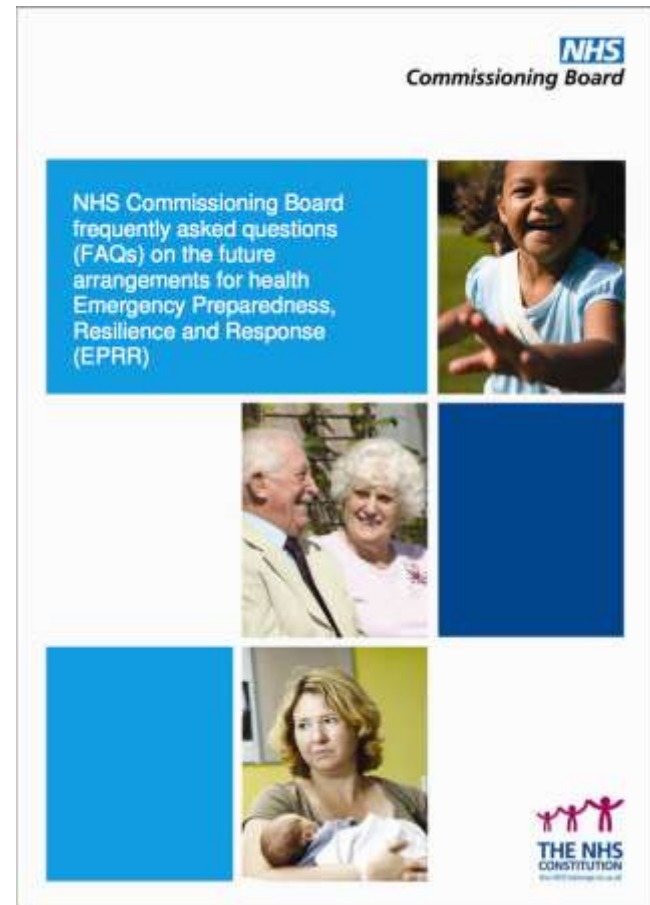
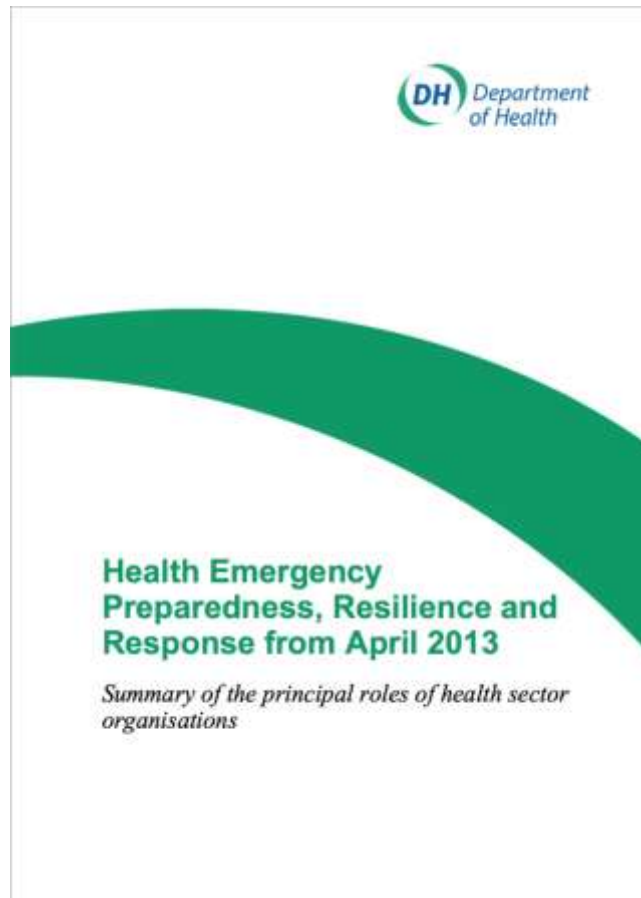
Emergency Preparedness Resilience and Response

***EPRR is defined by a series of statutory responsibilities under the Civil Contingencies Act (2004)***

***This requires NHS-funded organisations to maintain a robust capability to plan for, and respond to, incidents or emergencies that could impact on health or services to patients***

# Guidance

<http://www.commissioningboard.nhs.uk/our-work/gov/eprp/>



# Scope

- Lexicon
- What our partners want (and the public)
- Current Arrangements
- Delivering the new EPRR Policy
  - The Duties of CCGs

