



<b>MEETING TITLE</b> Trust Board		<b>MEETING DATE</b> 30/05/2017	
<b>TITLE of PAPER</b>		EPRR and Special Operations Bi-annual Report October 2016 to March 2017 (end of)	<b>PAPER REF</b> 5.4
<b>STRATEGIC OBJECTIVE(S)</b>		Work with partners to provide system leadership and resilience Provide a safe and caring service which demonstrates an efficient use of resources	
<b>PURPOSE OF THE PAPER</b>		To provide an update and assurance to the Trust Board on the Emergency Preparedness Resilience and Response (EPRR) work streams	
<b>For Approval</b>		<input type="checkbox"/>	<b>For Assurance</b> x
<b>For Decision</b>		<input type="checkbox"/>	<b>Discussion/Information</b> x
<b>AUTHOR / LEAD</b>	Jim Richardson / Angela Vinand and Trevor Baldwin	<b>ACCOUNTABLE DIRECTOR</b>	Executive Director of Operations
<b>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):</b>			
<b>PREVIOUSLY AGREED AT:</b>		<b>Committee/Group:</b> Choose an item. Choose an item.	<b>Date:</b> Click to enter date Click to enter date
<b>RECOMMENDATION(S)</b>		The Board are updated and assured of the Trusts compliance and progress of the EPRR agenda.	
<b>RISK ASSESSMENT</b>			<b>Yes</b> <b>No</b>
<b>Corporate Risk Register and/or Board Assurance Framework amended</b> <i>If 'Yes' – expand in Section 4. / attached paper</i>			<input type="checkbox"/> x
<b>Resource Implications (Financial, Workforce, other - specify)</b> <i>If 'Yes' – expand in Section 2. / attached paper</i>			<input type="checkbox"/> <b>X</b>
<b>Legal implications/Regulatory requirements</b> <i>If 'Yes' – expand in Section 2. / attached paper</i>			<input type="checkbox"/> <b>X</b>
<b>Diversity and Inclusion Implications</b> <i>If 'Yes' – please attach to the back of this paper</i>			<input type="checkbox"/> <b>x</b>
<b>ASSURANCE/COMPLIANCE</b>			
<b>Care Quality Commission</b> Choose a DOMAIN(s)		Choose an item. Choose an item.	
<b>NHSI Single Oversight Framework</b> Choose a THEME(s)		Choose an item. Choose an item.	

## 1. **PURPOSE**

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; September 2016 up to and including the end of March 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**

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 Ambulance element of the scheme (including the Critical Care Team at YAA).

- Funding for special assets comes from the Department of Health (DoH) 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 CARE QUALITY COMMISSION INSPECTION

In September 2016 CQC carried out an inspection at YAS in response to a previous inspection as part of their comprehensive inspection programme. Focused inspections took place with five core services inspected. Resilience services were one of the five areas inspected. The outcome of this inspection was reported to the Trust February 2017, see below figure.

#### Our ratings for Yorkshire Ambulance Service Trust HQ

	Safe	Effective	Caring	Responsive	Well-led	Overall
Emergency and urgent care	Good	Good	N/A	Good	Good	Good
Patient transport services (PTS)	Requires improvement	Good	N/A	Requires improvement	Requires improvement	Requires improvement
Emergency operations centre (EOC)	Good	N/A	N/A	N/A	Good	Good
Resilience	Good	Outstanding	N/A	N/A	Good	Good
<b>Overall</b>	Good	Good	N/A	Good	Good	Good

### **3.2 DEPARTMENT STRUCTURE AND OP BLITZ**

Under the recent restructure of A&E Operations the duties of EPRR and Special Operations are now spilt in terms of overall responsibility, previously both posts reported to of the Deputy Director of Operations (DDoOps).

The Head of EPRR reports to the Head of Service Central Delivery who in turn answers to the Regional General Manager 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). At the time of this report none of the above senior managers are in situ, the Head of EPRR and Special Ops currently engage directly with the Executive Director of Operations.

As detailed in the last report the department currently has a Resilience Manager seconded to a national post as part of the persons CPD, this has been extended for a second year. To offset 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 this also reduces the pay costs for the EPRR Team for this financial year.

