

Emergency Preparedness, Resilience and Response (EPRR) Policy

This Policy describes how Leicestershire Partnership NHS Trust will comply with all applicable EPRR obligations.

Key Words:	Emergency Planning, Emergency Preparedness, Business Continuity, Resilience, Major Incident.	
Version:	5	
Adopted by:	Trust Policy Committee	
Date this version was adopted:	6 May 2021	
Name of Author:	Michael Ryan, EPRR Manager	
Name of responsible Committee:	Health and Safety Committee	
Please state if there is a reason for not publishing on website:	None	
Date issued for publication:	May 2021	
Review date:	October 2023	
Expiry date:	1 May 2024	
Target audience:	All Staff	
Type of Policy	Clinical	Non Clinical √
Which Relevant CQC Fundamental Standards?	N/a	

Contents

Equality Statement	1
Analysis of Equality	1
1 Summary	1
2 Introduction	2
3 Purpose	3
3.1 Standards	3
3.2 Scope	3
4 Responsibilities	4
4.1 Chief Executive	4
4.2 Accountable Emergency Officer	4
4.3 Head of Trust Health and Safety Compliance	4
4.4 Directors	5
4.5 On-Call Directors and On-Call Managers	5
4.6 Service Business Continuity Leads	5
4.7 Heads of Service	5
4.8 Team Managers	5
4.9 All Staff	5
4.10 Emergency Planning Manager	6
4.11 Health and Safety Committee and Directorate Health, Safety and Security Action Groups	6
5.0 Building and Maintaining Emergency Preparedness, Resilience and Response	6
5.1 The Principles of Integrated Emergency Management	7
5.2 The Civil Contingencies Act 2004	8
5.3 Response to Business Continuity / Major Incident	10
5.4 Business Continuity Management System	11
6 Training and Awareness	15
7 Links to Standards/Performance Indicators	16
8 Reference and Associated Documentation	16
Appendix 1 Policy Monitoring Section	18
Appendix 2 Policy Training Requirements	20
Appendix 3 Due Regard Screening Template	21
Appendix 4 The NHS Constitution	22
Appendix 5 Privacy Impact Assessment Screening	23

Version Control and Summary of Changes

Version number	Date	Comments (description change and amendments)
1	September 2013	New Policy
2	July 2015	Updated to reflect the new policy template, new EPRR guidance and changes in EPRR reporting structures within LPT. Addition of reference to:- <ul style="list-style-type: none"> • HIS IT Services Recovery Plan • Information Risk Policy
3	July 2016	Updated to reflect the following: <ul style="list-style-type: none"> • New definition for the term Major Incident • Inserted the correct minimum frequency for command post exercises
4	February 2018	Policy Review <ul style="list-style-type: none"> • Updated definitions that apply to this policy table. • References updated
5	March 2021	3.1 Reference to 2015 EPRR framework updated to 2018 4.2 Amendment to state surge capacity plan is validated by LHRP Sub Operational 4.10 Updated to state EPRR Manager will provide quarterly report to the Health and Safety Committee not Finance and Performance Committee.

For further information contact:

All LPT Policies can be provided in large print or Braille formats, if requested, and an interpreting service is available to individuals of different nationalities who require them.

Did you print this document yourself?

Please be advised that the Trust discourages the retention of hard copies of policies and can only guarantee that the policy on the Trust website is the most up-to-date version.

For further information contact:

Michael Ryan
Emergency Planning Manager, Leicestershire Partnership NHS Trust
Tel: 07785414404

Key individuals involved in developing the document

Name	Designation
Michael Ryan	Emergency Planning Manager

Circulated to the following individuals for comment

Name	Designation
Members of the Health and Safety Committee	Agreeing Committee
Members of the Emergency Planning Group	Specialist Group
Members of the Directorate, Health, Safety and Security Action Groups	Sub-group of the Agreeing Committee

Equality Statement

Leicestershire Partnership NHS Trust (LPT) aims to design and implement policy documents that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others. It takes into account the provisions of the Equality Act 2010 and promotes equal opportunities for all. This document has been assessed to ensure that no one receives less favourable treatment on the protected characteristics of their age, disability, sex (gender), gender reassignment, sexual orientation, marriage and civil partnership, race, religion or belief, pregnancy and maternity.

Due Regard

LPT will ensure that Due regard for equality is taken and as such will undertake an analysis of equality (assessment of impact) on existing and new policies in line with the Equality Act 2010. This process will help to ensure that:

- Strategies, policies and procedures and services are free from discrimination;
- LPT complies with current equality legislation;
- Due regard is given to equality in decision making and subsequent processes;
- Opportunities for promoting equality are identified.

Please refer to due regard assessment (Appendix 3) of this policy

Definitions that apply to this Policy

AEO	Accountable Emergency Officer
Business Continuity	The capability of an organisation to continue to delivery services at acceptable predefined levels following a disruptive incident.
Business Continuity Management	A holistic management process that identifies potential hazards to an organisation and the impacts on service delivery of those hazards, if they occur, and which provides a framework for building organisational resilience with the capability for an effective response that safeguards the interests of its key stakeholders, reputation, brand and value-creating activities.
Business Continuity Management System (BCMS)	Part of the overall management system that establishes, implemented, operates, monitors, reviews, maintains and improves business continuity.
Business Continuity Plan	Documented procedures that guide organisations to respond, recover, resume and restore service delivery to a pre-defined level of operation following a disruption.
BIA	Business Impact Analysis
Category 1 Responders	Organisations at the core of any emergency response; for example local authorities, the emergency services, NHS England, NHS Foundation Trusts with accident/emergency facilities, Ambulance Service NHS Trusts, and Public Health England
Category 2 Responders	These are seen as co-operating bodies, which are less likely to be involved in the heart of planning, but are likely to be heavily involved in the response to incidents that affect their sector through sharing information and co-operating in the response., Utility companies (water, gas, electricity, telecommunications), rail companies, airport operators and the Highways Agency are all Category 2 responders.
CCA 2004	Civil Contingencies Act 2004
Due Regard	Having due regard for advancing equality involves: <ul style="list-style-type: none"> • Removing or minimising disadvantages suffered by people due to their protected characteristics. • Taking steps to meet the needs of people from protected groups where these are different from the needs of other people. • Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low.
Emergency / Major Incident	An event or situation, with a range of serious consequences, which requires special arrangements to be implemented by one or more emergency responder agencies.
Emergency Preparedness,	The collective term utilised by the NHS to cover business continuity planning and the preparation and response to emergencies.

