



MEETING TITLE Public Board Meeting		MEETING DATE 28/11/2017	
TITLE of PAPER		EPRR and Special Operations Bi-annual Report April 2017 to October 2017	PAPER REF 6.1
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 provide an update and assurance to the Trust Board on the Emergency Preparedness Resilience and Response (EPRR) work streams	
For Approval		<input checked="" type="checkbox"/>	For Assurance
For Decision		<input type="checkbox"/>	Discussion/Information
AUTHOR / LEAD	Jim Richardson, Head of Resilient / Alan Baranowski, Divisional Commander / Angela Vinand, Business Continuity Manager	ACCOUNTABLE DIRECTOR	Julian Mark, Temporary Accountable Emergency Officer, Executive Medical Director
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): Head of EPRR, Head of Special Operations and CBRN specialists have reviewed the EPRR self-assessment template for compliance and developed an action for each improvement area. The report has been reviewed by the Accountable Emergency Officer and the action plan will be scrutinised by the three Local Health Resilience Partnership Boards through their next meetings.			
PREVIOUSLY AGREED AT:		Committee/Group: Board of Directors	Date: Click to enter date
RECOMMENDATION(S)		Approval of the EPRR Statement of Compliance, note the action plan and delivery timescales	
RISK ASSESSMENT			
			Yes
			No
Corporate Risk Register and/or Board Assurance Framework amended <i>If 'Yes' – expand in Section 4. / attached paper</i>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Resource Implications (Financial, Workforce, other - specify) <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input type="checkbox"/>	<input type="checkbox"/>
Legal implications/Regulatory requirements <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Diversity and Inclusion Implications <i>If 'Yes' – please attach to the back of this paper</i>		<input checked="" type="checkbox"/>	<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)	

EPRR and Special Operations Bi-annual Report April 2017 - October 2017

1. PURPOSE

1.1 To provide an update and assurance to the Trust Board on the Emergency Preparedness Resilience and Response (EPRR) agenda and work streams for the period; April 2017 up to and including the end of September 2017. 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 the Trust Board with assurance that the Trust continues to develop and maintain 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 and underpinned by the annual EPRR Assurance Framework.
- 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 Trusts Prioritised activities namely the YAS 7 (Call handling, Dispatch, Triage, Treatment, Transport, Command and Communications) during major incident or business disruption.
- Understanding and 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 (GGC's) based on a national formula.
- Medical Emergency Response Incident Team (MERIT) is funded by CCG's 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 at 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 the 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 Op Blitz

As stated in the last Bi-annual report to the YAS Board (April 2017), the recent restructure of A&E Operations the duties of EPRR and Special Operations are now split in terms of overall responsibility, previously both posts reported to of the Deputy Director to Operations (DDoOps currently vacant).

The Head of EPRR reports to the Head of Service Central Delivery who in turn answers to the Regional General Manager (not yet in post) and the Head of Special Operations now answers to the Divisional Commander for West who in turn answers to the Deputy Director of Operations (DDoOps).

The Head of EPRR currently engages with the Head of Central Delivery and directly with the Executive Director of Operations however during this period this post holder was seconded to NARU and the Head of Resilience worked to the temporary Accountable Emergency Officer (AEO), the Executive Medical Director.

As detailed in the last report the department currently has a Resilience Manager seconded to a national post as part of their CPD, this has been extended for a second year. To mitigate this, the department has two Assistant Resilience Managers to support the department during the time of the Resilience Managers secondment and to provide development in line with future succession planning. Both of the secondees are from within YAS, with one from already in the EPRR team and the other from EOC, which also reduces the pay costs for the EPRR Team for this financial year.

3.2 Operation Blitz

Op Blitz, is the process by which the EPRR Team annual 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 clarify and a common understanding between them.

Op Blitz has now been running for over three years and is now embedded in to the department's governance 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. As in previous reports and as part of the continuous planning cycle EPRR carries this involves:

- A review of the risks
- A review of all plans and guidance
- A review of lessons identified at exercises and incidents
- Any changes to national requirements.