# Lexicon

- **The Civil Contingencies Act 2004** or CCA is an Act of Parliament that establishes a coherent framework for emergency planning and response ranging from local to national level
- **Local Resilience Forum**..is the body that oversees emergency planning and civil contingencies...is co-terminous with police boundaries. It comprises senior officials representing all Category 1 Responders, as defined under the CCA, together with key partners
- Whilst it is not a statutory body it is seen as the principal mechanism for facilitating multi-agency co-operation across the responding bodies to a major incident

# Local Resilience Fora (LRFs)





# Responders

- **Category 1 responders** are those organisations at the core of emergency response (e.g. emergency services, local authorities). Category 1 responders are subject to the full set of civil protection duties: **Risk Assessment; Emergency Planning; Business Continuity Planning; Warning and informing; Information Sharing; Co-operation; Advice and Assistance**
- **Category 2 responder** organisations are "co-operating bodies". Primarily their role is co-operating and sharing relevant information with Category 1 responders. They should be engaged in discussions where they can add value; they must respond to reasonable requests.

## Lexicon (2)

### Command Structure

- The Gold (strategic), Silver (tactical) and Bronze (operational) tiered command structure used by the police and other emergency services is nationally recognised and accepted.
- In England, Wales and Northern Ireland, the terms Gold, Silver and Bronze are used in preference to the terms strategic, tactical and operational although, in practice, they are interchangeable.
- The command structure is role, not rank, specific.

## Lexicon (3)

**Strategic Coordinating Group** or SCG is a multi-agency forum operating at the Gold tier of command

- The Gold Commander should establish and then chair a Strategic Coordinating Group (SCG) in order to coordinate the emergency or major incident.
- The primary purpose of the SCG is to review the situation from a strategic perspective and to deliver strategic leadership throughout the course of an emergency or major incident. It is required to remain focused on the overall picture, and must not become concerned with detailed tactical or operational decisions.

## Lexicon (4)

### **Tactical Coordinating Group**

- Other emergency services will appoint Silver Commanders to act as tactical commanders for their organisations. In addition, other agencies will send representatives to the scene to act as tactical commanders or coordinators on behalf of their organisation.
- The Silver Commander should bring all these tactical commanders and coordinators together and form a Tactical Coordinating Group (TCG). This group should be formed as soon as is practicable in order to determine a coordinated response at the tactical level.

# What do our partners want?

- A clear lead for health that delivers the NHS involvement in planning and response
  - Regardless of what you think, they do not need or have the time to understand the detailed organisation of health, commissioner/provider issues etc
- A focal point/person in LRF and SCG who can advise on NHS issues, impacts and responses
- Robust arrangements to ensure that health plans and prepares collectively and seeks to build in resilience
  - Business continuity management is a given