Resilience and Response (EPRR)	
International Standard for Business Continuity (ISO 22301 & ISO 22313)	International standard for the development of Business Continuity Management Systems. All NHS funded organisations are encouraged to align their Business Continuity Management Systems to the standard.
Publically Available Specification 2015:2010 (PAS 2015)	NHS guidance outlining the principles which should be followed by NHS funded organisations in developing business continuity plans.
Incident Co-ordination Centre (ICC) Major Incident Room	A designated location from which an organisation would co-ordinate the response to an emergency.
IEM	Integrated Emergency Management
Local Health Resilience Partnership (LHRP)	The strategic forum in Leicestershire for facilitating joint health community emergency planning.
LLR Prepared	Leicester, Leicestershire and Rutland (LLR) Prepared is the principal forum in Leicestershire for multi agency cooperation between Category 1 and Category 2 Responders (the common term within UK emergency planning for this forum is the Local Resilience Forum (LRF)).
LRF	Local Resilience Forum
Major Incident Plan	Clearly identified plan to be used in order to implement an effective and co-ordinated response to an emergency or major incident.
Resilience	Ability of an organisation to adapt and respond to disruptions, whether internal or external, to deliver agreed critical activities.
SC 30	2013/14 NHS Standard Contract Service Conditions

Equality Statement

Leicestershire Partnership NHS Trust (LPT) aims to design and implement policy documents that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others.

It takes into account the provisions of the Equality Act 2010 and promotes equal opportunities for all.

This document has been assessed to ensure that no one receives less favourable treatment on the protected characteristics of their age, disability, sex (gender), gender reassignment, sexual orientation, marriage and civil partnership, race, religion or belief, pregnancy and maternity.

In carrying out its functions, LPT must have due regard to the different needs of different protected equality groups in their area.

This applies to all the activities for which LPT is responsible, including policy development and review.

Analysis of Equality

The Trust is committed to an environment that promotes equality and embraces diversity in its performance as an employer and service provider. It will adhere to legal and performance requirements and will mainstream equality and diversity principles through its policies, procedures and processes.

This policy has been developed in context of paying due regard to the Public Sector Equality Duty (Equality Act 2010) to eliminate unlawful discrimination, harassment, victimisation; and advance equality of opportunity and foster good relations.

The Trust will endeavour to make reasonable adjustments to support any employee or service user following the implementation of this policy.

Due regard will also be demonstrated through the use of interpretation and translation services to ensure the workforce and service users are informed of any critical or essential information to support implementation of this policy

This policy will be continually reviewed to ensure any inequality of opportunity for service users, patients, carers and staff is eliminated wherever possible.

An analysis of the impact and equality found the activity outlined in the document to be equality neutral because this policy describes the arrangements in place for all staff across the Trust.

1.0 Summary

This Policy provides the framework which Leicestershire Partnership NHS Trust (LPT) follows in establishing, maintaining and continual improving a Business Continuity Management System and Major Incident Plan that complies with all applicable Emergency Preparedness, Resilience and Response obligations.

2.0 Introduction

The NHS needs to be able to plan for and respond to a wide range of incidents and emergencies that could affect health or patient care. These could be anything from severe winter weather to an infectious disease outbreak or a major transport accident. This work is referred to in the health service as 'Emergency Preparedness, Resilience and Response' (EPRR).

Under the requirements of new NHS EPRR guidance¹ LPT is required to:-

- Have suitable and up to date incident response plans which set out how LPT would respond to and recover from a major incident / emergency which is affecting the wider community or the delivery of services; and
- Adopt business continuity plans to enable LPT to maintain or recover the delivery of critical services in the event of a disruption.

Planning for emergencies has developed significantly since the introduction of statutory duties under the Civil Contingencies Act 2004. 'Category One' responders, must show that they are working with other responders to assess risks, develop and maintain plans, share information and co-operate on civil contingency response.

LPT does not meet the legal definition of a Category One, however under EPRR guidance the Department of Health and NHS England expects all NHS funded organisation to plan for and respond to incidents in the same way as a Category One responder, though in a manner which is proportionate to the scale and services provided.

With the aim of developing effective business continuity plans, LPT as a NHS funded organisation is encouraged to develop, maintain and continually improve business continuity management system (BCMS) that follow the principles of ISO 22301 (International Standard for Business Continuity) and the Department of Health PAS 2015 (Framework for health services resilience).

The BCMS establishes a strategic and operational framework, enabling LPT to proactively implement resilience to any disruption to critical activities. Business continuity requires planning across many facets of LPT; therefore its resilience depends equally on its management and operational staff, as well as technology.

This Policy outlines the organisational arrangements for implementation of the policy and how our emergency preparedness and business continuity plans will respond to incidents which might affect delivery of critical services or affect the wider healthcare community.

This Policy applies to all employees of the organisation, but especially to those with specific responsibility, or accountability for ensuring that LPT complies with its EPRR obligations.

¹NHS England Emergency Preparedness Resilience and Response Framework 2018

3.0 Purpose

The Purpose of the Policy is:-

- To ensure that LPT can provide an effective, robust and co-ordinated response to a disruption to business continuity or to a major incident / emergency that is affecting the wider community or another NHS funded organisation.