The Resilience Department has recently seen one of its Resilience Managers leave the Trust through MARS and the Executive Director of Operations has agreed to make the Assistant Resilience Manager role substantive as this provides both support to the current Resilience Managers and a more structured development and succession programme in what is a complex and detailed area of the organisation.

### **3.3 OPERATION BLITZ**

Op Blitz 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 third 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 2, the Team held a set Op Blitz event early in the New Year, given that both approaches have now been utilised the short, highly focused approach has deemed more effective overall as it doesn't hijack normal business in the standard team meetings. However given the reduced staff footprint it wasn't possible to complete all the work in one event so follow up half day Op Blitz events were utilised chaired by different Resilience managers to ensure the continuous planning cycle and updates were carried out.

The ResWeb update was completed successfully and a soft launch was carried out to allow people to access plans and guidance at their appropriate level, for the first time our staff are able to review plans and guidance such as the Trust Major Incident Procedures on-line. The feedback thus far is that it is more user friendly and in line with the YAS Pulse format. After a period of evaluation we are looking to re-launch ResWeb with staff across YAS to further highlight its presence and use. Other departments such as Special Ops and Private and Events have a section on ResWeb and maintain and manage their content and access.

### **3.4 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 next section). The EPRR Team also engages with partners in relation to Safety Advisory Groups covering regular and ad-hoc sporting and entertainment events across the region.

As stated in the previous bi-annual report, the Government undertook a consultation process (Enabling Closer Working between the Emergency Services; *Summary of consultation responses and next steps*), this has culminated in the Policing and Crime Act, 2017 passed by Parliament. This was been covered in a specific paper to the YAS Board that explains significant changes in governance arrangements for Police and Fire Services as well as the pertinent differentials between collaboration, JESIP and interoperability.

As stated previously, it is relatively new and hasn't been supported by much publicity. As noted in the previous report nothing specific has yet come from the Department of Health around our perceived role within the duty.

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

#### **3.4.1 JOINT EMERGENCY SERVICES INTEROPERABILITY PRINCIPLES (JESIP)**

The Trust continues to work with its Emergency Service partners and other Category 1 and 2 responders to ensure that JESIP is maintained and continues to be embedded across the region. As part of the continuation of embedding the JESIP training programme YAS has been engaged in follow up sessions for newly qualified/in post Operational and Tactical Commanders. The long awaited refresher training materials have now been released by JESIP. These new training materials will be rolled out across the region with our partners based on the training programme agreed by the Yorkshire JESIP Delivery Leads group. This programme is a 3 yearly cycle and will commence September 2017 once tri service train the trainer packages have been delivered. The regions emergency services continue to strengthen the principals in relation to Emergency Operations Centres and Control Rooms and have now set up a Yorkshire JESIP Control Room Leads meeting, chaired by YAS, that sits quarterly and feeds into the Yorkshire JESIP Strategic Leads meeting.

The JESIP principal to participate in Joint Organisational Learning (JOL) reporting requirements forms part of a wider paper currently in development and will be submitted to the Executive Director of Operations in Q3. The YAS approach to the full range of required learning and reporting will also include the NARU sponsored Proclus LiD, the Lessons Direct platform as well as JOL. The Director of Operations is the YAS Strategic Lead for JESIP and attends the Yorkshire JESIP Strategic Leads meetings.

YAS will be visited by the National JESIP team in May 2017 for an Assurance Visit. This visit will consist of YAS demonstrating how they have embedded JESIP within the organisation and with partners. Following the visit a report will be produced by the JESIP team detailing where YAS currently meet the JESIP maturity matrix and future work / learning required.

#### **3.4.2 LOCAL RESILIENCE FORUMS (LRF)**

YAS continues to be represented at Strategic level at all four LRFs that meet on a quarterly basis. The Resilience Department also attend and support many of the subgroups and the associated work streams. This now needs to be redefined now that the A&E Ops restructure is complete to ensure that the right strategic representation is in place going forward.

YAS participates and supports the various Gold Symposiums and LRF sponsored exercises to demonstrate assurance in the delivery of the civil duties named in the CCA 2004.

#### **3.4.3 LOCAL HEALTH RESILIENCE PARTNERSHIPS (LHRP)**

As with previous reports YAS is represented at the regions three LHRP's at a Senior Management Level, which meet quarterly. 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 now that the A&E Ops restructure is complete to ensure that the right strategic representation is in place going forward.

