



MEETING TITLE Trust Board in Public		MEETING DATE 24/05/2018	
TITLE of PAPER		PAPER REF	4.4
EPRR and Special Operations Bi-annual Report October 2017 to March 2018			
STRATEGIC OBJECTIVE(S)		Work with partners to provide system leadership and resilience Provide a safe and caring service which demonstrates an efficient use of resources	
PURPOSE OF THE PAPER		To update Trust Board and provide assurance on the Emergency Preparedness Resilience and Response (EPRR) agenda and work streams for the period October 2017 up to and including the end of March 2018.	
For Approval		<input type="checkbox"/>	For Assurance
For Decision		<input type="checkbox"/>	<input checked="" type="checkbox"/>
		Discussion/Information	<input checked="" type="checkbox"/>
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DISCUSSED AT / INFORMED BY – include date(s) as appropriate (free text – i.e. please provide an audit trail of the development(s)/proposal(s) subject of this paper): Trust Executive Group (14/05/18)			
PREVIOUSLY AGREED AT:		Committee/Group: Not Applicable	Date:
RECOMMENDATION(S)		The Trust Board are updated and assured of the Trust's compliance and progress of the EPRR agenda.	
RISK ASSESSMENT			
			Yes
			No
Corporate Risk Register and/or Board Assurance Framework amended <i>If 'Yes' – expand in Section 4. / attached paper</i>			<input type="checkbox"/>
Resource Implications (Financial, Workforce, other - specify) <i>If 'Yes' – expand in Section 2. / attached paper</i>			<input checked="" type="checkbox"/>
Legal implications/Regulatory requirements <i>If 'Yes' – expand in Section 2. / attached paper</i>			<input type="checkbox"/>
Diversity and Inclusion Implications <i>If 'Yes' – please attach to the back of this paper</i>			<input type="checkbox"/>
ASSURANCE/COMPLIANCE			
Care Quality Commission Choose a DOMAIN(s)		4: Responsive 5: Well led	
NHSI Single Oversight Framework Choose a THEME(s)		2. Quality of Care (safe, effective, caring, responsive) 6. Leadership & Improvement Capability (Well-Led)	

1. PURPOSE

1.1 To update Trust Board and provide assurance on the Emergency Preparedness Resilience and Response (EPRR) agenda and work streams for the period October 2017 up to and including the end of March 2018.

It includes:

- Emergency Preparedness, Response and Recovery (EPRR) including Business Continuity
- Special Operations including the Hazardous Area Response Team (HART) and the Yorkshire Air Ambulance (YAA)

2. BACKGROUND

2.1 The report provides Trust Board with assurance that the Trust continues to develop and a resilient service by:

- Maintaining its statutory duties as a Category 1 Responder under the Civil Contingencies Act (2004).
- Maintaining its NHS England obligations as per their EPRR Core Standards underpinned by the annual EPRR Assurance return.
- Providing a proactive approach to Emergency Preparedness, Resilience and Response (EPRR).
- Maintaining the ability to respond to major incidents.
- Maintain the ability to deliver the Trust's prioritised business continuity activities, i.e. "the YAS 7" (Call handling, Dispatch, Triage, Treatment, Transport, Command and Communications) during major incident or business disruption.
- Working with other Blue Light partners to meet the new statutory duty to collaborate under the Policing and Crime Act 2016.

2.2 Income Streams Supporting EPRR

There are a number of bespoke funding streams which support the EPRR and Special Operations budgets. They are linked to the on-going provision and maintenance of HART and specialist assets including specialist training and equipment.

- The HART team continues to be funded by the Clinical Commissioning Groups (CCGs) based on a national formula.
- Medical Emergency Response Incident Team (MERIT) is funded by CCGs inclusive of both the hospital and ambulance element of the scheme (including the Critical Care Team at YAA).
- Funding for special assets comes from the Department of Health (DH) via the National Ambulance Resilience Unit (NARU).
 - Annual funding for CBRN Equipment and training of Special Operations Team members.

- Annual funding for MTFA equipment and training (Inc. capital funding for replacement of the equipment end of life).
- Annual funding for National Mass Casualty Vehicles x 2 covering maintenance, storage and security.

The national ambulance service contract also defines the requirements to be commissioned over and above that detailed above.

The department continues to take the opportunity for income generation activities linked to business continuity and resilience training.

3. ACTIVITY AND PROGRESS

3.1. Department Structure and Governance

The Head of EPRR reports to the Head of Service Central Delivery who in turn reports to the Regional General Manager (RGM). The Head of Special Operations reports to the Operational Divisional Commander West CBU who directly reports to the Deputy Director of Operations (DDoOps).

The Head of EPRR reports to the Accountable Emergency Officer (AEO) through the Head of Central Delivery and Regional General Manager. During this reporting period the AEO was the Executive Medical Director whilst the Executive Director of Operations, who is substantively the AEO, was away from the Trust.

The Resilience Governance Group meets monthly and has revised its terms of reference (April 2018) to encompass NHS 111 and PTS.

3.2 EPRR Operational Review

The EPRR Team annually reviews its guidance and plans to ensure they are current in terms of governance and relevance. The Team also revisits all areas of its business again to ensure clarity and a common understanding between them.

This assurance process has been embedded over the last three years into the department's governance structure and maintenance of its plans and guidance. Given that the department has maintained ISO 22301 status for a fourth year it demonstrates this approach is effective.