The Objectives of this Policy is to provide an EPRR structure through which:-

- LPT can meet its obligations to all appropriate EPRR guidance and core standards; and the Civil Contingencies Act 2004;
- The emergency preparedness, resilience and response roles and responsibilities of employees are defined;
- A Major Incident Plan is maintained in order to implement an effective response to a major incident / emergency.
- The reputation of LPT is not compromised;
- That LPT shares information with partner agencies to enhance co-ordination and co-operation;
- A comprehensive BCMS is established and maintained, following the principles of PAS 2015 & ISO 22301;
- LPT has identified those activities which are critical to the delivery of patient care;
- The level of risk to the provision of health care is assessed and risk mitigation strategies are applied to reduce the impact of a disruption to business continuity;
- Business continuity plans are developed, tested and regularly reviewed to ensure that LPT can deliver an effective response to a disruption to service delivery;
- An annual cycle of EPRR exercises is held to test the effectiveness of LPT's response to a business continuity disruption and major incident;
- LPT annually reviews the BCMS and emergency preparedness with the aim of agreeing EPRR objectives and strategies to drive continual improvement;
- That in responding to a major incident or business continuity disruption, LPT considers the needs of all communities it serves and ensures that no group is discriminated against.
- The LPT Finance & Performance Committee and Board can be assured that the BCMS and emergency preparedness remains up to date, ensuring that LPT can deliver an effective and robust response to a major incident or business continuity disruption in line with our EPRR obligations.

3.1 Standards

The development and maintenance of a Major Incident Plan and a BCMS will assure the Board that LPT is in compliance with:-

- Care Quality Commission Essential standards of quality and safety (6d)
- NHS Standard Contract Service Conditions (SC30)
- NHS England EPRR core standards

3.2 Scope

LPT's BCMS applies to all areas of patient care, enabling services and other departments within the trust. It does not cover the activities of external organisations which are contracted to provide support to or supply LPT. However, where

appropriate in developing business continuity and emergency plans, LPT will consult and closely liaise with stakeholders; partner agencies; other service providers and support services to ensure that LPT plans and the plans of other organisation LPT would be effective and mutually supportive in responding to an incident.

LPT will seek assurance from external organisations which are contracted to provide services in support of LPT critical activities, that they have effective business continuity plans in place to maintain or recover their service provision.

4.0 Responsibilities

4.1 The Chief Executive Officer has overall responsibility for:-

- Ensuring that the organisation will prepare, maintain, review and continual improve business continuity plans in order to maintain or recover the delivery of critical activities during business continuity disruptions;
- Ensuring that the organisation has a Major Incident Plan in place for responding to a major incident or emergency; and
- To appoint a board level member of staff to fulfil the role of the Accountable Emergency Officer.

4.2 The Accountable Emergency Officer is responsible for ensuring that the organisation:-

- Is compliant with the EPRR requirements as set out in the CCA 2004; the Health and Social Care Act (2012); NHS EPRR core standards; NHS England Emergency Preparedness, Resilience and Response framework (2018, and the NHS standard contract as applicable;
- Is properly prepared and resourced for dealing with major incident, or emergency;
- Has robust business continuity planning arrangements in place which follow the principles of the Framework for Health Services Resilience (PAS 2015) and ISO 22301;
- Has a robust surge capacity plan that provides an integrated organisational response and that it has been validated with the LHRP Sub Operational Group
- Complies with any requirements of CCGs and NHS EI, in respect of the monitoring of compliance;
- Provides NHSEI, with such information as it may require for the purpose of discharging its functions;
- Is appropriately represented at, and effectively contributes to, any governance meetings, subgroups or working groups of the LHRP or LRF.
- Can assure the Board that LPT is compliant with all its EPRR obligations.

4.3 The Head of Trust Health & Safety Compliance:-

- Has delegated responsibility to act as the Accountable Emergency Officer for LPT, and will escalate matters as required.
- That the Emergency Planning Manager is adequately supported to allow them to fulfil their role and responsibilities.
- Adequate resources and funds are made available to allow LPT to effectively respond to a disruption to business continuity and to a major incident or

emergency.

4.4 All Directors of Services are responsible for:-

- Being familiar with this Policy and to ensure that business continuity is part of the everyday culture of the organisation;
- Ensuring the Policy is followed and implemented within their areas of responsibility;
- That adequate resources from within their Service must be made available to ensure that business continuity plans are developed and maintained;
- Monitoring and auditing of their service's Business Continuity Plans; and
- Testing their plans in line with this policy.

4.5 On-Call Directors and On- Call Managers are responsible for:-

- Ensuring they attend EPRR training when requested;
- Maintaining an awareness of LPT Major Incident Plan and the Business Continuity Management System; and
- Leading the Service or LPT response to a significant disruption to business continuity or a major incident.

4.6 Services Business Continuity Leads are responsible for:-

- Supporting and assisting the Emergency Planning Manager in the development and maintenance of a Business Continuity Management System and plans and arrangements for responding to a major incident;
- Ensuring that service area business continuity plans are developed and maintained; and
- Ensuring that business continuity arrangements are regularly reviewed tested and maintained.

4.7 Head of Service are responsible for:-

- Support the Service Business Continuity Leads and Emergency Planning Manager in the development, maintenance and further improvement of the BCMS and preparedness for major incidents.
- Ensure that a suitable business continuity plan is in place for each of their sites and teams.

4.8 Team Managers:-

- Ensure their business continuity plan is up to date and relevant for their site / team / service area, reflecting critical patient functions and the risk to service delivery.
- Ensure staff and especially those who would be expected to take the lead for their site / team / war, understand their role under the business continuity plan to ensure a prompt and effective response to any disruption to business continuity.

4.9 All Staff:-

- Are familiar with their site / team Business Continuity Plan.