#### **3.4.4 NATIONAL GROUPS**

The Trust is represented at the various national work groups and supports its fellow Trusts where possible. Given the restructure the strategic level management needs to review and decide on the level of engagement going forward.

#### **3.4.5 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 in to business as usual and provides additional income/cost recovery processed by the Finance Dept.

#### **3.4.6 WINTER PLANNING**

The Head of EPRR at YAS is 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. However the Head of EPRR undertook a short term development secondment with NHS England North to support them in the management the regional (North) footprint over the winter period. The Head of EPRR continued to support YAS in its management of winter while on secondment.

#### **3.2.7 BUSINESS CONTINUITY GROUPS**

The YAS BC Manager was the chair of the LRF Regional BC Managers Group, up until the handover to Wakefield Council on the 24<sup>th</sup> April 2017. The YAS BC manager is a member of the National ACE 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 6<sup>th</sup> April 2017.

#### **3.3. EVENTS**

Unchanged from previous reports, a comprehensive record of all events is located on the YAS ResWeb<sup>®</sup> Event Calendar (a summary of these can be seen at Appendix B). They 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 the organisations and relevant authorities to ensure that we offer appropriate advice and guidance on medial 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.



### 3.3.1 SAFETY ADVISORY GROUPS

Where the above warrant the need for a Safety Advisory Group, these are established by Local Authorities to assist them in exercising their functions under the Safety of Sports Ground Legislation. With the increase, 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 During 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.

Attending a SAG meeting is a significant workload for the Resilience Team; see below the table for breakdown in areas.

<b>SAG MEETINGS ATTENDED OCTOBER 2016 – MARCH 2017</b>			
<b>NORTH CBU</b>	<b>SOUTH CBU</b>	<b>EAST CBU</b>	<b>WEST CBU</b>
5	18	13	8

The EPRR team continue to review their approach to supporting SAGs in all forms and have introduced a structured approach to highlighting 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 review of the current planning and inspection guidance for events across the spectrum.

### 3.3.2 DEMONSTRATIONS/PROTESTS

As reported in the last report there has been a marked decrease in organised protest demonstrations continues within our region however given there is a snap general election called this may change and intelligence stream remain monitored.

### 3.3.3 TOUR DE YORKSHIRE

Once again YAS ensured that with its multi-agency partners it met the challenges for the third Tour de Yorkshire. Yet again it was considered to be a successful and larger event than the preceding year and it is anticipated to continue to grow over the coming years with a World Cycling event in 2019 and the strong possibility of a return of the Tur 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 event and add this in to its planning assumptions going forward. Planning with resume with YAS from October and gradually build over the coming months. Each year this is an increasing significant strain on available EPRR resources and the team continues to look to make the planning and preparation process as efficient as possible.

### **3.4 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. YAS was involved in a major live MTF related exercise at Meadowhall Shopping Centre named Exercise Historian on the 19th – 20th March 2017. 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,

### **3.5 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 Coordinator 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 Refresher Course (3 day)
- Resilience Awareness Course (1 day)
- Joint Decision Model Course (5 day)
- SORT Course (5 day)
- SORT Refresher Course (1 day)
- AIT Course (3 days)
- AIT Refresher Course (1 day)

General incident and resilience education for frontline staff is planned in to the Annual Training Programme; initial training dates have been rolled out for A&E operations frontline staff which signals a significant step forward. Please see appendix A for the training held in this period.

### **3.5.1 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 ISO2301 in October have been through the training programme; HART, Air Ambulance, Procurement, Corporate Communications and Fleet. All were successful in their certification to the Standard.
- Training dates have been booked for the new departments certifying to ISO in September 2017, this includes all Managers in A&E Ops, plus the Estates and Community Resilience teams
- The BC Manager continues to support the Commander training both internally and externally

### **3.6 NEW DEVELOPMENTS**

The head of EPRR and the BC Manager have been commissioned by local health partners to assist in the preparedness of their on-call teams. Specifically the delivery of three one day Joint Decision Model for Health awareness courses to three different Trusts: Mid Yorkshire, Wakefield Clinical Commissioning Group and Bradford Teaching Hospitals these were attended by the Executive and Senior on call Managers.