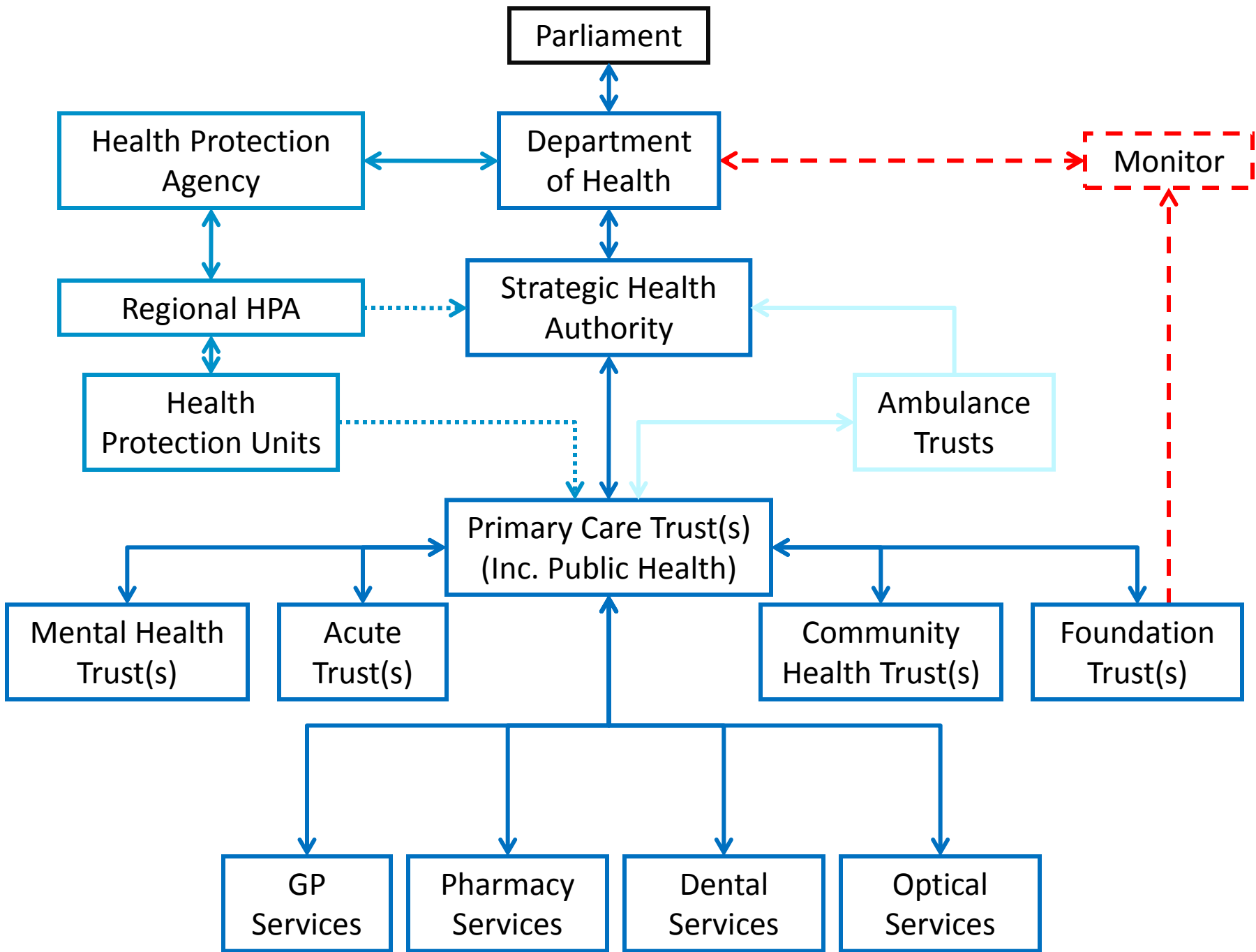
## Lexicon (5)

**Business continuity management (BCM)** is the strategic and tactical capability of the organisation to plan for and respond to incidents and business disruptions in order to continue business operations at an acceptable pre-defined level. BCM planning should be aimed at maintaining critical activities, and response to an incident must take into account the likelihood and impact of the loss of one or more critical activities or critical infrastructure.

- Critical activities are those activities which have to be performed in order to deliver the key products and services which enable an organisation to meet its most important and time sensitive objectives.

# Questions?

- **Lexicon**
- **What our partners want (and the public)**
- Current Arrangements
- Delivering the new EPRR Policy
  - The Duties of CCGs





## Existing Arrangements

- Primary Care Trusts have led the health input to the multi-agency Local Resilience Fora; in anticipation of or following an emergency or major incident that could impact on health or health services, PCTs have provided the health input within Strategic and Tactical Coordinating Groups.
- Ambulance services whilst part of the NHS, also attend the LRF as one of the three emergency services.

# Health System Responder Status

## **Category One under the Civil Contingencies Act 2004**

- NHS Commissioning Board (at all levels)
- Public Health England (including Centres)
- Local Authorities via Directors of Public Health
- Majority of NHS Provider Organisations e.g. Acute Hospital Trusts, Ambulance Service