As stated in the bi-annual report for Q1 and Q2. The Team set up an Ops Blitz event early in the New Year each year, given that both approaches have now been utilised, the short highly focused approach has been deemed more effective overall as it does not encroach hugely on normal business meetings. However given the reduced staff capacity it was not possible to complete all the work in a single event. Follow up half day Op Blitz events were scheduled to ensure the continuous planning cycle frequent updates were carried out.

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.

3.3.1 JESIP (Working Together, Saving Lives)

The Trust continues to work with partner organisations to ensure that Joint Emergency Services Interoperability Principals (JESIP) is maintained and continues 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.

JESIP Command and Control Room training is currently being reviewed with plans in place to commence the roll out for Command training December 2017

and Control Room training February 2018 Both training programmes will be delivered on a regional basis, ensuring cross border engagement.

On 10 May 2017- A JESIP Assurance Visit was conducted by members of the National JESIP team, this was designed to enable the JESIP team to better understand the progress services were making with embedding the JESIP principles locally and to gain a national picture. YAS have not yet received the report from JESIP regarding this visit, however feedback received on the day was positive.

In November 2017, Joint Organisational Learning (JOL) and Lessons Direct will merge to become JOL Online. This will continue to be hosted on Resilience Direct and will be available to all those who hold a Resilience Direct account.

3.3.2 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. This work now needs to be redefined following the 2017 A&E Operations management restructure to ensure that the correct strategic representation is in place going forward. The intended way forward is to revise the current YAS Commander Framework to include a requirement for YAS Divisional Commanders to engage with their respective LRFs at the strategic level with the YAS Accountable Emergency Officer attending at least 1 of each of the 4 LRFs meetings in Yorkshire 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.

3.3.3 Local Health Resilience Partnerships (LHRP)

As with previous reports YAS is represented at Senior Management Level at the quarterly meetings of the regions three LHRP's. YAS contributes to ensure the group meets its obligations within the terms of reference. 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 has supported the review of such plans and works with NHS England with their continued development.

As with the LRFs, this now needs to be redefined following the 2017 A&E Operations restructure to ensure the correct managerial level of strategic representation is in place going forward. Again as with the changes for LRF engagement ; the current YAS Commander Framework will include a requirement for YAS Divisional Commanders to engage with their respective LRFs at the strategic level with the YAS Accountable Emergency Officer attending at least 1 of each of the 4 LRFs meetings in Yorkshire per year.

3.3.4 National Groups

The Trust is represented at the various national work groups and supports its fellow Trusts where possible. Following the A&E Operation's restructure the strategic level management needs to review and decide on the level of engagement going forward.

3.3.5 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 processed by the Finance Dept.

3.3.6 Winter Planning

The Head of EPRR at YAS is Strategic lead for winter planning arrangements to ensure all departments meet the additional pressures and issues that winter brings. This involves collaborative working with Partner organisations including LHRP's NHS England and other Health partners.

3.3.7 Business Continuity Groups

The YAS Business Continuity (BC) Manager was the chair of the LRF Regional BC Managers Group, up until the handover to Wakefield Council on 24 April 2017. 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, the last meeting was held on 30 August 2017.

3.4 Events

Remain unchanged from previous reports, 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.

As part of a restructure of the EPRR admin, there 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 six months and it has been seen as successful given the absence of complaints from event promoters and providers.

3.4.1 Safety Advisory Groups

Where the above warrant the need for a Safety Advisory Group (SAG), these are established by Local Authorities to assist them 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 in areas.

SAG MEETINGS ATTENDED APRIL 2017 – SEPTEMBER 2017			
NORTH CBU	SOUTH CBU	EAST CBU	WEST CBU
20	38	13	44

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 are also undertaking deep dive reviews of the current planning and inspection guidance for events across the spectrum.

3.4.2 Demonstrations/Protests

As reported in the last report there has been a marked decrease in organised protests and demonstrations within our region. we have had 3 protests in Leeds in relation to various political viewpoints, none of these required specific planning. To date there has been only 1 demonstration instigated by the English Defence League (Keighley September 2017) who were so prevalent in recent years, however there are believed to be others in the planning phase and as a result YAS together with its partners are preparing and planning for such events should they go ahead. 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.