3.3 Multi-Agency Working

The department continues to work closely with its partner organisations both in daily business as part of the Local Resilience Forums, Local Health Resilience Partnerships, and JESIP (detailed in the following section). The EPRR Team engages with partners in relation to Safety Advisory Groups covering regular and ad-hoc sporting and entertainment events across the Yorkshire and Humber region.

YAS remains engaged with the collaboration agenda across the region and the subject remains part of the normal business for EPRR and Operations going forward.

3.4 JESIP (Working Together, Saving Lives)

The Trust continues to work with partner organisations to ensure that Joint Emergency Services Interoperability Principals (JESIP) are maintained and continue to be embedded across the region. There are now three regional groups meeting on a regular basis with a governance structure in place. These groups are JESIP Yorkshire Strategic Leads Groups, JESIP Yorkshire Delivery Leads Groups and JESIP Yorkshire Control Room Delivery Leads group.

Regional JESIP Command and Control Room training has been reviewed and multi-agency JESIP Command training commenced in December 2017 whilst JESIP Control Room training commenced in March 2018. Both training programmes are delivered to a Yorkshire & Humber wide audience including blue-light emergency services and a number of Category 2 responders, ensuring effective interoperability and cross-border engagement.

In November 2017, Joint Organisational Learning (JOL) and Lessons Direct merged to become JOL Online, hosted on Resilience Direct. Plans are in place to expand the number of YAS user accounts to allow all trust Commanders access to the Resilience Direct platform by May 2018.

3.5 Local Resilience Forums (LRF)

YAS continues to be represented at Strategic level at all four Yorkshire wide LRFs that meet on a quarterly basis. The Resilience Department also attends and supports many of the subgroups and associated work streams. The 2017 A&E Operations management restructure is now fully embedded which ensures that the correct strategic representation at senior level is accomplished. The YAS Commander Framework (currently under review) includes a requirement for YAS Divisional Commanders to engage with their respective LRFs at strategic level with the AEO attending at least 1 of each of the 4 LRFs meetings in Yorkshire & Humber per year.

YAS participates and supports the various Gold Symposiums and LRF sponsored exercises to demonstrate assurance in the delivery of civil duties named in the CCA 2004. As an example: Attendance at the South Yorkshire Gold Symposium 16 May 2018 will be attended by:
Head of EPRR- Head of Ops South CBU- General Manager Ops South CBU- Resilience Manager South CBU

3.6 Local Health Resilience Partnerships (LHRP)

YAS continues to be represented at Senior Management Level at the quarterly meetings of the regions three LHRPs. As with the LRFs, NHS England for Yorkshire and the Humber have the aim to ensure that local health authored multi-agency plans such as pandemic disease and mass casualty framework are produced for a regional approach. Given the size and magnitude of such events these would reasonably cross current LRF / LHRP boundaries. YAS as

a regional organisation continues to support the review of such plans and works with NHS England in local developments.

As with the LRFs the 2017 A&E Operations restructure can now ensure that the correct managerial level of strategic representation is in place going forward. As with the changes for LRF engagement, the revised YAS Commander Framework will include a requirement for YAS Divisional Commanders to engage with their respective LHRP and LRFs at strategic level with the AEO attending at least 1 of each of the 4 LRFs meetings in Yorkshire per year.

3.7 National Groups

The Trust is represented at various national work groups and supports its fellow Trusts where possible. Following A&E Operation's restructure, strategic level management is now more robust and is better able to support this engagement going forward.

3.8 Control of Major Accidents and Hazards (COMAH)

Now fully embedded, the revised COMAH (Control of Major Accidents and Hazards) regulations 2015 are business as usual. As a designated authority YAS is required to plan, exercise and debrief the offsite plans for COMAH sites with the local authority.

The developed costing methodology to recoup some of the costs incurred in relation to this planning and exercising is also embedded into business as usual and provides additional income/cost recovery.

3.9 Winter Planning

The Head of EPRR at YAS is Strategic lead for winter planning arrangements. This involves collaborative working with Partner organisations including LHRPs NHS England and other Health partners. During Feb/ March 2018 the Yorkshire & Humber region experienced severe weather patterns with record levels of snow and ice and temperatures of minus -8C.

Days in which the Yorkshire region was experiencing high patient demand coupled with extremely poor road conditions that temporarily isolated remote areas brought significant health system pressures to our region. The joint working / partnership approach enabled better management of these system pressures - feeding back into daily conference calls issues arising from partners and developing mitigation /coping strategies to help alleviate patient demand. Feedback and learning review process from all LHRP partners is currently being undertaken with findings expected June 2018.

3.10 Business Continuity

YAS continues to maintain its robust Business Continuity Management System. This year will see the end of the 5 year plan to ensure all operational and critical support services are certified to ISO22301. A&E Operations will be audited in June 2018. Planning and preparation is under way and to schedule (see Appendix C for full action plan and progress).

The YAS BC manager is a member of the Association of Ambulance Chief Executives' (AACE) national working group; BC Managers from all UK Ambulance Trusts meet 4 times per year. The Assistant BC Manager is a member of the South Yorkshire BC Leads Group.

3.11 BC Awareness campaign

As part of the preparation for the forthcoming ISO22301 certification audit for A&E Operations, a Business Continuity awareness campaign has been drafted by the YAS Campaign Manager. This will launch on 14 May 2018 to coincide with the national Business Continuity Awareness Week promoted by the Business Continuity Institute (the BCI), and will include articles in Staff Update and Team brief, interviews with senior managers, YAS screensavers, Pulse and YAS TV presentations, posters, and payslip messages.