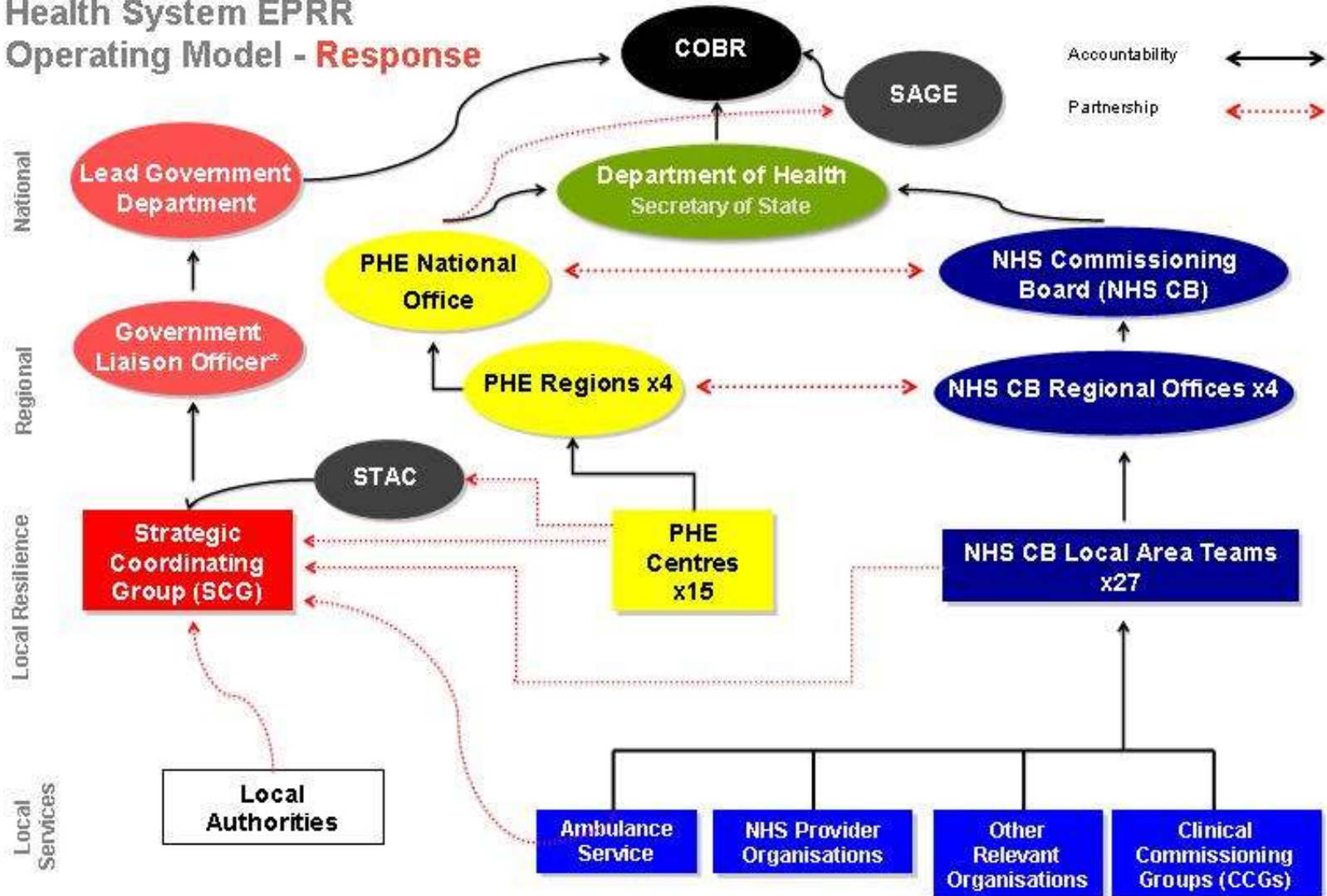
## **Category Two under the Civil Contingencies Act 2004**

- Clinical Commissioning Groups

## **No Collective Responder Status**

- Local Health Resilience Partnerships (LHRPs)
- Scientific, Technical and Advisory Cells (STAC)

