

# **WOLVERHAMPTON CCG**

# Wolverhampton CCG Governing Body Meeting (Public) 11<sup>th</sup> July 2017

# Agenda item 27

TITLE OF REPORT:	Proposal for CCG Joint Commissioning Committee EPRR Board		
AUTHOR(s) OF REPORT:	Mike Hastings, Director of Operations		
MANAGEMENT LEAD:	Mike Hastings, Director of Operations		
PURPOSE OF REPORT:	This paper outlines a recommendation for a future arrangement for Emergency Preparedness, Resilience and Response (EPRR) within the Black Country and West Birmingham area. It recommends a BC&WB EPRR board is established to consolidate plans and strengthen the resilience and governance of EPRR for the four CCG's. This will retain existing EPRR support within each CCG, bolstered by the joint funding of a 'Lead' post across the four organisations.		
ACTION REQUIRED:	<ul><li>☑ Decision</li><li>☐ Assurance</li></ul>		
PUBLIC OR PRIVATE:	This Report is intended for the public domain		
KEY POINTS:	<ul> <li>The current expectations for EPRR within the NHS are contained within both statute and guidance, namely The Civil Contingencies Act 2004 (CCA) and NHS England Emergency Planning Guidance</li> <li>CCGs are currently meeting their statutory responsibilities within the resources they have available</li> <li>A recent draft report (to be published July 2017) has further highlighted the need for strengthened governance for CCGs</li> <li>The recommendation of this paper is that a BC&amp;WB EPRR Board to be established with immediate effect</li> </ul>		
RECOMMENDATION:	This paper recommends working formally together across the BC&WB, with a Lead coordinator role established and funded by all four CCGs		
LINK TO BOARD ASSURANCE FRAMEWORK AIMS & OBJECTIVES:			

WCCG Governing Body Meeting 11th July 2017





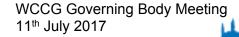
1.	Improving the quality and safety of the services we commission	Emergency Preparedness, Resilience and Response is a statutory duty and this proposal strengthens our resilience as a CCG
2.	System effectiveness delivered within our financial envelope	Working across the Black Country introduces an economy of scale allowing us to strengthen provision at minimal cost

## 1. Background

- 1.1. The current expectations for EPRR within the NHS are contained within both statute and guidance, namely The Civil Contingencies Act 2004 (CCA) and NHS England Emergency Planning Guidance. CCGs have three duties as a Category 2 Responder under the CCA:
  - 1. To share information with Category 1 Responders;
  - 2. To cooperate with Category 1 Responders (particularly in regards to the recovery from major incidents).
  - 3. To assure there commissioned providers are compliant to the EPRR core standards issued annually by NHS England.
  - 4. To manage the Recovery process. The recovery process will manage the short, medium and longer-term return to business as usual processes or restoration of service to the 'new normal' over a period of hours, days, weeks and months or longer.
- 1.2. Although CCG's are currently meeting their statutory responsibilities within the resources they have available, there is recognition that significant variations in capability and provision of service exist throughout the Black and West Birmingham. A recent draft report (to be published July 2017) commissioned by Wolverhampton Public Health department into Local Authority EPRR resilience, sustainability and quality across the Black Country has further highlighted the need for strengthened governance for CCG's to this important duty.

### 2. Proposed EPRR planning and governance structure

- 2.1. The recommendation of this paper is that a BC&WB EPRR Board to be established with immediate effect. The overall aim of this Board would be to provide a joint working framework for EPRR with a single coordinating BC Lead for EPRR. The objectives of the Board would include:
  - To support the Accountable Emergency Officer for each CCG
  - To undertake the preparation of consistent and robust emergency and business continuity plans for each CCG