4.0 EVENTS

A comprehensive record of all events is located on the YAS ResWeb[®] Event Calendar (a summary of these can be seen at Appendix B). These include a wide array of types and sizes of events including sports and culture to village fetes and music events. Attendance can range from very small numbers to thousands.

Where required, dependant on size and assessment of risk, YAS will engage with organisations and relevant authorities to ensure that we offer appropriate advice and guidance on medical cover that promotes a safe event and doesn't overburden the local health economy provision.

EPRR admin is a single point of contact for Events (email and telephone) where partners and the public can access information, support and register their events. This has now been operating for over 12 months and it has been seen as successful given the absence of complaints from event promoters and providers.

4.1 Safety Advisory Groups

Where organised events warrant the need for a Safety Advisory Group (SAG), these are established by Local Authorities to assist in exercising their functions under the Safety of Sports Ground Legislation. With the increase in number, variety and complexity of public events, many local authorities now convene advisory groups for other types of activities that fall outside the legal framework for certified sports grounds.

The YAS Resilience Team continues to be engaged in all levels of SAGs, including the preparation and monitoring of the events through performance Inspections and annual Inspections. Our role on the SAG is to provide advice on medical provision and impact on the local health community where the events with associated risks are taking place.

Attendance at all SAG meetings is a significant workload for the Resilience Team; see below the table for breakdown by area.

SAG MEETINGS ATTENDED OCTOBER 2017 – MARCH 2018			
NORTH CBU	SOUTH CBU	EAST CBU	WEST CBU
8	25	8	23

The EPRR team continue to review their approach to supporting SAGs in all forms. We have now introduced a more structured approach that highlights to the SAG Chairs and Local Authorities where we feel the medical cover and / or planning falls below minimum guidance. The team continue to undertake deep dive reviews of the planning and inspection guidance for events across the spectrum.

4.2 Demonstrations/Protests

There has been a marked decrease in organised protests and demonstrations within our region. The most recent demonstration was instigated by the English Defence League (Keighley September 2017). Due to the extensive experience and robust levels of policing at such events, the risk to YAS remains low.

YAS has seen the first demonstrations in relation to process of natural gas extraction by Hydraulic Fracturing (aka Fracking) within the region with highly publicised demonstrations in the Kirby Misperton area of North Yorkshire. Again YAS is working with its partners to ensure these events have robust plans in place to support the public, protestors and responders. It is likely that other areas of the region may have similar demonstrations as and when the preparations and process of Hydraulic Fracturing commences, YAS remains vigilant and engaged with partners across the region.

4.3 Tour De Yorkshire 3-6 May 2018

Once again YAS has worked successfully with its multi-agency partners in the planning of the 2018 Tour de Yorkshire. This event is becoming very popular and growing in public attendance each year. With over two million spectators and record breaking temperatures (for Yorkshire) the event had a full YAS command structure across the 4 day event taking 60 spectators and 4 riders to hospital. We are already in early stage discussions and planning for the World Cycling event to take place in Yorkshire during 2019 and also a strong possibility for a return of the Tour de France Grand Depart in the foreseeable future.

Each year YAS with its partners ensures that it has the opportunity to learn from the previous events and adds this to its planning assumptions going forward. Planning for this event commenced onwards from March 2018 and gradually built over the coming months. Note: As these events build each year this places a significant strain on available EPRR resources as the team continues to strive to make the planning and preparation process as efficient as possible. Future events of a similar scale will need to be scoped out in terms of

resource required and associated costs. Planning for the World Cycling in 2019 is underway to fully cost the exercise and produce financial report to TEG.

4.4 Exercise and Testing

YAS EPRR team and Special Operations Managers continue to be actively involved in all exercises either as part of the planning groups, umpires and / or players supporting commanders in their role as National Inter-Agency Liaison Officers (NILOs). These range from table-top format up to full live exercises. Please see appendix B for the main exercises held in this period. Exercises conducted this year can be seen on the YAS ResWeb© Exercise Calendar

4.5 EPRR Focused Training and Education

The EPRR and Special Operations Teams continue to contribute to the development of the EPRR Training Programme. As a result of the internal restructure within the EPRR team to meet demands with available resources the role of the Resilience Learning and Education Co-ordinator, which has overseen the delivery of the training programme, has been undertaken whilst also fulfilling one of the Assistant Resilience Manager development posts. A summary of all training carried out in relation to EPRR and Special Operations can be found on the YAS ResWeb© Training Calendar. Specific training events include:

- YAS Operational Commander Course (5 days)
- Resilience Awareness Course (1 day)
- Joint Decision Model Course (5 day)
- SORT Course (5 day)
- SORT Refresher Course (2 days)
- AIT Refresher Course (1 day)
- 1 day Business Continuity and ISO22301 awareness

General incident and resilience education for frontline staff is scheduled into the Annual Training Programme. Initial training dates have been rolled out for A&E operations frontline staff which signals a significant step forward. (See appendix B) for the training held in this period.

4.6 Business Continuity Training

The BC Team has continued to deliver training both internally and externally.

- BCMS and ISO22301 training has been ongoing throughout this period. All departments identified for verification to ISO22301 have been through the training programme.
- The BC Manager continues to support Commander training both internally and externally.