## Health System EPRR Operating Model - **Response**

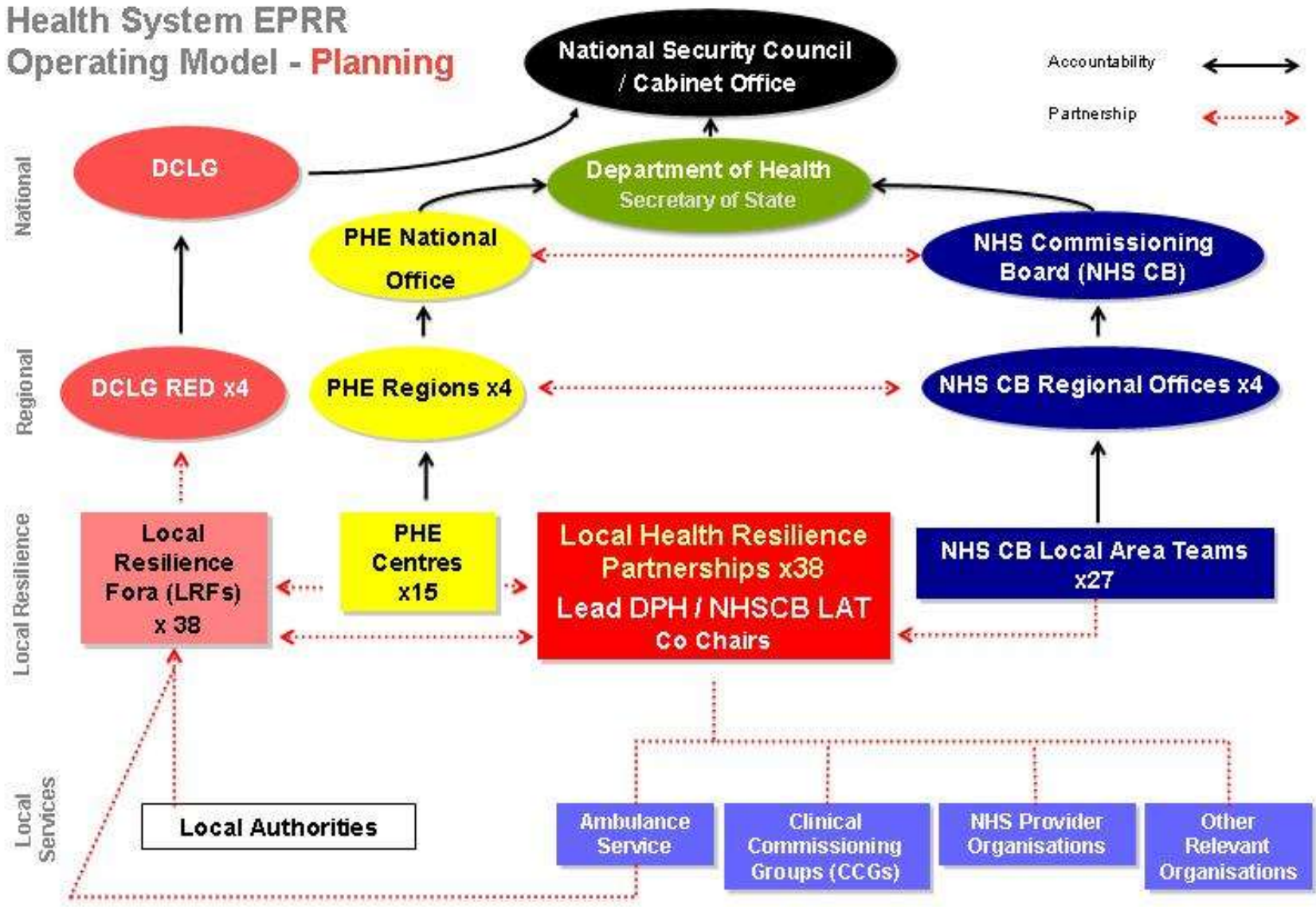


\*Normally led by DCLG RED. But can vary depending on the type of emergency

# CCGs in Response

- As Category 2 Responders under the CCA, CCGs must respond to reasonable requests to assist and co-operate.
- Some, but not all, CCGs may become more involved in the provision of EPRR, for example:
  - Where there is a significant issue of geographic remoteness, which may compromise an Area Team to act alone as a Category 1 responder. In such circumstances, the Area Team may request support from CCG members to become part of the initial health response.
  - Where there are specific risks identified in local risk registers, such as nuclear, chemical or biological

## Health System EPRR Operating Model - **Planning**



# Local Health Resilience Partnerships (LHRPs)



## Local Health Resilience Partnerships (LHRPs)

- New non-statutory planning bodies for the local health system
- Largely coterminous with LRF boundaries and consistently implemented
- Provide strategic forums for joint planning and preparedness for emergencies
- Supporting the health sector's contribution to multi-agency planning and preparation for response through LRFs
- Accountability for emergency preparedness and response remains with individual organisations, in line with their respective statutory duties
- Co-Chaired between a local Director of Public Health and an NHS Commissioning Board Director
- Membership will include local health agencies including NHS providers, the ambulance service and Clinical Commissioning Groups (CCGs)

## LHRPs - continued

### **The new system aims to offer considerable benefits, including:**

- A more consistent approach across England, permitting better understanding of health preparedness at LRF level and nationally
- Leadership of planning and resilience at a senior level with a focus on cross-agency preparedness including improved links with local government
- An opportunity for better integration between health and local government emergency planning for the protection of each community
- A resource pack to support the implementation of LHRPs was launched on the 26th July 2012 <http://www.dh.gov.uk/health/2012/07/resilience-partnerships/>