The YAS BC Manager was approached by Leeds Teaching hospitals to support their BCMS programme. The YAS BC manager was seconded to the trust for three days per week between December and February (3 months). As a result it is anticipated that the trust will commission some of the BC and the JDM training.

Liverpool Women's Hospital have requested a meeting with the YAS BC Manager to discuss supporting them in their BCMS with a view to some consultation work in the future.

The Assistant BC Manager has supported the planning for the Tour de Yorkshire.

#### **3.6.1 STAFF RESPONDER SCHEME**

Unfortunately there has been some further slippage of the initiative since the last bi-annual report. However the governance, standard operating process, equipment and supporting board paper are with the Executive Director of Operations awaiting review/sign-off so the trail period can commence.

Some of the additional slippage in the progress of this scheme is due to the Head of EPRR being on secondment to NHS England and not being backfilled during this time. The Head of EPRR has ensured that those staff who instigated the scheme via the Bright Ideas pathway are kept informed and engaged and are ready to undertake the trail. Going forward a decision will have to be made on who will hold the responsibility for the scheme should (as anticipated) be successful and rolled out across the region where required.

### **3.6.2 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 Executive Director of Operations has commissioned a review of the current use of rank/role markings within the Trust to ensure that are aligned to the command requirements for the Trust, incorporated in to this is their commander requirements that will provide the basis for the future YAS Commander Framework.

Together with the proposals for taking education and development forward within YAS the Associate Director of Education and Learning is in the process of a thorough review once/if agreed by the Executive Director of Operations the commander elements of YAS educations requirements may come under the outcome of the review.

The Head of EPRR has already highlighted the significant challenges to deliver the anticipated commander education programme requirements post restructure as well as their on-going CPD/skill set maintenance. The Head of EPRR will work His line manager (once in post) to look at options to address this challenge and will feedback in the next bi-annual report.

### **3.7 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 Exercise Spartan1 and 2, Exercise Historian and the Loss of Communications Incident which occurred in January 2017.

YAS has embarked on its participation in two national programmes related to identify and sharing lessons and any associated learning processes.

These are:

- **Joint Organisational Learning (JOL) programme;** for the emergency services as part of the JESIP legacy. YAS and its partners will be expected to partake in the debriefing and learning processes where the need has been highlighted for multi-agency incidents, events and exercise. This will be scrutinised by the relevant LRF sub-group and uploaded to a national database.
- **Proclus LiD;** endorsed by AACE and managed by NARU, any Ambulance / Health specific learning similar to the JOL process should be uploaded to the Proclus LiD system to be shared across the Ambulance Trusts. Thus far this process has not been embraced by Ambulance Trusts nationally and YAS has its concerns around the protection of the data being submitted and where it is likely to be utilised and shared

As a result the BC Manager worked closely with other depts. including Risk, Operations and Clinical reviewed the Trusts Incidents and Learning Lessons Policy which is supported by process maps of learning from others' lessons and a framework for sharing YAS lessons with others. This process is new and once the Policy has been to the union and approved at board level it will be embedded in the Trust over the coming months.

### **3.8 BUSINESS CONTINUITY MANAGEMENT**

BC Policy has been updated, this was presented in February for approval but the February, March and April TMG were cancelled, the Policy is now out of date

#### **3.8.1 DOCUMENT REVIEWS**

#### **3.8.2 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

Work is still ongoing with on the site specific plans, beginning with Manor Mill, however the changes is the departments including estates

and HART has resulted in some delays to this piece of work, once completed this will be used as a template for other key YAS sites.

#### **3.8.4 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.

#### **3.8.5 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 a table and submitted in the monthly IPS.

The most significant incidents in the last 6 months are the loss of telephony at SH2 in January and March and the evacuation of Springhill 1 due to power failure in February 2017.

#### **3.9 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 (Duodote); Marauding Terrorist Firearms Attack (MTFA) and the Ambulance Intervention Team (AIT). In addition, the logistical support of equipment and vehicles that underpin's the response to a major incident, including the national Mass Casualty Vehicles (MCV) and the YAS Advanced Casualty Clearing Station (ACCS) capability.