- BC Training - 138 Clinical Supervisors' have been BC trained in 2017/18, with the final 44 to be trained by May 2018.
- Reviews of Ambulance station BC plans are ongoing with all plans expected to be updated and published by the end of April 2018.
- In March 2018 the BSI conducted a three day re-certification audit of the BC plans for EOC, HART and Air Ambulance set against the International Standard for Business Continuity, ISO22301.
- This audit also involved a review of actions taken to address the outstanding non-conformities from previous audits (9 of which were closed, leaving 3 remaining – two were already planned and actioned, with the third relating to Procurement review of BC suppliers – meetings have taken place regarding this and an action plan is in place).
- West Yorkshire Fire Service requested that YAS Deliver Debrief training to their staff and Managers, the delivery of this training is ongoing. This work will be part of a collaborative working project as opposed to income generation.
- The recommendation of the auditor following the audit was continued certification for YAS to ISO22301, albeit with a few additional minor non-conformities. These will be actioned prior to the auditor's next visit to YAS in June 2018 to certify A&E Operations to the ISO22301 standard.

4.7 YAS Commander Framework

A comprehensive review of the YAS Commander Framework is underway in line with the National Occupational Standards for Ambulance Commanders incorporated into the revised (draft) National Command and Control Guidance.

The Head of EPRR has highlighted significant challenges to the delivery of the anticipated commander education programme requirements and CPD/skill set maintenance following A&E Operation's management restructure.

Work is now underway with YAS Academy and EPRR to review the national occupational standards of command training, the expertise required to deliver this training and the resources necessary to achieve full compliance. The initial meeting (April 2018) scoped out the challenges that this training will encompass and work needed to enable its delivery in a suitable time scale.

Proposals and action plans will be discussed at (May 2018) Resilience Governance Group, reported to TMG in due course.

4.8 Debriefs and Lessons Identified (DATIX)

The Trust facilitates debriefs for various incidents and exercises.

The BC team have recently facilitated structured debriefs for the Adverse Weather periods experienced in the Yorkshire & Humber region 2018.

5.0 BUSINESS CONTINUITY MANAGEMENT

5.1 Document Reviews

BC Policy and Debrief Policy have been updated. (Sept 2017)

5.2 Business Continuity Plans Reviewed

The YAS Business Continuity Management system remains on track, meetings have taken place with all BC leads. See Appendix C for BCMS dashboard.

5.3 BC Exercises April 2017 – March 2018

The Trust has a policy to exercise all level 1 BC plans on an annual basis. 95% (20/21) of plans have been tested.

5.4 Events and Incidents

The BC Team continue to encourage all depts. to log a BC incident on DATIX, these are checked every month by the BC team and all those specifically relating to Business Continuity are included in the below table. In terms of “themes” ICT incidents headline, however these are not considered- major - “significant” events.

Incident Number	Incident Date	Incident Location	Incident Type
INC-42432	06/10/2017	HART Unit - Leeds	Estate Related (security/G4S)
INC-42632	12/10/2017	Rotherham Call Flex	ICT Systems (Pilot)
INC-43076	17/10/2017	Springhill 1 -2 -Trust HQ - Wakefield	Telephony
INC-43230	29/10/2017	Rotherham Call Flex	ICT Systems (General)
INC-43296	29/10/2017	Air Support Unit (Nostell Priory)	ICT Systems (General)
INC-43537	08/11/2017	Rotherham Call Flex	Telephony
INC-43997	21/11/2017	Scarborough Ambulance Station	Fleet – Vehicle (Tail lifts)
INC-44168	26/11/2017	Rotherham Call Flex	ICT Systems (DOS)
INC-44888	15/12/2017	Wakefield Ambulance Station	Estate Related (Station access)
INC-46961	05/02/2018	Springhill 1 -2 -Trust HQ - Wakefield	ICT Systems (Datix)
INC-47681	06/03/2018	EOC	ICT Systems (Radio screens)
INC-48082	19/03/2018	Springhill 1 -2 -Trust HQ - Wakefield	ICT Systems (Adastra)

6.0 SPECIAL OPERATIONS

Special Operations consists of the Hazardous Area Response Team (HART), the Yorkshire Air Ambulance (YAA), Chemical, Biological, Radiological, Nuclear and Explosive (CBRNE), which includes the Special Operations Response Team (SORT) and the nationally provided Nerve Agent Antidotes Kits (NAAK), Marauding Terrorist Firearms Attack (MTFA), and the Ambulance Intervention Team (AIT). In addition, the logistical support of equipment and vehicles that underpins the response to a major incident, including the national Mass Casualty Vehicles (MCV).

As part of the recent A&E operations management restructure the responsibility for Special Operations falls within the portfolio of the Divisional Commander for West Yorkshire.

6.1 NARU

The National Ambulance Resilience Unit (NARU) is contracted by NHS England to oversee the HART, CBRNE, MTFA and MCV capabilities across English ambulance services. The CBRNE, MTFA and MCV are all funded through NHS England, via NARU. In 2015 NARU revised the service specification for HART and are in the process of writing similar specifications for CBRNE, MTFA and MCV. It was expected that these would be in place in readiness for the financial year 17-18; however a recent update from NARU is that they are still in draft awaiting NHS England and in the case of MTFA, Ministerial sign-off.

6.2 HART

HART are required to maintain a capability to deliver patient care in hazardous environments. This includes working in irrespirable atmospheres, working at height, working underground, working in collapsed structures, working in water and working in ballistic unsafe environments.

In 2016, a revised Service Specification was released by NARU, which reduced the previous 34 standards to 21. However, the required capabilities and service level provision remain unchanged.

In January 2018 HART received three new Secondary response vehicles and a staff welfare vehicle. HART also took delivery of new Incident Ground Technology, which is expected to replace the Forward Command vehicle. The equipment includes satellite communications, deployable cameras capable of transmitting real time imagery remotely, body worn cameras, personal physiological monitoring and a Team Leader tablet to receive all the above data. Although the equipment was delivered in early November 2017, it was found to be not operationally usable, the equipment has been returned to the supplier for modifications which are expected to have been completed and returned to YAS in May 2018.