4.10 The Emergency Planning Manager is responsible for:-

- Ensuring that LPT meets its statutory obligations under the Civil Contingency Act 2004; EPRR core standards and complies with all relevant EPRR guidance;
- Developing and delivering the LPT's emergency preparedness and business continuity planning, improving standards of emergency preparedness across LPT;
- Providing leadership on specialist emergency preparedness and resilience issues;
- Reviewing emergency preparedness in light of new and emerging risks, recommendations, guidance and statutory requirements and organisational changes;
- Keeping the Trust Head of Health and Safety Compliance up dated on matters related to emergency preparedness,
- Ensuring that the organisation maintains an up to date Major Incident Plan and has Incident Coordination Centres (ICC) available;
- Co-ordinating the development and maintenance of LPT's BCMS;
- Providing advice and training to appropriate staff in relation to emergency preparedness, resilience and response;
- Liaising with emergency partners and within the organisation to ensure we can support the response to a major incident or emergency affecting the wider community;
- As appropriate ensure post incident reviews are conducted so that lessons may be learned;
- Ensuring auditing is undertaken of LPT business continuity plans with the aim of continual improvement in performance;
- Producing an annual programme of exercises with the aim of testing the effectiveness of LPT's BCMS and Incident Response;
- Providing the LPT Finance & Performance Committee and the LPT Health and Safety Committee with quarterly reports on EPRR preparedness;
- Providing the LPT Finance & Performance Committee with an annual report on the performance of LPT's business continuity management system;
- Provision of information to NHS EI and Clinical Commissioning Groups in support of assessment of LPT EPRR preparedness; and
- Seeking assurance from external service providers that relevant and robust business continuity plans are in place, tested and fit for purpose, e.g. HIS and UHL Estates and Facilities.

4.11 The LPT Health & Safety Committee and Directorate Health, Safety and Security Action Groups are responsible for:-

- Providing opportunities within existing meetings for the consideration of EPRR issues, approving actions as necessary to ensure LPT maintains effective emergency plans and Business Continuity Management System.

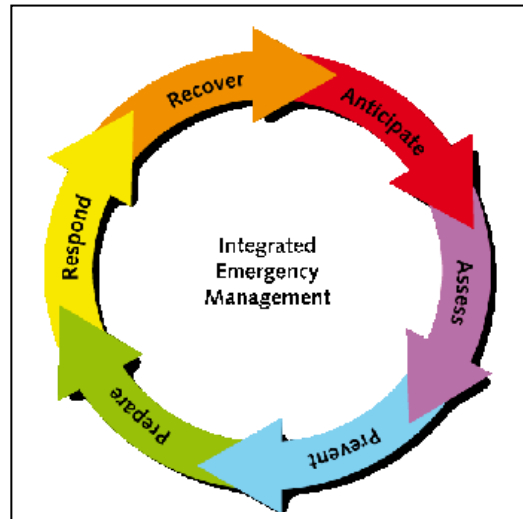
5.0 Building and Maintaining Emergency Preparedness, Resilience and Response

PAS 2015 promotes the use of the Integrated Emergency Management (IEM) approach to building resilience within NHS funded organisations. IEM is based

on following a life cycle of planning, testing, review and the setting of fresh objectives or targets to drive continual improvements in an organisation’s emergency preparedness.

Through IEM, LPT assures itself that it has developed flexible and adaptable plans, enabling the implementation of an effective response to a disruption to LPT business continuity or to a major incident affecting the wider community.

Figure 1: Integrated Emergency Management Life Cycle²



5.1 The Principles of Integrated Emergency Management

Table 1: Principles of Integrated Emergency Management

	Implications for LPT
Anticipate	Through horizon scanning, gain an awareness of the hazards that could affect LPT service delivery.
Assess	Assess the likely impact of hazards on LPT’s critical services and identify measures to prevent or mitigate the hazards.
Prevent	
Prepare	Develop business continuity plans, hazard specific incident response plans and supporting planning arrangement to ensure LPT is prepared to respond to disruptions to business continuity.
Respond	Adoption of tried and tested Major Incident Plan to ensure LPT can implement an effective response to a major incident or disruption to business continuity.
Recover	To be able to manage the longer term consequences of a disruption to business continuity or major incident and to be able to recover normal levels of service delivery as quickly as possible.

² NHS England Emergency Preparedness Resilience and Response Framework 2018

5.2 The Civil Contingencies Act 2004

The principles of Integrated Emergency Management; dovetails with LPT's EPRR obligations as an NHS funded organisation, under the Civil Contingencies Act 2004, and with the principles of ISO 22301 and obligations under PAS 2015 and DH EPRR guidance. A number of LPT's obligations to the Civil Contingencies Act 2004 will be achieved through co-operation and joint working with healthcare and emergency planning partners under the activities of the Leicestershire Leicester & Rutland (LLR) Local Resilience Forum (known as LLR Prepared). Table 2 outlines how LPT will meet the obligations to the Civil Contingencies Act 2004.

5.4

Table 2: Obligations under Civil Contingencies Act 2004

EPRR Obligations under the Civil Contingencies Act 2004		How the Obligation is met by LPT
Co-operation and Sharing information	<ul style="list-style-type: none"> • Co-operate with other responder organisations to enhance co-ordination and efficiency when planning for an emergency. • Co-operate with other responder organisations to enhance coordination and efficiency when responding to and recovering from an emergency. • Share information with other local responder organisations to enhance co-ordination both ahead of and during an emergency. 	<ul style="list-style-type: none"> • Director representation on the LRF Executive Group • Senior Manager Representation on the Local Health Resilience Partnership (LHRP) • Emergency Planning Manager membership of the LHRP Sub Operational Group. • Membership of the LLR Prepared (Local Resilience Forum) sub-groups. • Day to day co-operation between LPT Emergency Planning Manager and equivalents in partner agencies. • Day to day co-operation between LPT senior staff and equivalents with partner agencies. • Sharing appropriate information with partner agencies in planning for and responding to a major incident. • Under the LHRP Memorandum of Understanding NHS England is empowered to call upon the resources of LPT to assist in the response to a major incident. • Annual membership to the LRF

