

Core standard	Clarifying information	Acute healthcare Specialist providers	Ambulance services	Patient transport	111	Community services	NHS England Central	CCGs	NHS England Local	NHS England Primary care	NHS England Mental Health	Evidence of assurance	Self assessment RAG Red = Not compliant with core standard and not in the EPRR work plan within the next 12 months.	Action to be taken	Lead	Timescale
11	Arrangements include how to continue your organisation's prioritised activities (critical activities) in the event of an emergency or business continuity incident insofar as is practical.	Decide: - Which activities and functions are critical - What is an acceptable level of service in the event of different types of emergency for all your services - Identifying in your risk assessments in what way emergencies and business continuity incidents threaten the performance of your organisation's functions, especially critical activities	Y	Y	Y	Y	Y	Y	Y	Y	Y	Revised Business Continuity Policy was agreed May 2016, providing detail on how to develop and maintain plans across the trust.	Amber	Business Impact Analysis, Risk Assessments and Business Continuity Plans to be completed inline with Trust Business Continuity Policy.	Resilience Assurance Committee (RAC)	BIA's completed by October 2016. Risk Assessments to be completed by December 2016. Business Continuity Plans to be completed January 2017.
12	Arrangements explain how VIP and/or high profile patients will be managed.	This refers to both clinical (including HAZMAT incidents) management and media / communications management of VIPs and / or high profile management	Y	Y	Y	Y	Y	Y	Y	Y	Y	No evidence of policy to be used in the event of a VIP admission. However there is an awareness of a process to follow.	Amber	To develop a VIP Plan	Resilience Advisor	Dec-16
13	Preparedness is undertaken with the full engagement and co-operation of interested parties and key stakeholders (internal and external) who have a role in the plan and securing agreement to its content		Y	Y	Y	Y	Y	Y	Y	Y	Y	January 2016, SFH agreed a EPRR service level agreement with NUH to provide a level of stability whilst a new Resilience Advisor was appointed. The Resilience Advisor was appointed July 2016 and will develop a close working alliance with NUH Resilience Team, prior to and post take over expected Autumn 2016.	Green			
14	Arrangements include a debrief process so as to identify learning and inform future arrangements	Explain the de-briefing process (hot, local and multi-agency, cold) at the end of an incident.	Y	Y	Y	Y	Y	Y	Y	Y	Y	On review of the MIP, NUH Resilience Team provided good practice debriefing guidance for suggested inclusion in the Trust Serious Incident Policy.	Green			
Command and Control (C2)																
15	Arrangements demonstrate that there is a resilient single point of contact within the organisation, capable of receiving notification at all times of an emergency or business continuity incident; and with an ability to respond or escalate this notification to strategic and/or executive level, as necessary.	Organisation to have a 24/7 on call rota in place with access to strategic and/or executive level personnel	Y	Y	Y	Y	Y	Y	Y	Y	Y	There is a Gold and Silver on Call Rota, copies held with Switchboard. 24/7 Duty Nurse Manager available. 6 monthly MI Cascade Call Out Tests conducted.	Green			
16	Those on-call must meet identified competencies and key knowledge and skills for staff.	NHS England published competencies are based upon National Occupation Standards .	Y	Y	Y	Y	Y	Y	Y	Y	Y	Training is delivered at the level for which the individual is expected to operate (ie operational/ bronze, tactical/ silver and strategic/gold).	Green			
17	Documents identify where and how the emergency or business continuity incident will be managed from, ie the Incident Co-ordination Centre (ICC), how the ICC will operate (including information management) and the key roles required within it, including the role of the logist .	This should be proportionate to the size and scope of the organisation.	Y	Y	Y	Y	Y	Y	Y	Y	Y	Arrangements detail operating procedures to help manage the ICC (for example, set-up, contact lists etc.), contact details for all key stakeholders and flexible IT and staff arrangements so that they can operate more than one control/co-ordination centre and manage any events required.	Green			
18	Arrangements ensure that decisions are recorded and meetings are minuted during an emergency or business continuity incident.		Y	Y	Y	Y	Y	Y	Y	Y	Y	No evidence to demonstrate that there is a cadre of trained loggists available.	Amber	Identify, develop and training a cadre of loggist	Resilience Advisor	Dec-16
19	Arrangements detail the process for completing, authorising and submitting situation reports (SITREPs) and/or commonly recognised information pictures (CRIP) / common operating picture (COP) during the emergency or business continuity incident response.		Y	Y	Y	Y	Y	Y	Y	Y	Y	The Trust has extensive experience in producing authorising and submitting Sitrep reports for the NHS CB, Example copies held in ICC.	Green			
20	Arrangements to have access to 24-hour specialist adviser available for incidents involving firearms or chemical, biological, radiological, nuclear, explosive or hazardous materials, and support strategic/gold and tactical/silver command in managing these events.	Both acute and ambulance providers are expected to have in place arrangements for accessing specialist advice in the event of incidents chemical, biological, radiological, nuclear, explosive or hazardous materials	Y	Y								The Trust has a stand alone CBRN Plan revised 2016 to incorporate IOR which details all the available sources of specialist information plus contact numbers, the security team have close links with the Police including joint liaison meetings.	Green			
21	Arrangements to have access to 24-hour radiation protection supervisor available in line with local and national mutual aid arrangements;	Both acute and ambulance providers are expected to have arrangements in place for accessing specialist advice in the event of a radiation incident	Y	Y								The Trusts CBRN plan contains information on dealing with Patients contaminated with Radiation, the Hospitals on site staff have experience with working with radiation and would be able to give or seek further advice. Training of ED Staff on Radiation Detection is currently on going.	Green			
Duty to communicate with the public																