3.4.3 Tour De Yorkshire

Once again YAS worked successfully with its multi-agency partners in meeting the challenges for the third Tour de Yorkshire. The event was considered to be successful and was a much larger event than the preceding year. Each year is anticipated to continue to grow with a World Cycling event planned for 2019 and a strong possibility for a return of the Tour de France Grand Depart in the foreseeable future.

Every 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 will continue onwards from October and gradually build over the coming months. As this builds each year this places a significant strain on available EPRR resources and the team continues to strive to make the planning and preparation process as efficient as possible.

3.5 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 (NIOs). 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,

YAS BC team took part in the Resilience Direct (RD) Broken Crown Exercise which focused on a Cyber-attack; the exercise provided a good opportunity to test the RD functionality.

3.6 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.

3.6.1 **Business Continuity Training**

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

- BCMS and ISO22301 training has been ongoing throughout the period. All departments identified for verification to ISO22301 in October have been through the training programme; Estates, Community Resilience. All were successful in their certification to the Standard.
- Training also took place with the A&E Ops Managers, all Managers CS and above were required to attend a one day training course. Training will continue in the new year to ensure all Managers have the opportunity.
- The BC Manager continues to support the Commander training both internally and externally.

3.7 **New Developments**

The BC Manager delivered BC training to Bradford Teaching Hospitals as part of this year's income generation.

West Yorkshire Fire Service have requested that YAS Deliver Debrief training to their staff and Managers, planning for this is ongoing. This work will be part of a collaborative working project as opposed to income generation.

The BC team supported A&E Ops to review their departmental BC plan reviews. All station BC plans have now all been signed off by the A&E Operational Managers and placed on the relevant stations next to the signing in book.

3.7.1 **Staff Responder Scheme**

The scheme trial is currently underway until the end of December and a more detailed update will be provided by a post-trial report and also in the next Bi-annual EPRR report.

The benefits of the scheme is that it was a product of the Bright Ideas initiative where staff have expressed a wish to better serve their local communities by being available to respond in a similar manner to the Community First Responder Schemes (CFR) however where they have clinical skills their response would be enhanced from that of a CFR and can support local A&E Operations in our rural areas. It also allows non-clinical YAS staff to engage in supporting their community where CFR schemes may not exist.

There are potential risks associated to the scheme such as how such a scheme is perceived by existing CFR schemes and risks similar to those for CFR

schemes however there were robust plans put to the Executive Director of Operations prior to his approval of the trial period (6 months) and the pilot is being monitored and will be fully evaluated early 2018.

Early indications are that the scheme is working well with no known adverse incidents to date.

3.7.2 YAS Commander Framework

As stated in the previous report development of the framework will be assessed once it is clear what the Review of the Operational Team management (and command) structures as well as incorporating the revised National Command and Control Guidance.

The new role markings are in their final sign off by the YAS AEO and are being rolled out across the Trust in a phased and controlled introduction over January 2018.

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

The Head of EPRR will be providing a detailed review and report during November to look at options to address this challenge and will feedback in the next bi-annual report.

3.8 Debriefs And Lessons Identified (DATIX)

The Trust facilitates debriefs for various incidents and exercises. It remains challenging to attract the commitment to the debrief process from departments as / when incidents occur mainly due to the demands of front end service delivery.

The BC team facilitated structured debriefs for Tour de Yorkshire and the Cyber Attack in May 2017.

3.9 Business Continuity Management

3.9.1 Document Reviews

BC Policy and Debrief Policy has been updated.

3.9.2 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.

3.9.3 BC Exercises

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

3.9.4 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.

Incident Number	Incident Date	Incident Location
INC-36236	26/03/2017	Springhill 1 -2 -Trust HQ - Wakefield
INC-36246	26/03/2017	Springhill 1 -2 -Trust HQ - Wakefield
INC-36379	28/03/2017	Springhill 1 -2 -Trust HQ - Wakefield
INC-37700	12/05/2017	Springhill 1 -2 -Trust HQ - Wakefield
INC-37726	12/05/2017	Springhill 1 -2 -Trust HQ - Wakefield
INC-37717	13/05/2017	Springhill 1 -2 -Trust HQ - Wakefield
INC-38539	31/05/2017	Fleet Wakefield (Unit M)
INC-38873	18/06/2017	Bridlington Ambulance Station
INC-38892	19/06/2017	Springhill 1 -2 -Trust HQ - Wakefield
INC-38955	19/06/2017	Springhill 1 -2 -Trust HQ - Wakefield
INC-39265	30/06/2017	HART Unit - Leeds
INC-39474	07/07/2017	Springhill 1 -2 -Trust HQ - Wakefield
INC-40839	17/08/2017	Halifax Ambulance Station

4. 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 Antidote's 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).