- Standardisation of Concepts of Operations (ConOps), Core Standards, Outbreak Management, Business Continuity Management, Incident Response and Recovery etc (see Appendix 1 for Draft Birmingham and Black Country Incident Response and Recovery plan. This is an MIRP commissioned by NHSE to standardise processes across the whole region. As a BC EPRR group we would adopt the principles and processes across our CCGs).
- To implement an annual training and exercise programme.
- To advice on new legislation, regulations, procedures and guidance in so far as they affect emergency planning and implement the requirements across the Joint Committee.
- To represent all CCGs at multi-agency meetings and associated working groups as required, and feedback to AEO's the outcomes of meetings and the necessary actions arising
- To participate in any exercise, response or post event debriefing or enquiry relating to an incident within a local CCG area of responsibility
- To produce an EPRR risk register, annual work plans and quarterly performance reports and updates to the annual plan forwarded to the AEO
- The standardisation of processes across the four CCGs
- To work closely with NHSE supporting the Local Health Resilience Partnership (LHRP), four Health Protection Forums (HPF), the Local Resilience Forum (LRF) via attendance of the Black Country Lead
- Liaison with Blue Light Services, the Environment Agency and Public Health England

#### 3. Financial costs

- 3.1. Costs in meeting the objectives of the proposed structure are for the Black Country EPRR Lead to coordinate and represent the CCG's officers to deliver the proposed objectives. This cost is estimated to be circa £25k p.a. per organisation. This will cover salary and on costs. This money is already ring-fenced for Wolverhampton CCG.
- 3.2. It must be acknowledged however that there will also be a financial implication to this proposal if the CCG's agreed to implement the recommendation for joint planning and delivery of Business Continuity training and exercising.

## 4. Proposed Structure

4 x CCG Governing Bodies

BC&WB EPRR Board

WCCG Governing Body Meeting

11<sup>th</sup> July 2017

**BC&WB** local place based







#### 5. Conclusion

- 5.1. The current Threat Levels decided by MI5 are between Severe and Critical. There is a clear threat to the public and CCGs have statutory responsibilities for dealing with this threat. Although all CCG's are currently meeting their statutory requirements for EPRR, there is a distinct recognition more should be done to improve the current standards both within each organisation, as well as in the consistency and joined up approach across the Black Country and West Birmingham.
- 5.2. As dedicated EPRR teams, departments and budgets have become progressively smaller with fewer staff to carry out an ever-increasing workload, there is a significant concern that a prolonged major incident would be immensely challenging to respond due to the limited structures and resources available. This paper recommends that working formally together across the BC&WB, with a Lead coordinator role, would be of great benefit to all those involved and increase overall levels of resilience and sustainability.
- 5.3. Future proposals include the re-evaluation of multi-organisational arrangements across BC&WB working with Public Health, Providers and NHSE into a structured Framework model. A further paper will be submitted to Governing Bodies in the near future with more detail around this. Establishing a coordinated Black Country Commissioners EPRR arrangement puts us in a better position to support this future state.

Name: Mike Hastings

Job Title: Director of Operations

**Date:** 06.07.17

#### ATTACHED:

Appendix 1 - Draft Birmingham and Black Country Incident Response and Recovery plan. This is an MIRP commissioned by NHSE to standardise processes across the **whole region**. As a BC EPRR group we would adopt the principles and processes across **our CCGs** 

WCCG Governing Body Meeting 11<sup>th</sup> July 2017





# **REPORT SIGN-OFF CHECKLIST**

This section must be completed before the report is submitted to the Admin team. If any of these steps are not applicable please indicate, do not leave blank.

	Details/ Name	Date
Clinical View		
Public/ Patient View		
Finance Implications discussed with Finance Team		
Quality Implications discussed with Quality and		
Risk Team		
Equality Implications discussed with CSU Equality		
and Inclusion Service		
Information Governance implications discussed		
with IG Support Officer		
Legal/ Policy implications discussed with	Discussed with	5/7/17
Corporate Operations Manager	Chair	
Other Implications (Medicines management,		
estates, HR, IM&T etc.)		
Any relevant data requirements discussed with		
CSU Business Intelligence		
Signed off by Report Owner (Must be completed)	Mike Hastings	6/7/17