Training and exercising continues on a weekly basis, with multi-agency exercises being a regular feature of their training. All HART operatives are

required to rigidly maintain their CPD portfolios containing all the HART competencies that they are required to evidence year on year. This includes the YAS clinical competencies which are also assessed annually.

6.3 CQC

The EPRR Team continues to work on its action arising from the last CQC full inspection. While Resilience was rated as outstanding there were actions for the wider Trust that is tasked to EPRR. The latest version (EPRR element) of the YAS CQC Quality Improvement Action Plan is as follows:

- Full review of rank and role identify markings to be rolled out by January 2018. Identity markings for on scene Commanders by role - (Tabards) have now been issued to :
- *Incident Commander / Bronze (functional roles with inserts) - personal issue to CS's, LM's, Sector Commanders, GSM's Div Commanders, NILO's*
- *Tac Advisor – Tac Advisors/NILO's*
- *MIC / Forward Doctor – to all MIC's*
- *HART – HART CS's*
- *Entry Control / Decon Officer – vehicle based on Decon trucks and HART*
- *Command Support / Safety – Bronze CS cars*
- *Loggist – to all CSA's*
- *Media – to press office team*
- *Resilience Support Team – to RST*
- Planned introduction of Gold Support tier to command structure to provide additional strategic resilience now fully functioning. (Completed)
- Recent mini-review of YAS Major Incident Plans in line with current governance arrangements. (Full review planned 2018 in light of Kerlake report / NARU report – 2018)
- Review and refresh of YAS command education has commenced (April 2018) with YAS Academy – Newly appointed Command, Resilience, Control Room and Call Centre Education & CPD Lead. The review will be in line with the revised National Occupational standards for Commanders (2018)
- Extended commercial services by providing and delivering strategic education to other health organisations. This will be part of the command education review.

6.4 YAA

Yorkshire Air Ambulance provides helicopter emergency medical services (HEMS) across Yorkshire from its two operating bases at Nostell & Topcliffe. The Nostell base is home to the dedicated Air desk responsible for the

dispatching of aircraft across the region as well as the YAS Critical Care Team (CCT) comprising an experienced consultant grade doctor and specialist HEMS paramedic. The CCT can bring advanced clinical skills, and additional drugs to the pre hospital environment while providing assistance and support to YAS staff on clinical decision making at incidents.

The H145 helicopters that were introduced in 2017 have brought a number of significant improvements to the service. The improved reliability and endurance of these aircraft has led to a greater operational availability while the upgraded medical equipment and bespoke medical interior allow our clinicians to optimise patient care during their transfer to hospital.

The introduction of night HEMS operations has taken place with all YAS HEMS paramedics undertaking additional training in the use of the aircraft search light, night vision goggles and the additional responsibilities of assisting the duty pilot with the planning and safe completion of night time operations. The four adult major trauma centres across our region can all facilitate night landings and over the winter period nearly 25% of missions were carried out under night conditions.

Blood is carried on-board our Nostell aircraft and has been administered by our team on numerous occasions. A number of advanced surgical procedures have also been carried out and these incidents are all reported upon and debriefed as part of our ongoing clinical governance.

Following a period of training and subsequent discussion it has been agreed by YAS & YAA that the proposed introduction of winching operations will not be carried forward and as such the hoists have now been removed from both aircraft.

6.5 CBRN and SORT

NHS England require that we have 150 staff (was 250 originally), the reduction to 150 has now been agreed with NHS England). The current numbers trained seen in the **Table A** below. Initial training is for five days, with an annual two-day refresh. Note: All SORT staff are volunteers.

Table A

Number of staff contractual	Trained and able to respond	Waiting to be trained	Comments
150 SORT	127	37	3 x courses planned April-May-June 164 - by end June 2018

#

6.6 MTFA

YAS is contractually required to have minimum (63) AIT staff as a response capability to meet a Marauding Terrorist Firearms Attack (MTFA) type incident. This includes the HART duty team (6 staff) and (10 staff) Ambulance Intervention Team (AIT) on duty at all times during a 24-hour period. The current total number of AIT trained staff as seen in **Table B**

Table B Number of staff required (contractual)	Trained and able to respond	Waiting to be trained	Comments
63 AIT	75 AIT	8 AIT	An AIT volunteer expression of interest has been advertised (April 2018) to increase the numbers to 105

It should be noted the provision of the ten AIT staff each 24-hour period remains challenging, and does not always meet the contractual requirements detailed in the NHS EPRR Core Framework (2017/18).

Based on contractual 63 required the requirement cannot be met. A&E current roster systems do not equally align the current 75 AIT trained staff across 24x7 working. It is anticipated that with 105 AIT trained this would be sufficient to meet the requirement dependent on rota placement. Once staff have been recruited from multiple station sites work will commence on balancing rosters to achieve requirement. An action plan to deliver four AIT courses - June to October 2018 has been agreed which will provide an additional 30 AIT staff (**total105**)

Initial training for AIT staff is three days, followed by a two annual refresher days.

6.7 Nerve Agent Antidote Kit

Part of the CBRN capability is to provide Nerve Agent Antidote Kits (NAAK). The previously out of date NAAK have now been replaced with Duodote and a these have been distributed across the Trust (November 2017) placed on all front line A&E vehicles.