##### **3.9.1 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.

##### **3.9.2 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 2016/17 the majority of the HART vehicles are due to be replaced. In September 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 they are scheduled to receive the three Secondary vehicles, along with a Welfare vehicle. The Personnel carrier is due for replacement this year; however the preferred provider has yet to complete the vehicle specification and pricing. In addition to the vehicles, they 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, whereupon they will be assessed for compliance by NARU.

### **3.9.3 CQC**

To September, the CQC undertook a re-inspection of YAS. In the 2015 inspection, HART received a less than favourable report. Since then a considerable amount of effort has been put in to correct that which was identified. Initial feedback from the inspectors is that there are no issues in HART and all the areas previously raised as being a concern have been remedied.

### 3.9.4 YAA

A strong working partnership continues to exist between Yorkshire Ambulance Service and Yorkshire Air Ambulance Charity. The Critical Care Team is now in to its second year and continues to operate 12 hours a day 365 days a year to provide enhanced levels of clinical care across the Yorkshire region.

Two new H145 aircraft are now in service and are able to offer improved reliability, performance and a bespoke medical interior that allows the crew much better access to provide clinical care to patients whilst in flight. YAS & YAA staff worked closely to design and develop this interior in order to futureproof our operations.

Due to the extension of operational hours in June 2017 YAS has extended the number of paramedics allocated to YAA from 14 to 17 WTE. This will allow the Nostell aircraft to operate between 0600-0000 hours utilising night vision goggles and other aircraft specific equipment when required. All aircrew paramedics are undertaking additional training to facilitate this change in operating practice.

There has been a number of clinical developments throughout the year that were brought about by YAA staff including audits on blunt traumatic cardiac arrest, anti-biotics and the upcoming introduction of blood.

The Airdesk continues to be integral to the effective activation of the YAA aircraft and the clinical input offered by our aircrew has seen an increase in our response to both medical and trauma related incidents over the last 12 months.

### 3.9.5 CBRN and SORT

NHS England require that we have 150 staff (was 250 originally, but the reduction has been agreed with NHS England). The current numbers can be seen in the table below. Initial training is for five days, with an annual two-day refresh. All SORT staff are volunteers from YAS Operations.

Number of staff required	Trained and able to respond	Waiting to be trained	Comments
154	122	32	



### 3.9.6 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. Duodote has been placed on all frontline Operational Vehicles including HART, YAA, MCV and YAS Private and Events vehicles.

### 3.9.10 MTFA

YAS is required to have a response capability in place to meet a Marauding Terrorist Firearms Attack (MTFA) type incident. This includes the HART duty team and ten Ambulance Intervention Team (AIT) staff on duty in any 24-hour period. The current AIT numbers can be seen in the table below. It should be noted the provision of the ten AIT staff each 24-hour period remains challenging, which breaches the requirements of the NHS EPRR Core Framework (2015).

The challenge is having staff available on a rota that provides the ten staff. Due to the AIT being volunteers, without taking them off their rota and putting them into a bespoke rota, it is difficult to achieve consistently. AIT staff have been asked if they would be prepared to do this, however most have declined because they will lose their rota line.

Number of staff required	Trained and able to respond	Waiting to be trained	Comments
63	62	Nil	An expression of interest is due for release soon to increase the numbers to 70

Initial training for AIT staff is three days, followed by a two annual refresh. The AIT refresh is behind schedule due to operational release challenges. However, there is a programme in place to recover.

## 4. RISK ASSESSMENT

### 4.1 NHS England EPRR Statement of Compliance

#### Yorkshire and the Humber Emergency Preparedness, Resilience and Response (EPRR) assurance 2016-17

##### STATEMENT OF COMPLIANCE

Yorkshire Ambulance Service NHS Trust has undertaken a self-assessment against required areas of the NHS England Core Standards for EPRR v3.0.

Following assessment, the organisation has been self-assessed as demonstrating the Substantial compliance level (from the four options in the table below) against the core standards.

Compliance Level	Evaluation and Testing Conclusion
Full	The plans and work programme in place appropriately address all the core standards that the organisation is expected to achieve.
Substantial	<b>The plans and work programme in place do not appropriately address one or more the core standard themes, resulting in the organisation being exposed to unnecessary risk.</b>
Partial	The plans and work programme in place do not adequately address multiple core standard themes; resulting in the organisational exposure to a high level of risk.
Non-compliant	The plans and work programme in place do not appropriately address several core standard themes leaving the organisation open to significant error in response and /or an unacceptably high level of risk.