EPRR Obligations under the Civil Contingencies Act 2004		How the Obligation is met by LPT
Risk assessment	<ul style="list-style-type: none"> • Assess the risk of emergencies occurring within their area and use this to inform contingency planning. • Collaborate with other organisations to compile community, local or national risk registers. • Ensure internal corporate risk management processes include risk to continuation of services. 	<ul style="list-style-type: none"> • LLR Prepared undertakes risk assessment of the hazards within Leicestershire. LPT reviews this work in considering the risk to this organisation. • LPT will support the LLR Prepared objective to deliver an annual review of the hazards in Leicester, Leicestershire and Rutland. • LPT Risk Management Strategy requires LPT to assess the risks to the Trust's objectives, including those risks with potential to affect service delivery. • LPT carries out an annual business continuity risk assessment of the implications on LPT of the hazards present within Leicestershire. • LPT standard business continuity plan requires sites and services to identify the key risks to service delivery.
Emergency planning	<ul style="list-style-type: none"> • Ensure emergency plans are in place in order to respond to emergencies. • Ensure validation and exercising of emergency plans. • Ensure appropriate senior level command and decision making is available 24/7. • Ensure appropriate Incident Coordination Centre (ICC) facilities are available to control and coordinate the response to an emergency. • Ensure relevant response staff are trained to an appropriate level for their roles. • Ensure robust communication mechanisms. 	<ul style="list-style-type: none"> • Development and maintenance of a Major Incident Plan, hazard specific incident response plans and business continuity plans to enable LPT to implement an effective response 24/7 to a major incident or significant disruption to business continuity. • Availability of an Incident Control Centre, 24/7. • Trained, LPT Directors responsible for managing the LPT response to a major incident or serious disruption to business continuity • Trained LPT Managers responsible for managing a site or service response to a serious disruption to business continuity • Agreed mutual aid to and from health providers and partner agencies in support of the response to an emergency or major incident.

EPRR Obligations under the Civil Contingencies Act 2004		How the Obligation is met by LPT
Warning & Informing	<ul style="list-style-type: none"> • Maintain arrangements to make available information available to the public on emergency preparedness matters. • Maintain arrangements to warn inform and advise the public in the event of an emergency. 	<ul style="list-style-type: none"> • LPT co-ordinates activities with LLR Prepared partners on sharing information with the public on preparing for emergencies and during the response to emergencies. • LPT releases appropriate information to the public on its EPRR work. • In the event of a disruption to service provision, LPT would use all available and appropriate routes to inform service users and the wider public of the nature of the disruption and LPT's efforts to maintain or recover services delivery.
Business continuity	<ul style="list-style-type: none"> • To maintain plans to ensure that we can continue to deliver functions in the event of an emergency so far as is reasonably practicable. • Assess both internal and external risks whilst developing and reviewing Business Continuity Plans. 	<ul style="list-style-type: none"> • Development and maintenance of a Business Continuity Management System following the principles of ISO 22301 and PAS 2015. • Sites and Services required to have a Business Continuity Plan, utilising the LPT standard template. • Agreed mutual aid to and from health providers and partner agencies in support of the response to a disruption to business continuity.

5.3 Response to Business Continuity / Major Incident

It is the nature of business continuity disruptions and major incidents or emergencies that they are unpredictable and each will present a unique set of challenges. Therefore a key outcome from the EPRR work is the adoption and maintenance of plans which would enable LPT to implement a planned, co-ordinated, tested, effective and flexible response.

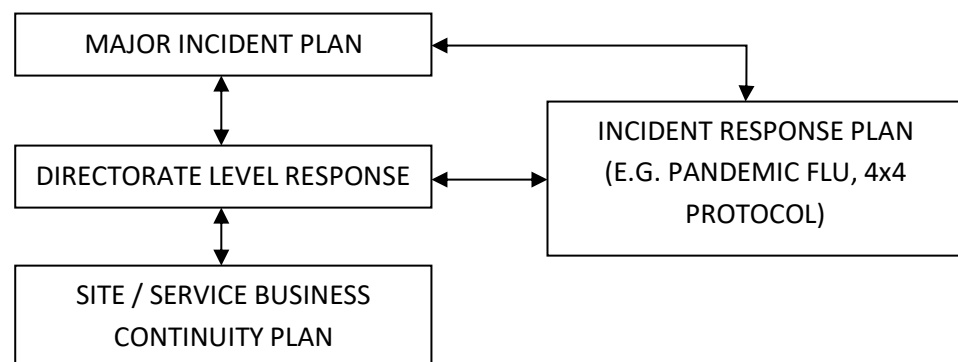
The intention is that any disruption to business continuity would be tackled by the local service area or site, responding to the cause or incident in line with their local business continuity plans. Where the disruption escalates or is very disruptive from its outset, the response may have to be escalated to senior managers including as appropriate the LPT's On-Call Managers and Director.

Where LPT is alerted to a major incident in the community or serious disruption to business continuity, it is the responsibility of the Director On-call call to assess the situation and determine whether or not to implement the Major Incident Plan and convene a Major Incident Team to co-ordinate the whole LPT response to the incident.

If deemed appropriate, the Major Incident Team would utilise an LPT ICC (or alternative), which provides the team with a 24/7 resourced centre of operation.

As appropriate, in responding to an incident, LPT may request the support of mutual aid from partner agencies, or may itself be asked to provide support to other agencies within Leicestershire, or potentially cross the border in the event of larger and wider scale incidents.

Figure 2: Schematic of LPT response to a disruption to Business Continuity or a Major Incident.



5.4 Business Continuity Management System

There is an expectation from our service users and their families; the general public; NHSEI; Clinical Commissioning Groups and partner agencies who we work with, that LPT can ensure that in the event of a disruption to service provision, LPT can implement a swift recovery of critical activities.

A BCMS following the principles of PAS 2015 and ISO 22301 enables LPT to maintain and continually improve its preparedness for disruptions to business continuity and meet the expectations of our stakeholders.