Since the last Bi-annual report there has been a period of instability in the leadership of Special Operations. The Head of Special Operations had to step down pending an investigation undertaken by the Trust. This post originally reported directly to the Deputy Director of Operations who unfortunately retired earlier than anticipated. During the timeframe of this report a temporary Head of Special Operations covered the post up to September where another senior manager took over. With the Executive Director of A&E Operations undertaking a secondment, those acting up in to the Head of Special Operations role have been reporting to the YAS AEO with reference to governance and assurance.

As part of the recent A&E operations management restructure the overall Strategic Lead for Special Operations now comes under the Division Commander for West Yorkshire, this person is new to YAS and at the time of the report the substantive Head of Special operations was preparing to return to his substantive role.

4.1 **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 is expected these will be in place in readiness for the financial year 17-18, however a recent update from NARU is that they are in draft awaiting NHS England and in the case of MTFA, Ministerial sign-off.

4.2 **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 ballistically 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 September 2017 HART received the three new Primary Response vehicles, which replace the two Urban Search and Rescue (USAR) vehicles. It is a NARU requirement that each Trust has sufficient vehicles to maintain normal business. In January HART are scheduled to receive three Secondary response vehicles and a staff welfare vehicle. The Personnel carrier is also due for replacement this year. In addition to the vehicles, HART will take delivery of the new Incident Ground Technology, which will 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. This is due for delivery in early November. However, it will not become operational until the Secondary vehicles arrive in January.

Training and exercising continues on a weekly basis, with multi-agency exercises being a regular feature of their training. In July the staff received individual CPD portfolios containing all the HART competencies they are required to evidence year on year. This includes the YAS clinical competencies which are also assessed annually.

Since April a revised safe system of work, led by NARU, for HART staff has been in development. This includes revised generic risk assessments, equipment data sheets, revised Standard Operating Procedures (SOP's) and revised training competencies. It is expected these will be released in the last quarter of 2016/17, with an implementation date of December 2017. At the time of this report, they are still in development with a clear implantation date set.

4.3 CQC

The EPRR Team continues to work on its action that came of 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 completed. Roll out planned for January 2018.
- Planned introduction of Gold Support tier to command structure to provide additional strategic resilience now fully functioning.
- Recent mini-review of YAS MIP in line with current governance arrangements. Final sign off to be discussed with YAS emergency Accountable Officer.
- Review and refresh of YAS command education started, planned paper to be completed end of November 2017.
- Extended commercial services by providing and delivering strategic education to other health organisations. This will be part of the command education review.

4.4 YAA

The Critical Care Team continues to operate from the Nostell air support unit responding by helicopter and also RRV if required. The team is made up of an experienced consultant level doctor and HEMS paramedic with additional clinical training. The team are increasingly providing extended clinical support within the pre hospital setting across Yorkshire.

The 2 new H145 helicopters are in service and the increased cabin space and bespoke medical interior design allow for better patient access and care whilst in flight. The aircraft are more reliable resulting in greater operational availability; additionally they have greater endurance and performance allowing the aircraft to be tasked to successive incidents without the need for refuelling.

In September YAA successfully achieved certification that allows night time operations to commence. Training is now well underway to upskill the YAS paramedics in order to carry out safe night time HEMS missions. This involves numerous areas of training including the use of night vision goggles, operating the aircraft search light and providing a higher level of aviation support to the duty pilot. All 4 adult trauma centres in the Yorkshire region can now facilitate night landings.

The number of YAS paramedics working at YAA has increased from 14 to 17 to allow for these changes and YAA is available between the hours of 0600-000 from the Nostell ASU.