7.0 RISK ASSESSMENT

7.1 NHS England EPRR Statement of Compliance

The NHS needs to plan for, respond to and recover from, a wide range of incidents and emergencies that could affect health or patient care. These could be anything from extreme weather conditions to an outbreak of an infectious disease or a major transport accident.

All providers of NHS funded care are required to work towards meeting the requirements for EPRR as set out in the NHS England Core Standards Matrix, the NHS England planning framework, Everyone Counts: Planning for Patients 2013/14, and the 2013/14 NHS standard contract (Service Condition 30, page 25).

NHS Trusts which are designated as Category 1 Responders under the Civil Contingencies Act (2004) are required to undertake a self-assessment against the core standards during November/December annually.

The Accountable Emergency Officer (AEO) is required to take a Statement of Compliance and any necessary improvement plan to their Trust Board before submission to the NHS England Area Team.

The Statement of Compliance was submitted and approved by the Board in November 2017. The Action Plan included in the board paper is being monitored and is on target for completion.

The Level of Compliance Matrix is shown below.

Compliance Level	Evaluation and Testing Conclusion
Full	Arrangements are in place and the organisation is fully compliant with all core standards that the organisation is expected to achieve. The Board has agreed with this position statement.
Substantial	Arrangements are in place however the organisation is not fully compliant with one to five of the core standards that the organisation is expected to achieve. A work plan is in place that the Board or Governing Body has agreed.
Partial	Arrangements are in place however the organisation is not fully compliant with six to ten of the core standards that the organisation is expected to achieve. A work plan is in place that the Board or Governing Body has agreed.
Non-compliant	Arrangements in place do not appropriately address 11 or more core standards that the organisation is expected to achieve. A work plan has been agreed by the Board or Governing Body and will be monitored on a quarterly basis in order to demonstrate future compliance.

YAS is at **Substantial** level of compliance.

8.0 RECOMMENDATIONS

8.1 The Trust Board are updated and assured of the Trust's compliance and progress of the EPRR agenda.

9.0 APPENDICES/BACKGROUND INFORMATION

9.1 Appendix A - Resilience Training Summary Oct 2017 – March 2018
 Appendix B - Resilience Exercise Summary Oct 2017 – March 2018
 Appendix C - Business Continuity Dashboard.

Appendix A Resilience Training Summary October 2017 – March 2018

Course Title	Course Duration	Target Audience	Numbers Trained
Operational Commander Course	5 Days	New to post Clinical Supervisors, Event Commanders	48
Joint National Decision Model	5 Days	Event Commanders, Locality Managers, Senior Managers, EOC Duty Managers, EOC Team Leaders	13
Resilience Awareness Course	1 Day	All front line staff	194
Business Continuity and ISO22301 Introduction Course	1 Day	A&E Ops Managers (CS level and above)	138
SORT Initial Course	5 Days	SORT Team Members (ECAs / Techs Paramedics	11
SORT Refresher Course	2 Day	SORT Team Members who have already attended the 5 day course.	11
AIT Refresher Course	2 Day	AIT Team Members ((EMT 2Adv Tech Paramedics who have completed the 3 day course	5
AIT Initial Course	3 Days	AIT Team Members (EMT2/ Advanced Tech/Para	23

Appendix B Resilience Exercise Summary October 2017 – March 2018

Exercise Title	Date	Numbers attended
SY Exercise Castaway Part 2 (TTX)	5 th October 2017	2
NY Exercise Mashua (Live-Play)	9 th October 2017	11
EY COMAH SSE Atwick (TTX)	11 th October 2017	2
SY Exercise Seven Hills (TTX)	11 th October 2017	3
EY COMAH Nippon Gohsei (TTX)	8 th November 2017	3
NY Exercise Saton Force (TTX)	15 th November 20017	8
NY Exercise Saton Force (Live-Play)	16 th November 20017	7
WY Exercise Independence (Live-Play)	19 th November 2017	16
EY COMAH BP Chemicals (TTX)	22 nd November 2017	3
NY Scarborough Landslip Evacuation (TTX)	28 th November 2017	2
WY COMAH Exercise Kensington (TTX)	6 th December 2017	3
WY Exercise Mohawk (Emergo)	12 th December 2017	28
NY Exercise Conference (TTX)	13 th December 2017	10
EY COMAH Croda (TTX)	17 th January 2018	4
SY Exercise Honolulu (Live-Play)	6 th February 2018	9
EY COMAH Guardian Industries (TTX and 999 Call)	7 th February 2018	4
SY TrentEx 2018 (CPX)	8 th February 2018	1
WY COMAH Michigan Rose	14 th March 2018	5
SY COMAH Exercise Candle (999 Call)	14 th March 2018	1
SY COMAH Culina Ambient	22 nd March 2018	3

