



LPT Trust Board - Tuesday, 30th January 2024

NHSE Core Standards for Emergency Preparedness, Resilience and Response (EPRR), Annual Assurance Process - Final agreed position report 2023/24.

Purpose of the report

This report provides assurance that Leicestershire Partnership NHS Trust (LPT) is discharging its EPRR responsibilities to maintain a high level of compliance with the NHS EPRR Core Standards 2023/24. This is aligned to the LPT EPRR Policy and the Civil Contingencies Act (2004).

Analysis of the issue

1. Compliance with EPRR Core Standards 2023/24

1.1 Self-assessment against the NHS core standards for EPRR utilises a four-tier system to rate compliance.

Overall EPRR assurance rating	Criteria
Fully	The organisation is fully compliant against 100% of the relevant NHS EPRR Core Standards
Substantial	The organisation is fully compliant against 89-99% of the relevant NHS EPRR Core Standards
Partial	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

In 2023/24 LPT were required to report against 58 standards that are grouped across the 10 domains listed below. LPT's initial assessment, which was shared with Trust Board, is that we were fully compliant with the standards.

Ser	Domain	Number of Standards applicable to a Community and Mental Health Trust
01	Governance	06
02	Duty to Risk Assess	02
03	Duty To Maintain Plans	11
04	Command and Control	02
05	Training and Exercise	04
06	Response	05
07	Warn and inform	04
08	Cooperation	04
09	Business Continuity	10
10	CBRNE	10
	Total	58
11	Deep Dive - Training	10

- **1.2 NHSE Assessment** In 2023/24 NHSE has agreed that LPT are Substantially Compliant against the applicable Core Standards for EPRR with an agreed overall compliancy rate of 93%, broken down into 54 Standards fully compliant and 04 Standards partially compliant.
- Substantially Compliant The organisation is fully compliant against 89-99% of the relevant NHS EPRR Core Standards
- **1.3 Deep Dive** The core standards are supplemented with a Deep Dive section containing 10 Standards applicable to Training.

It was agreed by NHSE that LPT are 100% - Fully Compliant against the Deep Dive standards for 2023/34. The Deep Dive score has no bearing on the overall compliancy rating for the organisation but gives a strong indication how the trust is performing in that area.

1.4 Opportunity for improvement 2024/25 - The 04 standards that were graded as partially compliant are broken down into the domains listed below.

Ser	Domain	Number of Standards deemed as partially compliant in 2022/23
01	Duty To Maintain Plans	01
02	Business Continuity	02
03	CBRNE	01
	Total	04

- **1.5 Point to Note** This is a positive change in the trust compliancy rate moving from partially compliant (2022/23) to substantially compliant (2023/24). This demonstrates a 9% annual improvement in delivery of the trusts EPRR obligations in 2023/24.
- **1.6 Identified Areas of Good Practice –** The following areas were identified as good practice in the feedback report to the Local Health Resilience Partnership (LHRP)

Core Standard 7 – Good management of EPRR risks.

Core Standard 12 – High Consequence Infectious Disease (HCID) action card is good.

Core Standard 13 – New and Emerging Pandemic plan is good.

Core Standard 18 - Excellent demonstration of SBAR reporting against live incidents.

Core standard 22 - Good workplan for training and exercising.

Core Standard 53 - BCP critical suppliers list is good.

Core Standard 58 - CBRNe plan is good.

The LPT EPRR Communications Plan was shared with NHSE as part of the consultation process and through feedback was also cited as a good plan.

1.7 Next Steps – An action plan has been drafted to ensure that the 04 partially compliant standards are brought up to full compliance by the end of Q4 23/24. The action plan can be found at Appendix 1.

Proposal

It is proposed that the LPT Trust Board are to receive this report for information and for assurance that LPT have completed the NHS Core Standards for EPRR assurance process for 2023/24 and has been deemed as Substantially Compliant

Decision required.

The LPT Trust Board are asked to receive this report for information, assurance and agree with the trust position.

Governance table

For Board and Board Committees:	LPT Trust Board			
Paper sponsored by:	Mike Ryan			
Paper authored by:	Mike Ryan			
Date submitted:	18.01.24			
State which Board Committee or other forum	N/A			
within the Trust's governance structure, if any,				
have previously considered the report/this issue				
and the date of the relevant meeting(s):				
If considered elsewhere, state the level of	N/A			
assurance gained by the Board Committee or				
other forum i.e. assured/ partially assured / not				
assured:	There for the selection because			
State whether this is a 'one off' report or, if not, when an update report will be provided for the	These findings have been presented to the Health and			
purposes of corporate Agenda planning	Safety Committee as part of the EPRR Governance Structure, and will be presented to the LPT Trust Board			
purposes of corporate Agenda planning	in Jan 24.	crited to the Er i Trast Board		
STEP up to GREAT strategic alignment*:	High S tandards	Х		
	Transformation			
	Environments	X		
	Patient Involvement			
	Well G overned	X		
	Single Patient R ecord			
	Equality, Leadership, Culture	X		
	Access to Services			
	Trustwide Quality	X		
	Improvement			
Organisational Risk Register considerations:	List risk number and title of risk			
Is the decision required consistent with LPT's risk appetite:	Yes			
False and misleading information (FOMI) considerations:	Yes			
Positive confirmation that the content does not risk the safety of patients or the public	Yes			
Equality considerations:	Yes			

Appendix 1

Action Plan post EPRR Core Standards Assurance 2023/24

Domain	Standard	Standard Detail	RAG Status	Action Required	Action Owner	Timescale for completion
Duty to Maintain Plans	Collaborative Planning	Plans and arrangements have been developed in collaboration with relevant stakeholders including emergency services and health partners to enhance joint working arrangements and to ensure the whole patient pathway is considered.		Implement Consultation Log – Completed, action closed.	Emergency Planning Manager	Immediate
Business Continuity	Business Impact Analysis	The organisation annually assesses and documents the impact of disruption to its services through Business Impact Analysis(es).		LPT / ICB and NHSE to meet to review and discuss the final enhancements to the LPT BCMS	Emergency Planning Manager	Q4 23/24
Business Continuity	Assurance of commissioned suppliers / providers BCP	The organisation has in place a system to assess the business continuity plans of commissioned providers or suppliers; and are assured that these providers business continuity arrangements align and are interoperable with their own.		LPT / ICB and NHSE to meet to review and discuss the final enhancements to the LPT BCMS	Emergency Planning Manager	Q4 23/24
CBRN	Hazmat / CBRN Risk Assessments	Hazmat/CBRN risk assessments are in place which are appropriate to the organisation type.		Enhance Risk Stratification process in the LPT Contaminated Self Presenters Plan and CBRNE Risk Assessment. This should include people, process, estate / critical infrastructure. Completed, action closed.	Emergency Planning Manager	Q3 23/24