Where areas require further action, this is detailed in the attached core standards improvement plan and will be reviewed in line with the organisation's EPRR governance arrangements.

I confirm that the above level of compliance with the core standards has been confirmed to the organisation's board / governing body \_\_\_\_\_

Signed by the organisation's Accountable Emergency Officer

Signed \_\_\_\_\_

Date Signed \_\_\_\_\_

Date of Board/governing body/(or delegated group) \_\_\_\_\_

**5. RECOMMENDATIONS**

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

**6. APPENDICES/BACKGROUND INFORMATION**

Appendix A	Resilience Training Summary October 2016 – March 2017
Appendix B	Resilience Exercise Summary October 2016 – March 2017
Appendix C	Business Continuity Dashboard

## Appendix A Resilience Training Summary October 2016 – March 2017

Course Title	Course Duration	Target Audience	Numbers Trained
Operational Commander Refresher Course	3 Days	Those who have already attended the 5 day bronze course	21
Joint National Decision Model Course	5 Days	Event Commanders, Locality Managers, Senior Managers, EOC Duty Managers, EOC Team Leaders	26
Resilience Awareness Course	1 Day	All front line staff	157
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.	35
AIT Course	3 Days	AIT Team members (Paramedics)	14
AIT Refresher Course	1 Day	AIT Team Members (Paramedics)	41

