

## Trust Board of Directors

3<sup>rd</sup> November 2022

<b>Report Title:</b>	EPRR Annual Core Standards Return <b>Public Paper</b>
<b>Executive/NED Lead:</b>	Paul Fenton, Director of Estates and Facilities (Accountable Emergency Officer)
<b>Report author(s):</b>	Michael Fuller, Associate Director of EPRR, EFM Contracts and Community Properties
<b>Previously considered by:</b>	EPRR Strategic Group – 28 <sup>th</sup> September 2022

**Approval**

**Discussion**

**Information**

**Assurance**

### Executive summary

The Trust is required to undertake an annual core standards assessment in line with the NHSEI EPRR Framework and the NHS Standard Contract. This assessment underpins the EPRR activity and enables the Trust to demonstrate its compliance and the discharge of its duties under the Civil Contingencies Act 2004 as a Category 1 responder.

The annual core standards return for Emergency Preparedness, Resilience and Response (EPRR) has been undertaken.

Annual self-assessments are scored against relevant core standards with each standard scored either;

- Non-compliant - Not compliant with the core standard. The organisation's EPRR work programme shows compliance will not be reached within the next 12 months.
- Partially compliant - Not compliant with core standard. However, the organisation's EPRR work programme demonstrates sufficient evidence of progress and an action plan to achieve full compliance within the next 12 months.
- Fully compliant - Fully compliant with core standard.

Once each of the standards has been assessed the organisation has an overall score determined by the percentage of standards scoring fully compliant as follow;

Organisational rating	Criteria
Fully compliant	The organisation is fully compliant against 100% of the relevant NHS EPRR Core Standards
Substantial compliance	The organisation is fully compliant against 89-99% of the relevant NHS EPRR Core Standards
Partial compliance	The organisation is fully compliant against 77-88% of the relevant NHS EPRR Core Standards
Non-compliant	The organisation is fully compliant up to 76% of the relevant NHS EPRR Core Standards

This year's assessment required ESNEFT to score ourselves against 64 standards assigned to acute hospital Trusts. Of the 64 standards appropriate for our assessment, 57 had been reworded or significantly adapted from the 2021 return.

We assessed ourselves as Fully Compliant in 60 of the 64 with the 4 standards not met included in the work plan for the coming month and therefore partially compliant. Overall the score of 60 out of 64 represents a compliance rating of **93.74% therefore the Trust remains at a Substantially Compliant status.**

This assessment required submission out of line with Board timescales and Governance timeframes and therefore prior to submission the Associate Director of EPRR met with the following and reviewed the submission;

- Chief Executive Officer
- Deputy Chief Executive Officer
- Director of Estates and Facilities (SRO for EPRR)
- Directors of Operations
- Directors of Community Services for both Suffolk and Essex

All of the above individuals and the AD of EPRR signed the submission letter with the standards return.

Subsequently the return has been reviewed at the EPRR Strategic Group on the 28<sup>th</sup> September, the group was quorate with 6 Executive roles represented. The Group recommends to the Board that the assessment is accepted

This year’s assessment also included a deep dive question set into shelter and evacuation, whilst this did not count towards the overall assessment score it is positive to report that ESNEFT scored fully compliant in 9 of the 13 questions presented with the remaining 4 questions scoring partially compliant due to their inclusion in the annual work plan. Also worthy of note is that these 4 elements are linked to the ongoing RAAC response plan which includes shelter and evacuation agreements across the region. ESNEFT are providing support with the creation and exercising of these plans to our regional and system colleagues.

ICS representatives have undertaken a peer review of the ESNEFT return on the 29<sup>th</sup> September in Aspen House Colchester. No conflicts arose on the peer review and none of the Trusts assessment scores have been challenged.

**Action Required of the Board**

The Trust Board of Directors are asked to receive and acknowledge the completed assessment and retrospectively approve the submission.

Link to Strategic Objectives (SO)		Please tick
SO1	Keep people in control of their health	<input type="checkbox"/>
SO2	Lead the integration of care	<input type="checkbox"/>
SO3	Develop our centres of excellence	<input checked="" type="checkbox"/>
SO4	Support and develop our staff	<input checked="" type="checkbox"/>
SO4	Drive technology enabled care	<input type="checkbox"/>

<b>Risk Implications for the Trust</b> <i>(including any clinical and financial consequences)</i>	Non-compliance with the legal, contractual and statutory requirements has implications for the Trust in relation to reputation impact and financial loss. Individual commanders can be held accountable for their failure to act or to reasonably justify their decision making. Impacts on all service provisions may occur should we fail to appropriately and effectively respond, manage and recover from incidents.
<b>Trust Risk Appetite</b>	Compliance/Regulatory: The board has a minimal risk appetite when it comes to compliance with regulatory issues. It will meet

	laws, regulations and standards unless there is strong evidence or argument to challenge them.
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<b>Legal and regulatory implications</b> <i>(including links to CQC outcomes, Monitor, inspections, audits, etc)</i>	<p>The Civil Contingencies Act 2004 and the NHS Act 2006 as amended by the Health and Social Care Act 2012 underpin EPRR within health. Both Acts place EPRR duties on NHS England and the NHS in England.</p> <p>Additionally, the NHS Standard Contract Service Conditions (SC30) requires providers of NHS funded services to comply with NHS England EPRR guidance.</p>
<b>Financial Implications</b>	The financial implications from the delivery of the work plan are that the Trust agrees to supply the appropriate resources in relation to material, labour, facilities and time to deliver the plan in order to become compliant.
<b>Equality and Diversity</b>	There are no impacts on equality and diversity by implementing the work plan or in the assurance process.

## Appendices



ESNEFT Core  
Standards 2022 return