# CCGs – Preparedness & Resilience

- Represented on the LHRP (either on their own behalf or through representation by a 'lead' CCG).
- Ensure contracts with NHS funded provider organisations contain relevant emergency preparedness, resilience (including business continuity) and response elements.
- Fulfil the responsibilities as a Category 2 responder under the CCA including maintaining business continuity plans for their own organisation.
- Should providers fail to maintain their performance levels, CCGs need to provide their commissioned providers with a route of escalation on a 24/7 basis.
- On Call arrangements

## Next Steps – Up to and beyond April 13

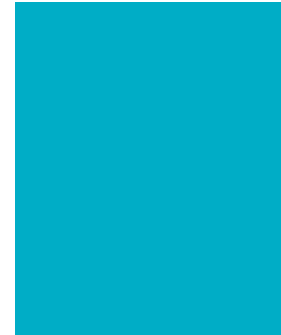
- Complete establishment of LHRP
- Complete recruitment and training to enable Area Teams to take over PCT responsibilities
- Complete Assurance Exercises (23 January and 6 February)
- Implement NHS CB Incident Response Plan, establish Incident Coordination Centres and update extant plans.
- Independent Review of Area and Regional Readiness
- Compile development plans and consolidate new arrangements through 2013

# Questions?

- **Lexicon**
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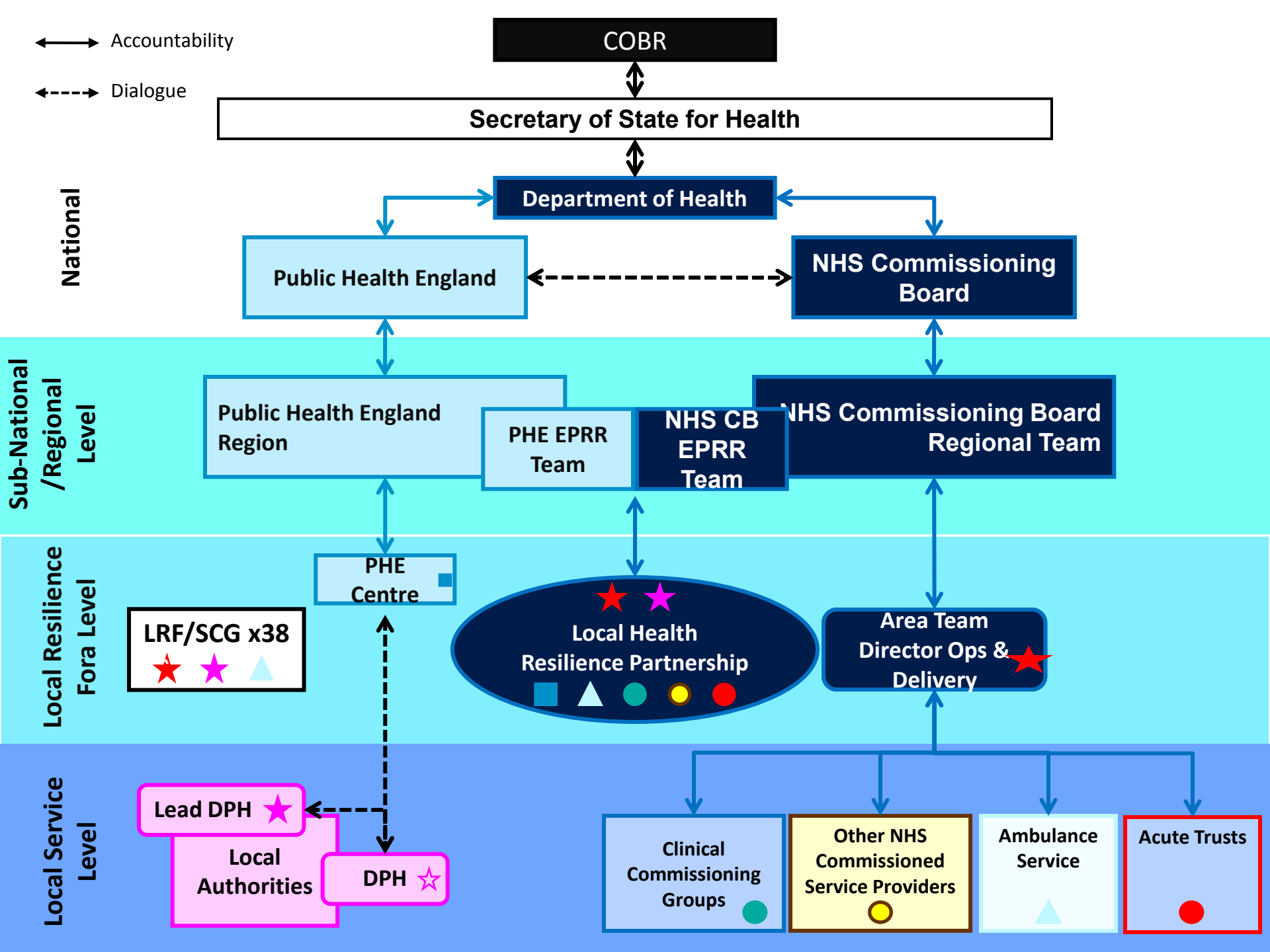