Clinically there have been a number of advances including the introduction of additional drugs and SOPs, the carriage of blood products is perhaps the most notable of these. A daily delivery of 2 units of O negative blood is received from

the Mid Yorkshire NHS Trust via the Whiteknights voluntary blood bikes, additional funding for the infrastructure for this scheme has been provided by the YAA charity. It is intended that the carriage of blood is extended to the Topcliffe aircraft in the near future.

There is ongoing discussion around the potential benefits of utilising the winches that were fitted to the new H145 aircraft. Currently 2 pilots and 2 paramedic aircrew have undertaken training in this process as part of a package that was delivered by Airbus helicopters, a decision on the future of this

Number of Staff Required	Trained and able to respond	Waiting to be trained	Comments
150	94	27	54 currently going through the selection process

proposal will be made in the near future.

4.5 **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 below. Initial training is for five days, with an annual two-day refresh. The annual refresh training days are behind schedule, this is due to operational pressures for the release of staff. There is a programme in place to recover and maintain training compliance. Note: All SORT staff are volunteers.

4.6 **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 programme of work is in place to distribute across the Trust on to all front line vehicles.

4.7 **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) Ambulance Intervention Team (AIT) staff on duty at all times during a 24-hour period. The current total number of AIT trained staff as seen in the table below. 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).

The A&E current roster system does not readily align AIT across 24x7 working, however at the time of this report a further 19 AIT staff have been trained (Oct 17) (increased from 62). Reconfiguration of AIT equipment and deployed

vehicles allow for an increase in training additional AIT staff with no additional PPE costs. It is anticipated that by Q4 AIT staff will increase to 100 personnel with an alignment to A&E rosters should achieve contractual compliance i. e. 10 staff AIT staff 24x7.

Number of staff required (contractual)	Trained and able to respond	Waiting to be trained	Comments
63	81 (Nov 2017)	Nil	An expression of interest is due for release soon to increase the numbers to 100

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

5. RISK ASSESSMENT

5.1 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 2014.

The Accountable Emergency Officer (AEO) is required to take a Statement of Compliance (see appendix 1) 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 2016. 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.

6. RECOMMENDATIONS

- 6.1 The Board are updated and assured of the Trusts compliance and progress of the EPRR agenda.

7. APPENDICES/BACKGROUND INFORMATION

- 7.1 Appendix A - Resilience Training Summary April 2017 – September 2017
Appendix B - Resilience Exercise Summary April 2017 – September 2017
Appendix C - Business Continuity Dashboard.

Appendix A Resilience Training Summary April 2017 – September 2017

Course Title	Course Duration	Target Audience	Numbers Trained
Operational Commander Course	5 Days	New to post Clinical Supervisors, Event Commanders	21
Joint National Decision Model	5 Days	Event Commanders, Locality Managers, Senior Managers, EOC Duty Managers, EOC Team Leaders	18
Resilience Awareness Course	1 Day	All front line staff	132
Business Continuity and ISO22301 Introduction Course	1 Day	Business Continuity Leads, Resilience Managers	66
SORT Course	5 Days	SORT Team Members (ECAs / Paramedics)	21
SORT Refresher Course	1 Day	SORT Team Members who have already attended the 5 day course.	34
AIT Refresher Course	1 Day	AIT Team Members (Paramedics)	22

Appendix B Resilience Exercise Summary April 2017 – September 2017

Exercise Title	Date	Numbers attended
WY COMAH Exercise Sovereign	5 th April 2017	4
SY COMAH Exercise Diamond Nebula	11 th April 2017	5
SY COMAH Exercise Emerald Ingot	4 th May 2017	5
Exercise Saton Response	16 th – 18 th May 2017	14
SY COMAH Exercise Pearl Clyde	7 th June 2017	4
SY Exercise Neutralise	14 th June 2017	1
WY CBRN Exercise Broadsword	21 st June 2017	1
SY Exercise Systematic	22 nd June 2017	2
EY CBRN Exercise Orange Falcon	24 th June 2017	10
SY Exercise Jasmine	29 th June 2017	4
WY COMAH Exercise King	5 th July 2017	6
NY COMAH Exercise Gin and Toxic	13 th July 2017	2
Exercise Above Deck	6 th September 2017	58
WY COMAH Exercise Windsor	13 th September 2017	3
SY Exercise Castaway	28 th September 2017	17