LPT will follow the principles of Integrated Emergency Management, operating a Business Continuity Management System that follows a life cycle of planning, operating, reviewing and improving business continuity planning.

5.4.1 Plan and Establish the Business Continuity Management System

The aim of this element of business continuity planning is to:-

- Ensure business continuity planning reflects LPT's Mission, Vision, Values and Strategic Objectives;
- Consider and understands LPT's EPRR statutory duties and obligations, commercial obligations and the views and needs of interested parties;
- Outline the commitment of senior management to the EPRR initiative, especially through the leadership provided by the Board level Accountable Emergency Officer;
- Provision of the necessary resources to facilitate the development of a BCMS; and

- Ensuring staff have the awareness and competence to develop and maintain business continuity plans and respond to any disruptions to business continuity.

Table 3: LPT's Business Continuity Management System Document Portfolio

Documents	Objective of the Documents
Emergency Preparedness, Resilience and Response (EPRR) Policy	<ul style="list-style-type: none"> • Sets the framework and strategic direction for LPT's BCMS and emergency preparedness.
LPT Major Incident Plan	<ul style="list-style-type: none"> • Outlines how LPT co-ordinates its response to a serious disruption to the trust's business continuity and to a major incident in the wider community.
LPT Business Continuity Risk Assessment	<ul style="list-style-type: none"> • Assesses the implications to LPT of the hazards present within Leicester, Leicestershire and Rutland.
Services Business Continuity Plan	<ul style="list-style-type: none"> • Acts as the Service overarching BCMS document. • Outlines all services and outlining those which are critical.
Service Area Business Continuity Plans	<ul style="list-style-type: none"> • Details how a critical service would be recovered or maintained in the event of a disruption.
Site Business Continuity Plans	<ul style="list-style-type: none"> • Outlines the risks to a building (e.g. hospital / health centre / office base) and how any disruption to Service Delivery would be mitigated.
Training Needs Analysis	<ul style="list-style-type: none"> • Determine the skills and knowledge required by staff in order to support the EPRR policy and fulfil LPT's EPRR obligations. • Determine the training necessary to meet the Training Needs.
Training Programme and Portfolio of Training	<ul style="list-style-type: none"> • Agreed annual programme of training. • Provision of bespoke training to On-Call Directors and other appropriate members of staff on their role in managing response to a major incident or disruption to business continuity.
Exercise Programme	<ul style="list-style-type: none"> • Test the effectiveness of plans in responding to disruptions to business continuity and to major incidents.
Incident, exercise and audit report	<ul style="list-style-type: none"> • Ensure the occurrence of and response to incidents of business continuity disruptions and major incident are reported and investigated. • Undertaking of an annual audit of business continuity plans to assess their effectiveness and compliance with the BCMS.
Annual Management Review	<ul style="list-style-type: none"> • Provide the LPT Finance & Performance Committee with an annual report of the effectiveness of the BCMS and the preparedness for emergencies.

5.4.2 Implementing and Operating the Business Continuity Management System

Undertaking a Business impact analysis (BIA) identifies service provision priorities, determines and documents the impact of a disruption to the activities that support patient care.

Within the LPT Standard Business Continuity Plan sites and services are required to meet this element of a BCMS by:-

- Identifying those services which are patient critical.
- Determining the time period for recovering the patient critical services.
- Consider the key risks to service provisions and ensuring suitable mitigation measures are in place.

The LPT standard business continuity plan incorporates Action Cards which outline the actions to respond to and mitigate the main risks to business continuity (loss of utilities, loss IT). Where necessary a site or service must amend the Action Cards or prepare specific ones to ensure measures are in place to respond to risks that are specific to them.

LPT therefore focuses its planning on critical activities, but also recognises that other less critical activities would need to be recovered to a pre-determined level of service within a pre-determined time period as defined in the business continuity plans.

The level of risk is understood to be specifically in respect of LPT's critical activities and the risk of a disruption to the delivery of patient care. Critical activities are underpinned by resources such as people, premises, technology, information, supplies and stakeholders. LPT services and sites in developing their business continuity plans must understand the risk to these resources, the vulnerabilities of each resource, and the impact that would arise if incident occurred and caused a business disruption. This includes understanding the interdependences between services, as the loss of an activity could have implications for another critical activity with LPT or partner agencies.

Sites and services are required to review their business continuity plans on an annual basis, or if there are significant changes in service delivery.

Using the LLR Prepared Community Risk Register the Emergency Planning Manager undertakes an annual review of the hazards present within Leicester, Leicestershire and Rutland to determine the implications for LPT. Where necessary, mitigation measures will be recommended to address any identified risks to service delivery.

Overall LPT's risk treatment for identified risks to business continuity is to:-

- Eliminate the risk by removal of the hazard(s);
- Tolerate the level of risk faced, usually due to the low likelihood of the hazard occurring or the presence of existing mitigation measures; or
- Implement appropriate measures to reduce the potential effects of those incidents, such as through adoption of Business Continuity Plans.

5.4.3 Monitor, Review the Business Continuity Management System

LPT needs to ensure that the BCMS capability and Major Incident Plan remains effective, fit for purpose and up-to-date.

It is the responsibility of the Emergency Planning Manager:-

- To annually audit and review the BCMS and Major Incident Plan in order to identify good practice, potential non-conformities and any necessary corrective actions;
- Identify any changes to LPT's services which may require additional business continuity plans or measures or risk to the BCMS;
- Review incident reports from Safeguarding that related to impacts on service provision identifying lessons learnt and any necessary mitigation measures; and
- Facilitate a number of exercises to test LPT's preparedness to respond to disruptions to business continuity and major incidents.

Regular testing and exercising of LPT's business continuity plans and Major Incident Plan provides assurance that the plans would prove effective if utilised.

Exercising is also essential to developing teamwork, competence, confidence and knowledge which are vital at the time of an incident.