22	Core standard	Clarifying information	Acute healthcare	Specialist providers	Ambulance services	Patient transport	111	Community referrals	Specialist healthcare	NHS England	NHS England Central	CCGs	NHS Business Partners	Primary care	GP referrals	NHS standard	Evidence of assurance	Self assessment RAG Red = Not compliant with core standard and not in the EPRR work plan within the next 12 months.	Action to be taken	Lead	Timescale
	Arrangements demonstrate warning and informing processes for emergencies and business continuity incidents.	<p>Arrangements include a process to inform and advise the public by providing relevant timely information about the nature of the unfolding event and about:</p> <ul style="list-style-type: none"> - Any immediate actions to be taken by responders - Actions the public can take - How further information can be obtained - The end of an emergency and the return to normal arrangements <p>Communications arrangements protocols:</p> <ul style="list-style-type: none"> - have regard to managing the media (including both on and off site implications) - include the process of communication with internal staff - consider what should be published on intranet/internet sites - have regard for the warning and informing arrangements of other Category 1 and 2 responders and other organisations. 	Y	Y	Y			Y	Y	Y	Y	Y		Y	Y	MIP sec 4 & 5 and Comm's Officer Action Card, Also Communications Policy and media statements including updates on Social Media. Regular meetings with local 111 provider CNS to agree cooperation. The Trust Comms Team can liaise with other Acute Trust and Providers via the Nat's LHRP structure. The Trust has resilient communications systems, with internal telephones split into 2 separate nodes, The Trust has a Twitter Account and Face book page that would be used during a Major Incident.	Green				

Core standard	Clarifying information	Acute healthcare Specialist providers	Ambulance services	Patient transport	111	Community services	NHS England Central	CCGs	NHS England Local	CCGs (business priority) care units	NHS Trust	Evidence of assurance	Self assessment RAG Red = Not compliant with core standard and not in the EPRR work plan within the next 12 months.	Action to be taken	Lead	Timescale
23	Arrangements ensure the ability to communicate internally and externally during communication equipment failures	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	The Trust has resilient communications systems, with internal telephones split into 2 separate nodes. We also have a wireless Voice Communications System (Vocera) available to hundreds of staff members and also 9 hand held Major Incident telephones, plus key Trust mobile phones are MTPAS registered. The Trust has a Twitter Account and Face book page that would be used during a Major Incident.	Green			
Information Sharing – mandatory requirements																
24	Arrangements contain information sharing protocols to ensure appropriate communication with partners.	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	The Trust ensures that all its Information and response plans are aligned with published guidance and other responders plans and procedures and is available to share with partners, there is also a Communications Policy and media statements including updates on Social Media, these are often agreed collectively with partners.	Green			
Co-operation																
25	Organisations actively participate in or are represented at the Local Resilience Forum (or Borough Resilience Forum in London if appropriate)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	NHJ Resilience Team and Management structure represent SFH at LHRP, HEPOG, and other relevant LRF subgroups and regional events. Feedback from these groups is provided through the Resilience Assurance Committee. The Trust works closely with NHS England Area Team and other local providers to ensure plans are coordinated, an example being the close liaison with the local CCG on winter planning matters.	Green			
26	Demonstrate active engagement and co-operation with other category 1 and 2 responders in accordance with the CCA	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		Green			
27	Arrangements include how mutual aid agreements will be requested, co-ordinated and maintained.	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		Green			
28	Arrangements outline the procedure for responding to incidents which affect two or more Local Health Resilience Partnership (LHRP) areas or Local Resilience Forum (LRF) areas.	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		Green			
29	Arrangements outline the procedure for responding to incidents which affect two or more regions.	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		Green			
30	Arrangements demonstrate how organisations support NHS England locally in discharging its EPRR functions and duties	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		Green			
31	Plans define how links will be made between NHS England, the Department of Health and PHE. Including how information relating to national emergencies will be co-ordinated and shared	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		Green			
32	Arrangements are in place to ensure an Local Health Resilience Partnership (LHRP) (and/or Patch LHRP for the London region) meets at least once every 6 months	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		Green			
33	Arrangements are in place to ensure attendance at all Local Health Resilience Partnership meetings at a director level	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		Green			
Training And Exercising																
34	Arrangements include a training plan with a training needs analysis and ongoing training of staff required to deliver the response to emergencies and business continuity incidents	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Gold & Silver managers receive training and participate in exercises. Nurses & HCP receive MI training on Mandatory training - Major Incident Response Video available on Trust Intranet. Key response Staff have been trained in MI response including where to find the MIP and other relevant supporting documents on the intranet, all staff receiving Mandatory training are made aware of the location of MI documents. The Trust has a draft TNA for EPRR and staff will be trained based on this guidance. Staff are kept up to date via information bulletins when new or revised EPRR plans are published and placed on the Intranet. The Trust has an on call command structure with Silver & Gold on call who manage surge through the capacity and flow Team & meetings. The Trust has a Risk Assessment based on the National and Local LRF Risk assessment, plus local risks, these are detailed within the Trusts MIP. LHRP lessons learnt are monitored by the Resilience Assurance Committee. The Trust has approved a Gold/Silver training programme, which includes Major Incident Awareness and a tabletop exercise. The Trust undertakes a Major Incident Call out Cascade every Six months	Green	Awaiting confirmation of EMERGO 2017 arrangements.	Resilience Advisor	
35	Arrangements include an ongoing exercising programme that includes an exercising needs analysis and informs future work.	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		Green			
36	Demonstrate organisation wide (including oncall personnel) appropriate participation in multi-agency exercises	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		Green			
37	Preparedness ensures all incident commanders (oncall directors and managers) maintain a continuous personal development portfolio demonstrating training and/or incident /exercise participation.	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		Green			