Appendix C – Business Continuity Dashboard

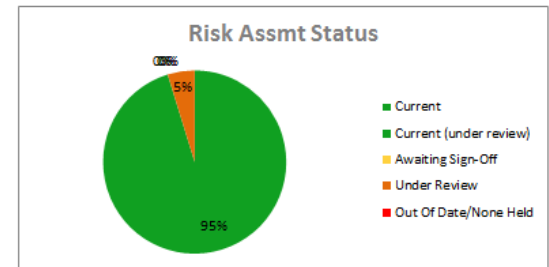
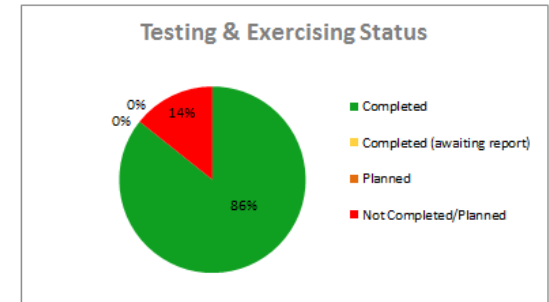
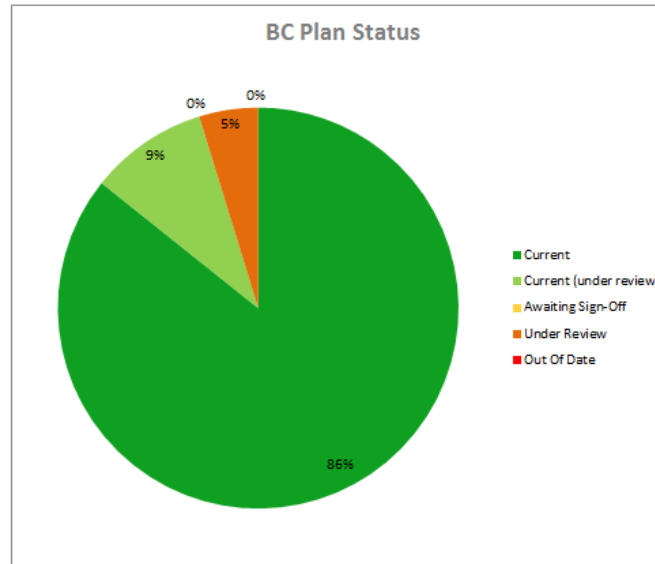
Will update when you ready to submit

Yorkshire Ambulance Service Business Continuity Dashboard

Produced by the Business Continuity Team 2016

01/11/2017

Department	BC Plan & BIA	Testing & Exercising	Risk Assmnt	Staff Mapping
EOC (Emergency Operations Centre)	Current	Completed	Current	Current
ICT (Information, Communication & Technology)	Current	Completed	Current	Current
Resilience	Current	Completed	Current	Current
A&E Operations	Current	Completed	Current	Under Review
PTS (Patient Transport Service)	Current	Completed	Current	Current
Fleet	Current	Completed	Current	Under Review
Estates	Current	Completed	Current	Current
Procurement	Current (under review)	Completed	Current	Current
Standards & Compliance	Current	Completed	Current	Current
Clinical	Current	Completed	Current	Current
Corporate Communications	Current (under review)	Completed	Current	Current
Private & Events	Current	Completed	Current	Current
NHS 111	Current	Completed	Current	Current
Resource Planning	Current	Completed	Current	Current
Business Intelligence & Management Information	Current	Not Completed/Planned	Current	Current
Air Ambulance	Current	Completed	Current	Current
Community Resilience	Current	Completed	Current	Current
Finance	Current	Completed	Current	Current
HR (Human Resources)	Current	Completed	Current	Under Review
OEE (Org Effectiveness & Education)	Under Review	Not Completed/Planned	Under Review	Under Review
HART Team	Current	Not Completed/Planned	Current	Current



KEY:

BC Plan Status
 Current
 Awaiting Sign-Off
 Under Review
 Out Of Date

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

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

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