In line with the requirements of NHS EPRR guidance, the Emergency Planning Manager will be responsible for ensuring that LPT as a minimum will undertake: -

- A communication exercise every 6 months (both in and out of hours);
- A table top exercise every 12 months; and a.
- Command Post exercise every three years.

In addition LPT will aim to participate in exercises and training organised by partner agencies and involve partner agencies in its own exercises to facilitate an effective multi-agency response to a disruption to business continuity and a major incident.

The Emergency Planning Manager will provide quarterly EPRR reports to the LPT Finance & Performance Committee and the Health and Safety Committee and outlining the current status of LPT's emergency preparedness and business continuity planning and forwarding recommendations for improvements to EPRR arrangements.

5.4.4 Continually Improve the Business Continuity Management System

An annual review will be undertaken of incident response and the BCMS though assessment of changing circumstances, the results of audits and the lessons learnt from incidents and exercises. The aim of the review is to enable LPT to assure itself of the effectiveness of the BCMS and emergency preparedness or where deemed necessary to identify the need for changes to this Policy, the setting of new or amendment of existing EPRR strategy and objectives and the need for amendments to plans.

The Emergency Planning Manager will provide the LPT Finance & Performance Committee with an annual report of the BCMS outlining any opportunities for improving the effectiveness of the BCMS.

6.0 Training and Awareness

There is a need for training identified within this policy. In accordance with the classification of training outlined in the Trust Learning and Development Strategy this training has been identified as mandatory training

The course directory will identify who the training applies to, delivery method, the update frequency, learning outcomes and a list of available dates to access the training.

A record of the event will be recorded on the Trusts electronic training system. The governance group responsible for monitoring the training is the LPT Health and Safety Committee.

To be successful, business continuity management has to become part of the way the organisation is managed. All staff must understand that business continuity is an important issue for the organisation and that they have a duty of care in maintaining the delivery of patient care. Staff at all levels are responsible for building, promoting and embedding a business continuity culture that reflects our organisational core values and vision to achieve our strategic objectives.

The Emergency Planning Manager working with the LPT Services will be responsible for ensure that staff awareness is increased and developed. This will be achieved through:-

- Discussion of business continuity plans and emergency preparedness in e-newsletters and team briefings;
- Inclusion of business continuity planning and emergency preparedness on LPT's e-source;
- Learning from internal and external incidents; and
- Exercising business continuity plans.

The organisation will ensure that all personnel who are assigned responsibilities under business continuity planning and incident response are competent to fulfil their role. To this end the Emergency Planning Manager will ensure that On Call Framework will receive regular emergency preparedness training to ensure they feel confident in managing the response to a disruption to business continuity and to a major incident.

The Emergency Planning Manager will be responsible for providing Executive level staff and all other staff as appropriate, briefings and updates on new and emerging risks or incidents that are occurring.

7.0 Links to Standards/Performance Indicators

Table 5: Standards which LPT must adhere to

TARGET/STANDARDS	KEY PERFORMANCE INDICATOR
Care Quality Commission Essential standards of quality and safety: 6d	<ul style="list-style-type: none"> • Business Continuity Plans • Major Incident Plan • Evacuation Plan
2013/14 NHS Standard Contract Service Conditions (SC30)	Have in place:- <ul style="list-style-type: none"> • Accountable Emergency Officer • Business Continuity Plans • Major Incident Plan • Incident Control Centre • Evacuation Plans • Suitably trained staff competent in emergency preparedness, resilience and response
EPRR core standards	<ul style="list-style-type: none"> • 54 elements across 10 domains applicable to LPT

8.0 References and Associated Documentation

This policy was drafted with reference to the following:

The Civil Contingencies Act 2004.

Department of Health, 2010: PAS 2015: 2010 Framework for Health Services Resilience

BSI, 2012: ISO 22301:2012 Business Continuity Management Systems – Requirements

BSI, 2012: ISO 22313:2012 Business Continuity Management Systems – Guidance
NHS England, 2013: NHS Commissioning Board Business Continuity Management Framework

NHS England, 2018: Emergency Preparedness, Resilience and Response Framework 2018

NHS England, Central Midlands: Command, Control and Coordination NHS England, 2017:

NHS England Core Standards for Emergency Preparedness, Resilience and Response (EPRR) Framework

NHS England, 2013: Everyone counts: Planning for Patients 2013/14 – 2018/19

NHS England, 2017/19, NHS Standard Contract Service Conditions (SC30)

9.0 Related Protocols

A number of protocols and plans relate to the management of disruptions to business continuity and the response to major incidents which should be followed as appropriate.

- Major Incident Plan
- Pandemic Flu Plan
- Site and Service Area Business Continuity Plans

- LHM IT Services Recovery Plan
- Lockdown Plans
- Evacuation and Shelter Plans
- Incident Reporting Policy
- Information Risk Policy
- Inspection Policy: Health and Safety Inspections
- Fire Risk Assessments
- Fire Evacuation Plans
- Security Policy
- Risk Management Strategy

Policy Monitoring Section

Duties outlined in this Policy will be evidenced through monitoring of the other minimum requirements.

Where monitoring identifies any shortfall in compliance the group responsible for the Policy (as identified on the policy cover) shall be responsible for developing and monitoring any action plans to ensure future compliance.

Reference	Minimum Requirements to be monitored	Evidence for self-assessment	Process for Monitoring	Responsible Individual / Group	Frequency of monitoring
3.0	To ensure that LPT can provide an effective, robust and co-ordinated response to a disruption to business continuity	Effective response to Business Continuity incidents	Review of incident reports and response to business continuity incidents.	Team / Service Managers & Emergency Planning Manager	Following business continuity incidents.
		Up to date Business Continuity Plan	Teams / Service Area annual review of their Business Continuity Plan	Plan Owner	Annual review
			Health & Safety Inspections	Local Health & Safety representative	In line with programme of Health & Safety checks
3.0	To ensure that LPT can provide an effective, robust and co-ordinated response to a major incident / emergency that is affecting the wider community or another NHS funded organisation.	Major Incident Plan	Review of response to a major incident	Emergency Planning Manager	Following a Major Incident
		Lessons from Exercises	Review of lessons and actions to address gaps	Emergency Planning Manager	In line with Exercise programme.

