

BOARD MEETING

| | | | |
|--|---|---|--|
| Title | BOB ICB NHS England Core Standards for Emergency Preparedness Resilience and Response Statement of Compliance | | |
| Paper Date: | 31 December 2024 | Board Meeting Date: | 14 January 2025 |
| Purpose: | Assurance | Agenda Item: | 14 |
| Author: | Paul Jefferies Associate Director of EPRR | Exec Lead/ Senior Responsible Officer: | Matthew Tait, Chief Delivery Officer / AEO |
| Executive Summary | | | |
| <p>This is the Emergency Preparedness Resilience and Response (EPRR) Core Assurance statement of compliance which provides assurance that the Integrated Care Board complies with relevant legislation and guidance (as summarised by NHS England’s core standards for EPRR) as a category one responder.</p> <p>NHS England » Emergency preparedness, resilience, and response: core standards</p> <p>This report details the 2024/25 EPRR Core Standards Assurance process for Buckinghamshire Oxfordshire and Berkshire West Integrated Care Board and confirms our EPRR compliance is Substantially Compliant with an associated action plan to be worked on into 2025/26.</p> <p>The outcome of this self-assessment shows that against the forty-seven applicable standards, the ICB is fully compliant with 46 (98%) core standards and partially compliant with 1 (2%) core standard.</p> <p>Key areas for note in the statement of compliance is: We have reviewed the ICB’s position, noting full compliance on all standards other than the following: -</p> <p style="margin-left: 40px;">a. Domain 4: -</p> <p style="margin-left: 80px;">i. 21 - Command & Control – Trained on call staff (A plan to mitigate is in place)</p> <p>The local EPRR team is also to be commended on the Mass Casualty framework that they have written and gained approval of this year against a backdrop of team changes and vacancies over the twelve-month period.</p> <p>The paper also provides updates on:</p> <ul style="list-style-type: none"> • The position of those providers under the supervision of the ICB for EPRR core assurance (Core Standards), all of which reporting substantially or fully compliant • Formal annual reporting of the ICB’s EPRR compliance position is now being passed to the Board via this paper for assurance and noting. | | | |
| Action Required | | | |
| <p>The Board is asked to:</p> <ul style="list-style-type: none"> • Note our compliance for EPRR 2024/25 is SUBSTANTIALLY COMPLIANT (compared to partially compliant in the previous cycle) • Note that the EPRR team has an agreed action plan in place for the one domain that is partially compliant. • Note an update of the action plan will be provided to the Board in June 2025. | | | |
| Conflicts of Interest: | No conflict identified | | |
| Date/Name of Committee/ Meeting, Where Last Reviewed: | Audit and Risk Committee 7 January 2025 | | |

Emergency Preparedness, Resilience and Response (EPRR) End of Year Board Assurance paper.

BOB ICB NHS England Core Standards for EPRR Statement of Compliance

Context:

1. Within the NHS Emergency Preparedness, Resilience, and Response (EPRR) is a critical framework within the ICB, ensuring that healthcare organisations can effectively plan for, respond to, and recover from emergencies. The EPRR assurance process evaluates how well organisations comply with national standards, enabling them to maintain services during disruptions and protect patient safety.
2. Each year, all NHS organisations complete a self-assessment against the Core Standards for EPRR, covering areas like risk assessment, incident response, business continuity, training, and partnership working. These standards ensure preparedness for events such as pandemics, severe weather, cyberattacks, or mass casualty incidents.
3. Key components include developing robust incident response plans, regular training exercises, and collaboration with local resilience forums (LRFs). The assurance process involves a formal review by regional NHS England teams, highlighting strengths and identifying areas for improvement. Organisations must achieve a rating of "substantial compliance" or higher to demonstrate readiness.
4. The process fosters accountability and continuous improvement, ensuring alignment with national priorities and legal requirements. By embedding resilience into healthcare operations, EPRR assurance supports the NHS in safeguarding patient care and public health during emergencies.
5. The key components of NHS EPRR Core Assurance: Core Standards, are a set of requirements that all NHS organisations must meet. They allow organisations to be rated based on their level of compliance with the EPRR core standards. The ratings include:
 - a. Fully Compliant:
 - i. The organisation meets all the required standards.
 - b. Substantially Compliant:
 - i. The organisation meets most of the standards, with minor areas for improvement.
 - c. Partially Compliant:
 - i. The organisation meets some of the standards but has significant areas for improvement.
 - d. Non-Compliant:
 - i. The organisation does not meet a significant number of the standards and requires urgent improvement.
6. This annual review is integral to promoting a proactive, coordinated approach to emergency management across the health system.

Core Standards for EPRR Assurance 2024/25 (BOB ICB)

7. In October 2024, all NHS organisations conducted a self-assessment of their state of readiness against the NHS England published EPRR core standards.
8. For BOB ICB, the self-assessment of 47 ICB core standards has been completed and it has identified that BOB ICB is fully compliant in forty-six of the standards (98% compliant).
9. The following one core standard was rated as only partially compliant:
 - a. **Domain 4: -**
 - i. **21 - Command & Control – Trained on call staff**
10. This domain and standard will form part of the improvement plan for the remainder of 24-25 and be part of the EPRR team workplan moving into 2025/26.

11. The improvement within BOB ICB must be accredited to the EPRR Team who have moved us as an ICB from Partially Compliant in 2023/24 to **SUBSTANTIALLY COMPLIANT** in this current reporting period.
12. As part of the core assurance process each year a deep dive is undertaken to allow NHS providers to identify how they can maintain high standards of care, ensuring patient safety, and building resilience against several types of disruptions. This year's deep dive focused on cyber security.