Appendix C A&E Ops ISO22301 Certification Action Plan

Date	Activity	Reason/dependency/notes	Tasked To	RAG
14 th May 2018	Executive Exercise/top management review of BCMS (ISO22301 requirement)	Speak to Rod and Dave re dates Email sent to Michelle and Dawn 20 th April 2017 Meeting booked for 14 th May 2018, c 60% have accepted so far	AV/RF (delivery) Exec (attendance)	Yellow
by May 2018	Confirm and challenge BC plans with each department (table top, mini audits etc.).	RF and Ruth Parker to look at this with A&E ops Managers. This has now changed as Ruth Parker was to work with the BC team to coordinate this, update from Alan on 9 th March, Ruth will now ONLY be focusing on WY CBU and only looking at the Plans. BC admin to do this for their own CBU's	RF/RF Ops Managers	
by May 2018	Attend ops meetings on a regular basis to keep the BC on the agenda	AV emailed Ruth requesting dates on 20 th April 2017 Dates received AV requested to attend with Jackie Cole, Jackie was asking Stephen Segasby, awaiting response Ops briefed 17 th April, awaiting their requirements.	AV/RF	
by May 2018	Days out with operational crews to talk one to one and see BC issues	Speak with Stephen re this, no capacity for BC team at this stage, will review again after Easter, unlikely this will happen due to timescales. And workload for RF/AV	tbc	
by May 2018	Visit all ambulance stations to increase awareness of the YAS 7 and BC	Take/send BC folders, merchandise, posters etc. This could be combined with mini audits of location of BC plans at stations and conversations with crews if available. BC Folders have all been distributed to stations with instructions on where to locate them and brief staff of their existence and location No capacity within BC team at the moment will review after Easter. Made more difficult to coordinate with the news that RP not now joining the BC team All A&E ops managers now trained, they will be responsible for this activity in their own CBU's with the support of the identified admin October 2016 Papers completed via training dept, awaiting decision from TMG	RF/RF/AV OPS Managers	
	BC to become stat and mandatory	RF to enquire		Yellow
by end March	AV to deliver BC training to all by the end of March 2018	Invitations and room bookings to be coordinated by the BC team, number of dates will depend of number of those not yet trained; at least one per CBU is anticipated. email sent out 31st January by Angela Vinand to Stephen Segasby who circulated - responses coming in Training booked for 9 th , 13 th , 16 th , 22 nd , 23 rd March. Currently have 88/129 staff booked onto these sessions. new dates 9/11/16/18 May, should be over 95% compliance with training	AV/RF	
By May 2018	A second meeting for all above to be held at the end of May – this is where OPS Managers will have to provide assurance that they are ready for their audit day.	BC Manager will provide support and advice and provide coaching on the actual ISO22301 interviews Tuesday 22 nd May pencilled in 11:00-12:30 Circulated by AV 1 st February 2018 date changed to 21 st May, meeting room availability and annual leave	AV/RF	
End May 2018	Full Review of ambulance station BC plans	Majority of station plans will require their biannual review prior to the audit. Ruth Parker to assist with this? This has now become a significant risk due to the availability of Ruth Parker, A&E Ops need to consider who is going to write, format and audit BC plans Admin in each area has been identified; they are all tasked with	RF/RF	Yellow

Feb 2018	Additional staff conversation – Ruth Parker	getting first drafts to BC team by end of April. These documents must be formatted and fit for publishing as BC team do not have time or resources to do this. . BC team are picking up this week which takes time	Support required to enable full review of station BC plans, emailed Julian and Stephen 1 st February 2018. JMcS agreed for RP to support with this. This has now changed as of 9 th March 2017- needs a further discussion. This did not happen.	AB/SS/JMcS
Feb 2018	Awareness campaign for ISO certification	Louise Boyes to manage awareness campaign for A&E Ops certification to ISO22301. Met on 21 st Feb, information provided to LB. LB to draft campaign plan and share with AV/RF. Campaign plan is now completed. Just needs enacting, AV and Joanna Richardson meeting 8 th May 2018	Allocate actions when final report submitted to YAS	LB AV/RF AV/RF/Ops
tbc	BSi Stage 2 audit			
tbc	Address non conformities or celebrate certification as appropriate			

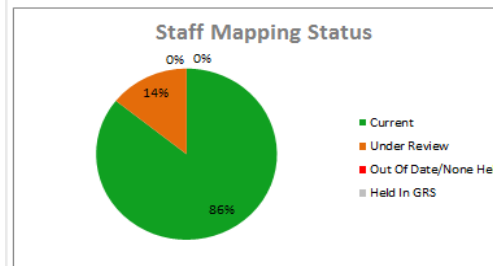
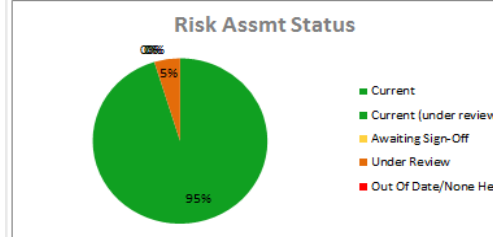
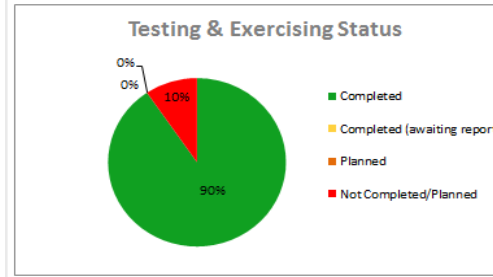
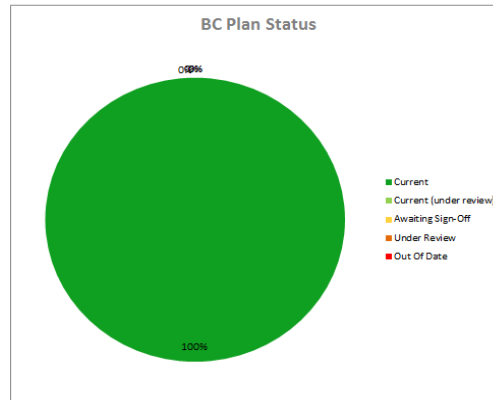
COMPLETED ACTIONS