# Public Health England (PHE) Centres

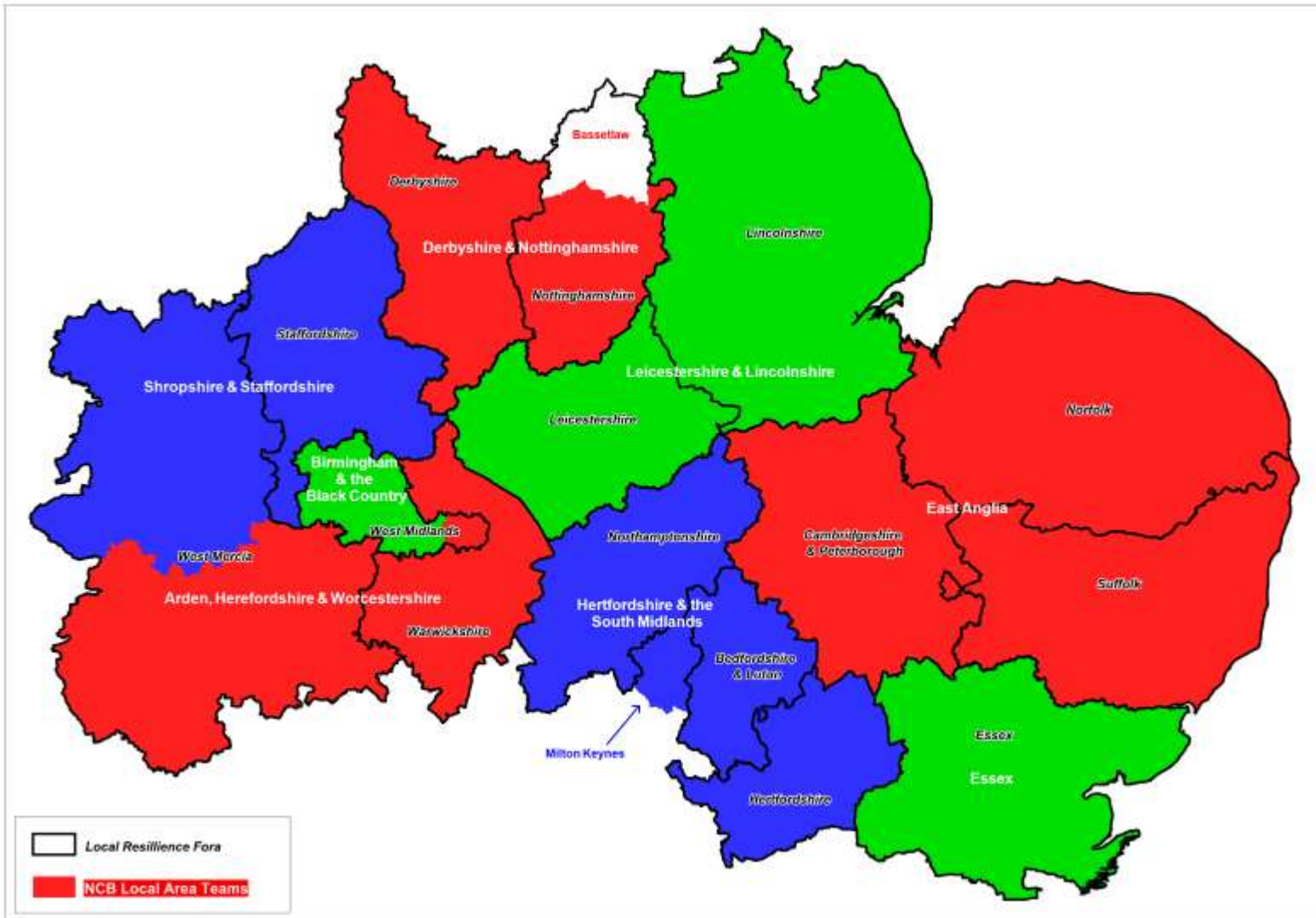