The ICB's team has assessed as follows:

| Deep Dive | Total standards applicable | Fully compliant | Partially compliant | Non-compliant |
|----------------|----------------------------|-----------------|---------------------|---------------|
| Cyber Security | 11 | 6 | 5 | 0 |
| Total | 11 | 6 | 5 | 0 |

The deep dive is a summative process and does not impact on the overall assurance rating for the ICB and provides areas for further development and concentration that we will build into the EPRR team workplan for 2025/26.

NHS Providers self-assessment (facilitated by the ICB)

13. This year the BOB ICB EPRR team completed a peer review process with all BOB NHS trusts, via two peer review sessions:
 - One with the three Acute Trusts peer review,
 - One with the Community and Mental Health Trust.
14. The providers presented their self-assessment submission and resulting action plans, along with key documents for greater scrutiny to include:
 - a. **Self-Assessment template**
 - b. **Annual Workplan - Core Standard 4)**
 - c. **Training and Exercising tracker** for Strategic and Tactical on call – last 12 months training and exercising completed - **Core Standard 24**
 - d. **Sample of TNAs** completed for each level of on-call - **Core Standard 22**
 - e. **Sample of CPD log** for each level of on-call - **Core Standard 24**
 - f. CPD logs for Trust EP leads - **Core Standard 5 and 24**
 - g. **Trust Incident Response Plan - Core Standard 10**
 - h. **Trust Evacuation and Shelter Plan - Core Standard 16**
15. In addition to those providers hosted by BOB ICB, the Associate Director (AD) for EPRR attended the Ambulance Trust's peer review undertaken by HIOW ICB as the lead commissioner for South Central Ambulance Service NHS Trust. Through this attendance the AD EPRR can assure the ICB's Accountable Emergency Officer and Board that the Ambulance Trust is **Substantially Compliant**.
16. The AD for EPRR also met with Berkshire Healthcare Trust who are hosted by Frimley ICB but operate within the BOB footprint and as such reviewed their self-assessment that was verified by Frimley and can report that they are also **substantially compliant** with a return of 52 fully compliant and 6 partially compliant of the 58. They also reported ten out of eleven as full compliance in the deep dive.
17. All provider trusts have signed a statement of compliance and will be providing a report to their respective Boards as part of this process.
18. The ICB and Provider Accountable Emergency Officers and Associate Director of EPRR met with the Regional Head of Emergency Preparedness, Resilience and Response for NHS England (Southeast) as part of the Local Health Resilience Partnership Executive meeting on 19 November 2024. At this meeting, all BOB-hosted NHS Trusts reported as at least substantially or fully compliant.

19. Individual trust compliance can be summarised as follows:

| Provider | Core Assurance rating | Number / Areas of Partial compliance | Deep Dive compliance. |
|---|-----------------------|--------------------------------------|-----------------------|
| Oxford University Hospitals Foundation Trust. | 61 / 62 | 1=Governance | 11 / 11 |
| Buckinghamshire Healthcare Trust. | 61 / 62 | 1=Business Continuity | 11 / 11 |
| Royal Berkshire Foundation Trust. | 61 / 62 | 1=Duty to maintain plans | 08 / 11 |
| Oxford Health Foundation Trust | 58 / 58 | 0 | 11 / 11 |

Summary

- 20. Whilst the ICB has self-assessed as Substantially Compliant against the NHS England Core Standards for EPRR this year, which reflects an improvement from Partially Compliant last year, significant and notable progress has been made across the EPRR programmes of activity.
- 21. Furthermore, appropriate actions are in place to progress the partially compliant standard towards full compliance in 2025, subject to any change in organisational, structures or significant incidents.
- 22. The EPRR full assurance process and position prior to being brought to the Board has been presented to the Audit and Risk Committee (ARC) therefore, the Board is asked to note and agree the rating of Substantially Compliant.

Annex : NHS England Core Standards for EPRR: Assurance rating thresholds

| | | Fully compliant | Substantially compliant | Partially compliant | Non-compliant |
|---|------------------------------------|---|-------------------------|---------------------|---------------|
| | | 100% | 99-89% | 88-77% | 76% or less |
| Organisation type | | Number of fully compliant core standards to achieve the percentage | | | |
| Acute providers | | 62 | 61-55 | 54-48 | 47 -0 |
| Specialist providers | | 59 | 58-52 | 51-45 | 44-0 |
| NHS ambulance service providers | Core Standards | 58 | 57-51 | 50-44 | 43-0 |
| | Interoperable Capability Standards | 136 | 135-121 | 120-104 | 103-0 |
| Community service providers | | 58 | 57-51 | 50-44 | 43-0 |
| Patient transport services | | 42 | 41-37 | 36-33 | 32-0 |
| NHS111 | | 43 | 42-38 | 37-32 | 31-0 |
| Mental health providers | | 58 | 57-51 | 50-44 | 43-0 |
| NHS England region | | 47 | 46-42 | 41-36 | 35-0 |
| NHS England national | | 45 | 44-40 | 39-34 | 33-0 |
| Integrated care boards* | | 47 | 46-42 | 41-36 | 35-0 |
| Commissioning support units | | 39 | 38-34 | 33-30 | 29-0 |
| Primary care services – GP, pharmacy | | 44 | 43-39 | 38-34 | 33-0 |
| Other NHS-funded organisations | | 48 | 47-43 | 42-37 | 36-0 |