	lous materials (HAZMAT) and chemical, biological, radiolgocial and nuclear (CBRN) re is is designed as a stand alone sheet)	esponse core standards	ite healthcare providers	list providers	lance service providers	unity services providers	al Health care providers		Self assessment RAG Red = Not compliant with core standard and not in the EPRR work plan within the next 12 months. Amber = Not compliant but evidence of	Action to be taken Lead	Timescale
			Acı	Specia	NHS Ambu	Comm	Ment		progress and in the EPRR work plan for the next 12 months. Green = fully compliant with core standard.		
Q	Core standard	Clarifying information						Evidence of assurance			
38	Preparedness There is an organisation specific HAZMAT/ CBRN plan (or dedicated annex)	Arrangements include: command and control interfaces tried and tested process for activating the staff and equipment (inc. Step 1-2-3 Plus) pre-determined decontamination locations and access to facilities management and decontamination processes for contaminated patients and fatalities in line with the latest guidance communications planning for public and other agencies interoperability with other relevant agencies access to national reserves / Pods plan to maintain a cordon / access control emergency / contingency arrangements for staff contamination plans for the management of hazardous waste stand-down procedures, including debriefing and the process of recovery and returning to (new) normal processes contact details of key personnel and relevant partner agencies	Y	Y	Y	Y	Y	Care of Patients Attending the Queen's Medical Centre Campus After an Incident Involving Contamination with Chemical or Radioactive Material Procedure (GG/CM/029) Version4. IOR information and procedure in the plan. Review process will commence in November 2018. UK Reserve National Stock for Major Incidents - How to Access Stock in England Information within the plan. -CBRN Site Specific Response Plan Nottingham, Nottingham City Centre. Parts 1 & 2; Appendix 9 QMC Map of Decontamination Area, Appendix 10 QMC Decontamination Zone Footprint. Planning for the Management of Self - Presenting Patients in Healthcare Settings	Green		
39	Staff are able to access the organisation HAZMAT/ CBRN management plans.	Decontamination trained staff can access the plan	Y	Y	Y	Y	Y	With the exception of the Site Specific Plan (SSP) all other plans are held on a Restricted Access website on the Trust Intranet.	Green		
40	HAZMAT/ CBRN decontamination risk assessments are in place which are appropriate to the organisation.	Documented systems of work List of required competencies Impact assessment of CBRN decontamination on other key facilities Arrangements for the management of hazardous waste	Y	Y	Y	Y	Y	Appropriate HAZMAT/ CBRN risk assessments are incorporated into EPRR risk assessments (see core standards 5-7)	Amber	Undertake HAZMAT/CBRN Risk Assessment and reflect the outcomes in Major Incident and CBRN	Sep-16
	Rotas are planned to ensure that there is adequate and appropriate decontamination capability available 24/7.		Υ		Υ			Resource provision / % staff trained and available Rota / rostering arrangements	Green		
42	Staff on-duty know who to contact to obtain specialist advice in relation to a HAZMAT/ CBRN incident and this specialist advice is available 24/7.	For example PHE, emergency services.	Y	Y	Y	Y	Y	Trust Policies and Procedures. Switchboard. Specialist advice contact numbers within the CBRNe Plan.	Green		
	Decontamination Equipment							2//7 Tactical Support Advisor Rota			
43	There is an accurate inventory of equipment required for decontaminating patients in place and the organisation holds appropriate equipment to ensure safe decontamination of patients and protection of staff.	Acute and Ambulance service providers - see Equipment checklist overleaf on separate tab Community, Mental Health and Specialist service providers - see Response Box in 'Preparation for Incidents Involving Hazardous Materials - Guidance for Primary and Community Care Facilities' (NHS London, 2011) (found at: http://www.londonccn.nhs.uk/ store/documents/hazardous-material-incident-guidance-for-primary-and-community-care.pdf) Initial Operating Response (IOR) DVD and other material: http://www.jesip.org.uk/what-will-jesip-do/training/	Y	Y	Y	Y	Y	CBRN Equipment and Consumable Inventory in place. IOR Response Box containing all necessary equipment held in the Major Incident Store. Training in the use of PPE and safe decontamination practice and procedures.	Green		