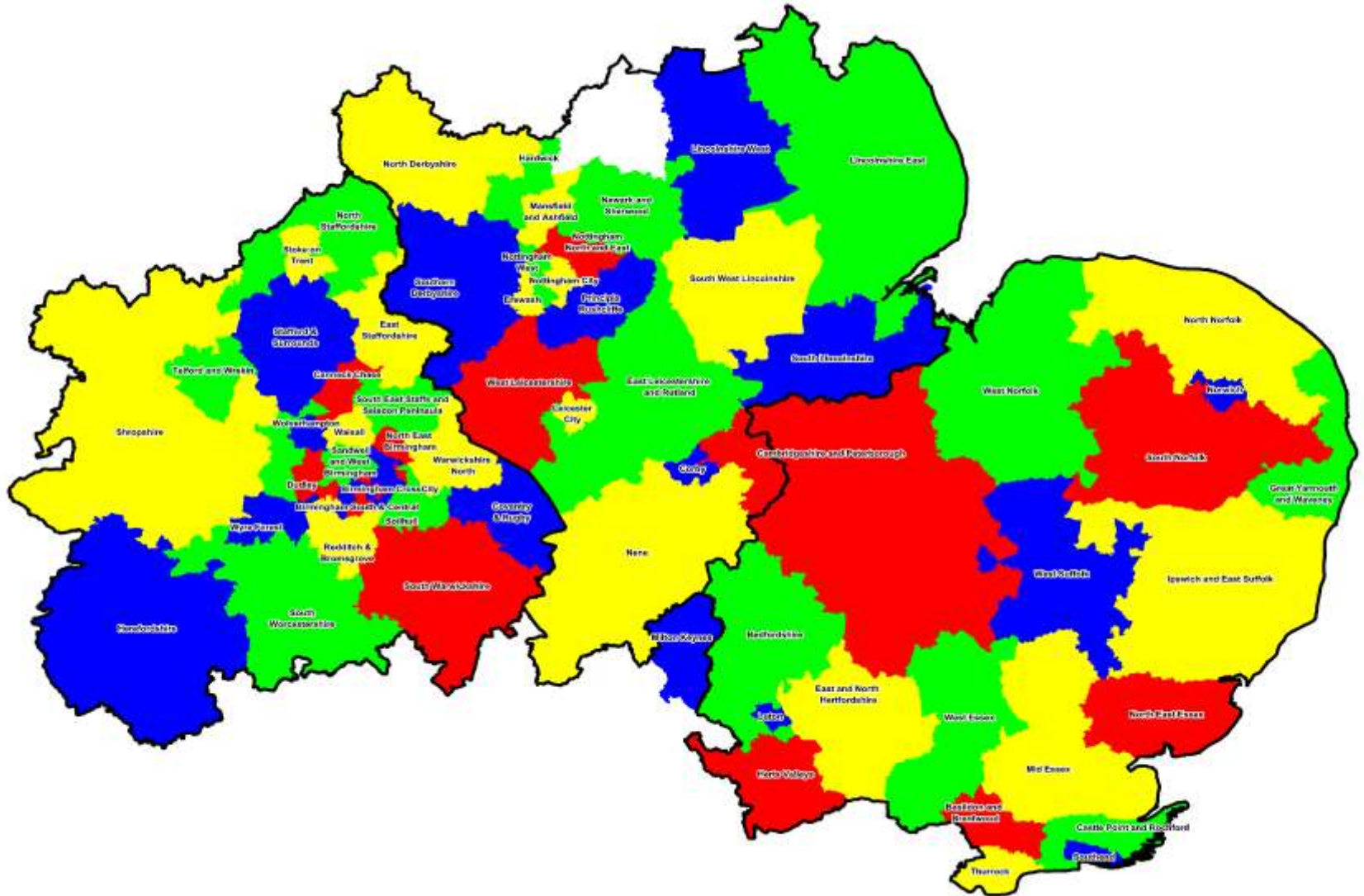
Commissioning Board











# The BCM Life Cycle