3.0	Compliance with EPRR core standards	Self-Assessment against core standards	Reports on compliance for Health & Safety Committee and for Finance & Performance Committee,	Emergency Planning Manager	Quarterly
3.0	LPT has a Business Continuity Management System that follows the principle of ISO22301	EPRR Policy and Business Continuity Plans	Annual audit of the Business Continuity Management System	Emergency Planning Manager	Annually

Policy Training Requirements

The purpose of this template is to provide assurance that any training implications have been considered

Training	Yes	No
Training topic:	Management of LPT response to Major Incidents and serious disruptions to business continuity.	
Type of training:	EPRR training (including management of major incidents) to Directors EPRR training (including management of business continuity incidents) to Services On-call managers	
Service(s) to which the training is applicable:	All Services	
Staff groups who require the training:	LPT On Call Framework – Directors and Managers	
Update requirement:	Periodic update if significant changes to major incident or business continuity response.	
Who is responsible for delivery of this training?	Emergency Planning Manager	
Have resources been identified?	Yes	
Has a training plan been agreed?	Yes for the LPT On Call Framework	
Where will completion of this training be recorded?	√ uLearn Managers may hold local records	
How is this training going to be monitored?	Quarterly report to Health and Safety Committee	

*A full Due Regard (Equality Analysis) makes sure that any negative impacts have been considered and ways to minimize the impact are specified.

Due Regard Screening Template

Section 1		
Name of activity/proposal	EPRR	
Date Screening commenced	23/02/21	
Directorate / Service carrying out the Assessment	Health and Safety Compliance	
Name and role of person undertaking this Due Regard (Equality Analysis)	Michael Ryan	
Give an overview of the aims, objectives and purpose of the proposal:		
AIMS:		
OBJECTIVES:		
PURPOSE:		
Section 2		
Protected Characteristic	Could the proposal have a positive impact Yes or No (give details)	Could the proposal have a negative impact Yes or No (give details)
Age	No	No
Disability	No	No
Gender reassignment	No	No
Marriage and Civil Partnership	No	No
Pregnancy and Maternity	No	No
Race	No	No
Religion and Belief	No	No
Sex	No	No
Sexual Orientation	No	No
Other equality groups?		
Section 3		
Does this activity propose major changes in terms of scale or significance for LPT? For example, is there a clear indication that, although the proposal is minor it is likely to have a major affect for people from an equality group/s? Please <u>tick</u> appropriate box below.		
Yes		No
High risk: Complete a full EIA starting click here to proceed to Part B		Low risk: Go to Section 4.
Section 4		
It this proposal is low risk please give evidence or justification for how you reached this decision:		

Sign off that this proposal is low risk and does not require a full Equality Analysis:

Head of Service Signed: Bernadette Keavney

Date: 23/03/2021

The NHS Constitution

NHS Core Principles – Checklist

Please tick below those principles that apply to this policy

The NHS will provide a universal service for all based on clinical need, not ability to pay.
The NHS will provide a comprehensive range of services

Shape its services around the needs and preferences of individual patients, their families and their carers	<input type="checkbox"/>
Respond to different needs of different sectors of the population	<input type="checkbox"/>
Work continuously to improve quality services and to minimise errors	<input checked="" type="checkbox"/>
Support and value its staff	<input checked="" type="checkbox"/>
Work together with others to ensure a seamless service for patients	<input checked="" type="checkbox"/>
Help keep people healthy and work to reduce health inequalities	<input type="checkbox"/>
Respect the confidentiality of individual patients and provide open access to information about services, treatment and performance	<input checked="" type="checkbox"/>

PRIVACY IMPACT ASSESSMENT SCREENING

<p>Privacy impact assessment (PIAs) are a tool which can help organisations identify the most effective way to comply with their data protection obligations and meet individual's expectations of privacy. The first step in the PIA process is identifying the need for an assessment.</p> <p>The following screening questions will help decide whether a PIA is necessary. Answering 'yes' to any of these questions is an indication that a PIA would be a useful exercise and requires senior management support, at this stage the Head of Data Privacy must be involved.</p>			
Name of Document:	Emergency Preparedness Resilience and Response (EPRR) Policy		
Completed by:	Michael Ryan		
Job title	Emergency Planning Manager	Date	02/02/21
			Yes / No
1. Will the process described in the document involve the collection of new information about individuals? This is information in excess of what is required to carry out the process described within the document.			No
2. Will the process described in the document compel individuals to provide information about themselves? This is information in excess of what is required to carry out the process described within the document.			No
3. Will information about individuals be disclosed to organisations or people who have not previously had routine access to the information as part of the process described in this document?			No
4. Are you using information about individuals for a purpose it is not currently used for, or in a way it is not currently used?			No
5. Does the process outlined in this document involve the use of new technology which might be perceived as being privacy intrusive? For example, the use of biometrics.			No
6. Will the process outlined in this document result in decisions being made or action taken against individuals in ways which can have a significant impact on them?			No
7. As part of the process outlined in this document, is the information about individuals of a kind particularly likely to raise privacy concerns or expectations? For examples, health records, criminal records or other information that people would consider to be particularly private.			No
8. Will the process require you to contact individuals in ways which they may find intrusive?			No
<p>If the answer to any of these questions is 'Yes' please contact the Head of Data Privacy Tel: 0116 2950997 Mobile: 07825 947786 Lpt-dataprivacy@leicspart.secure.nhs.uk In this case, ratification of a procedural document will not take place until approved by the Head of Data Privacy.</p>			
IG Manager approval name:			
Date of approval			

Acknowledgement: Princess Alexandra Hospital NHS Trust