	The organisation has the expected number of PRPS suits (sealed and in date) available for immediate deployment should they be required (NHS England published guidance (May 2014) or subsequent later guidance when applicable) There are routine checks carried out on the decontamination equipment including: A) Suits B) Tents C) Pump D) RAM GENE (radiation monitor) E) Other decontamination equipment	There is a plan and finance in place to revalidate (extend) or replace suits that are reaching the end of shelf life until full capability of the current model is reached in 2017 There is a named role responsible for ensuring these checks take place	Y		Y			See CBRN Equipment and Consumable Inventory. All suits (24) are currently in date and further servicing planned for November 2016. Recently undertaken a piece of work for NHS England re: PRPS Suit Routine checks are carried out by two nominated members of the Emergency Department Team. With a dedicated check list.PRPS suits are serviced by respirex and radiation detectors calibrated by NUH and monthly tested by ED staff. Recently undertaken a piece of work for NHS England re: PRPS Suit Status and Life Expectancy.	Green Green		
46	There is a preventative programme of maintenance (PPM) in place for the maintenance, repair, calibration and replacement of out of date Decontamination equipment for: A) Suits B) Tents C) Pump D) RAM GENE (radiation monitor) E) Other equipment		Y		Υ			The Trust has maintained all its PRPS suits shelf life up to date and has agreed to continue to do so till 2017, the Ram Gene radiation monitor is calibrated annually at NUH. The uses PPS Services for equipment requirements.	Green		
47	There are effective disposal arrangements in place for PPE no longer required.	(NHS England published guidance (May 2014) or subsequent later guidance when applicable)	Υ		Υ			The Trust is aware of NHS England guidance and would dispose of equipment in compliance with the directive. Alternative would be to contact EMAS / PHE	Green		
48	Training The current HAZMAT/ CBRN Decontamination training lead is appropirately trained to deliver HAZMAT/ CBRN training		Y		Y			Currently one part time trainer who has not attended a recognised Training Course. Plans to put the new incubent Resilience Adviser on a suitable course. In the Interim the NUH Training Lead will support the Trust to ensure continuity.	Green	All Resilience Team members to be trainined on CBRN Decon Structure equipment across all sites.	Mar-17
49	Internal training is based upon current good practice and uses material that has been supplied as appropriate.	Documented training programme Primary Care HAZMAT/ CBRN guidance Lead identified for training Established system for refresher training so that staff that are HAZMAT/ CBRN decontamination trained receive refresher training within a reasonable time frame (annually). A range of staff roles are trained in decontamination techniques Include HAZMAT/ CBRN command and control training Include ongoing fit testing programme in place for FFP3 masks to provide a 24/7 capacity and capability when caring for patients with a suspected or confirmed infectious respiratory virus Including, where appropriate, Initial Operating Response (IOR) and other material: http://www.jesip.org.uk/what-will-jesip-do/training/	Y	Y	Y	Y	Y	Annual Training Programme. Training Records. Clinical and Non - Clinical Staff are trained. FFP3 Fit Testing undertaken by Emergency Department staff and Infection Prevention Control Staff. IOR Presentation and Training to Emergency Department Staff. See Core Standard 48	Green		

Hazardous materials (HAZMAT) and chemical, biological, radiolgocial and nuclear (CBRN) response core standards (NB this is designed as a stand alone sheet)		Acute healthcare providers	pecialist	NHS Ambulance service providers	Community services providers	Mental Health care providers		Self assessment RAG Red = Not compliant with core standard and not in the EPRR work plan within the next 12 months. Amber = Not compliant but evidence of progress and in the EPRR work plan for the next 12 months. Green = fully compliant with core standard.	Action to be taken	Lead	Timescale	
(Q Core standard	Clarifying information						Evidence of assurance				
	The organisation has sufficient number of trained decontamination trainers to fully support it's staff HAZMAT/ CBRN training programme.		Y		Y			See Core Standard 48.	Amber	All Resilience Team members will be trainined on CBRN Decon Structure equipment across all sites to enable deconstructure training to be delivered to identify key staff from contracted functions and other appropriate Trust areas.		Mar-17
5	Staff that are most likely to come into first contact with a patient requiring decontamination understand the requirement to isolate the patient to stop the spread of the contaminant.	Including, where appropriate, Initial Operating Response (IOR) and other material: http://www.jesip.org.uk/what-will-jesip-do/training/ Community, Mental Health and Specialist service providers - see Response Box in 'Preparatior for Incidents Involving Hazardous Materials - Guidance for Primary and Community Care Facilities' (NHS London, 2011) (found at: http://www.londonccn.nhs.uk/_store/documents/hazardous-material-incident-guidance-for-primary-and-community-care.pdf)	Y	Y	Y	Y	Y	Security & Porters have been training on the aspects of CBRN response relevant to their role in an incident in particular the STEPSs 123 procedure. The CBRN Plan also details the need for staff not to become contaminated themselves, including IOR new IOR DVD will assist in this process. This DVD has be placed on intranet for all staff to view.	Green			