By April	AV to hold a meeting in April for appropriate Directors, Deputy Director, Divisional Commanders and Sector Commanders (and if required GSM's)	Meeting to brief on the campaign for the BCMS and the planning requirements leading up to the audit, AV to draft an email for Stephen to cascade to Ops Managers Tuesday 17 th April pencilled in 11:00-13:00 Circulated by AV 1 st February 2018	AV/RF
	Julian to speak with Leaf re resourcing (namely Angela) to support the certification process Stephen Segasby to send email to Ops managers (from Angela)	Meeting booked in 14/03/2018 AV returning to BC on 1 st may so problem solved Email drafted by AV and sent to Stephen 30 th Jan.	JM/LM AV/SS
Quarter 2 2017	Meet with all heads of department to discuss/inform of certification and requirements, add any additional information into the NDM	DM sent out information email , AV sent out request for meetings to relevant PA's on 20 th April, awaiting response	AV
Quarter 2 2017	Book and circulate BC training dates to all depts. working towards certification	Sent out by DM on 20 th April 2017	AV/DM
Quarter 4 2017	Rebook Book Stage 2 assessments with Leigh Verral	Tuesday 19 th June 2018 – York Ambulance Station (N&E CBUs) Wednesday 20 th June 2018 – Leeds Ambulance Station (CKW & ABL CBUs) Thursday 21 st June 2018 – Doncaster Ambulance Station (South CBU)	AV
20 th April 2017	Communication to Divisional Commanders from Rod and Dave re certification requirements and commitments.	DM sent 20 th April 2017 email sent to all with save the dates and requirements	AV/DM
July 2017	Development of the BIA's and BC plans, risk assessments and staff mapping	Meetings with all divisional Commanders/ sector commander and GSM's to review A&E Ops BC plan and BIA July 2017, BIA and plan signed off by Dave Macklin August 2017	RF/AV/DM
Ongoing	Work with BC leads of all depts. on preparation for ISO22301 certification requirements	Request sent to 3 Divisional Commanders 20 th April 2017	RF/AV
June and July 2017	Deliver required one day ISO22301 training courses on ISO22301	A& E ops dates booked for June and July at four locations (x 4 courses completed)	AV

11 th September 2017	Internal Audit	Booked September 11 th 2017 Appointments secured for Dave Macklin, A&E Ops (Paul and Jackie), Community Resilience (Paul Stevens), Estates (Emma)	AV/DM/PM/JC
Quarter 3 2017	Complete and photocopy the BC folders	All locations including stations have BC folders	RF
Quarter 2 2017	Procure YAS 7 merchandise	Expenditure approval needed – quotes with Jim	AV/JR
30 th January 2018	BC team to pull together a list by CBU of those managers who have already attended the BCMS training – send to the GSMS for cross reference and return names of all not attended from CS level upwards	Action completed 30/01/2017	RF
Feb 2018	BC team to book dates and rooms to deliver BC training to A&E Ops staff.	Rooms booked for 9 th & 13 th March at Magna, and 16 th 22 nd & 23 rd March at Manor Mill.	RF
Feb 2018	Email to Ops staff CS level & upwards requesting book onto BC courses	Email sent by RF 8 th Feb requesting book onto courses, advising must gain manager approval and liaise with Scheduling first.	RF
Feb 2018	Julian to speak with Corporate Communications and Directors re a Trust wide Campaign for the BCMS	Campaign to begin gently over the coming weeks and building up from April May and June Z cards to go in all payslips to all YAS staff Poster campaign Briefs from exec and senior managers Ops update articles Screensaver Twitter feeds Meeting to be arranged with YAS campaign Manager and YAS BC Manager Email sent to Elaine Gibson 30 th Jan Meeting Louise Boys 21 st February 2017 with AV and RF Planning meeting held 21 st Feb. Louise Boyes to manage campaign for ISO certification.	AV/RF/LB

Appendix D – Business Continuity Dashboard – Oct 2017 to March 2018

Department	BC Plan & BIA	Testing & Exercising	Risk Assmnt	Staff Mapping
EOC (Emergency Operations Centre)	Green	Green	Green	Green
ICT (Information, Communication & Technology)	Green	Green	Green	Green
Resilience	Green	Green	Green	Green
A&E Operations	Green	Green	Green	Grey
PTS (Patient Transport Service)	Green	Green	Green	Green
Fleet	Green	Green	Green	Orange
Estates	Green	Green	Green	Green
Procurement	Green	Green	Green	Green
Standards & Compliance	Green	Green	Green	Green
Clinical	Green	Green	Green	Green
Corporate Communications	Green	Green	Green	Green
Private & Events	Green	Green	Green	Green
NHS 111	Green	Green	Green	Green
Resource Planning	Green	Green	Green	Green
Business Intelligence & Management Information	Green	Red	Green	Green
Air Ambulance	Green	Green	Green	Green
Community Resilience	Green	Green	Green	Green
Finance	Green	Green	Green	Green
HR (Human Resources)	Green	Green	Green	Orange
OEE (Org Effectiveness & Education)	Green	Red	Orange	Orange
HART Team	Green	Green	Green	Green



KEY:

BC Plan Status
 Current
 Current (under review)
 Awaiting Sign-Off
 Under Review
 Out Of Date

Testing & Exercising Status
 Completed
 Completed (awaiting report)
 Planned
 Not Completed/Planned

Risk Assmt Status
 Current
 Current (under review)
 Awaiting Sign-Off
 Under Review
 Out Of Date/None Held

Staff Mapping Status
 Current
 Under Review
 Out Of Date/None Held
 Held In GRS