## Appendix B Resilience Exercise Summary October 2016 – March 2017

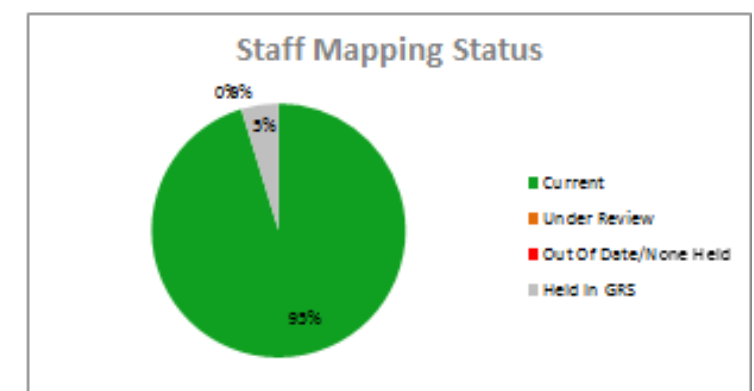
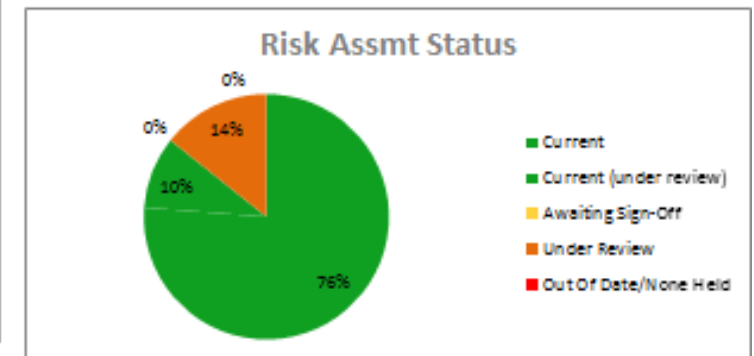
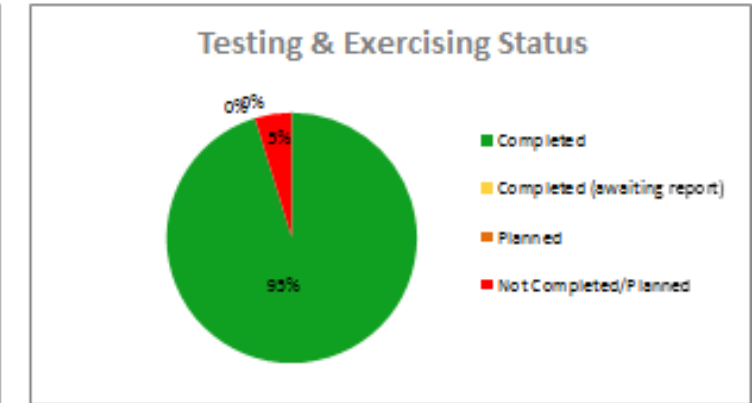
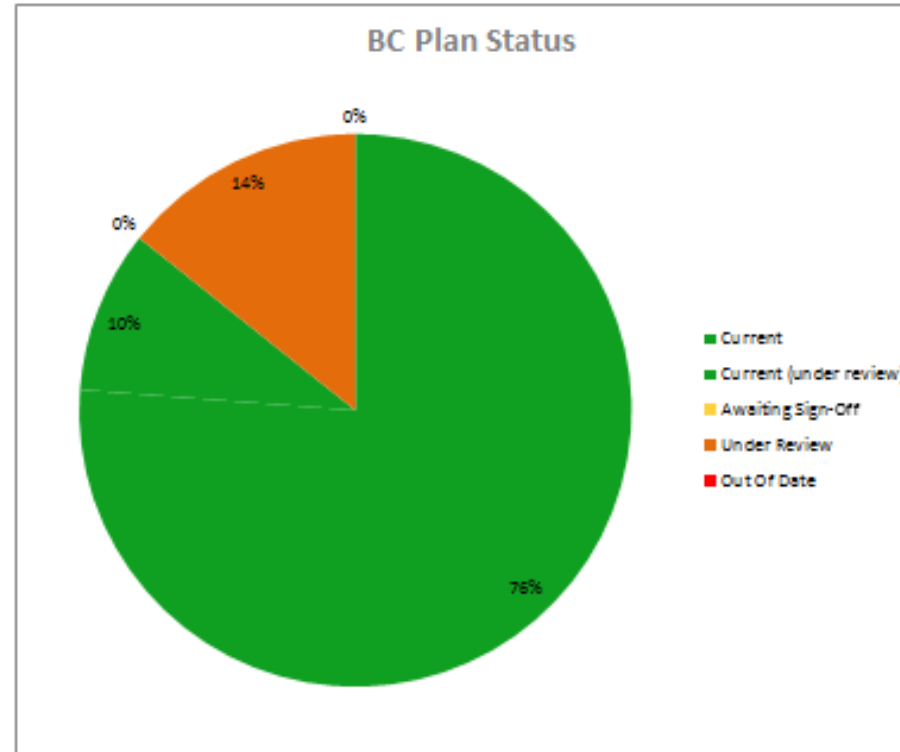
Exercise Title	Date	Numbers attended
SYLRF Exercise Cygnus	18 – 19 October 2016	3
EY Resilient RAT	18 – 19 October 2016	2
Exercise Spartan I	26 October 2016	18
Exercise Spartan II	27 October 2016	12
NYLRF Exercise Surge	3 November 2016	3
NY Operation Kingfisher	8 November 2016	2
WYRF Severe Weather	16 November 2016	1
Exercise Saton Force	16 – 17 November 2016	8
EY COMAH Ineos	16 November 2016	5
EY Exercise Grey Seal	22 – 24 November 2016	2
WY COMAH Exercise Omaha	7 December 2016	6
Exercise Maya	15 December 2016	10
EY COMAH Exercise Perenco	18 January 2017	2
SY Exercise Capulet	1 February 2017	1
EY COMAH Exercise XPO	1 February 2017	2
WYRF Gold Exercise	9 February 2017	5
SYLRF Exercise Historian	19 March 2017	63

# Yorkshire Ambulance Service Business Continuity Dashboard

Produced by the Business Continuity Team 2016

02/05/2017

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	Under Review	Completed	Current	Held In GRS
PTS (Patient Transport Service)	Current	Completed	Current	Current
Fleet	Current	Completed	Current	Current
Estates	Current	Completed	Current	Current
Procurement	Current	Completed	Current	Current
Standards & Compliance	Current	Completed	Current	Current
Clinical	Current	Completed	Current	Current
Corporate Communications	Current	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	Completed	Current	Current
Air Ambulance	Current	Completed	Current	Current
Community Resilience	Current	Completed	Current	Current
Finance	Current	Completed	Under Review	Current
HR (Human Resources)	Under Review	Completed	Under Review	Current
OEE (Org Effectiveness & Education)	Under Review	Out Of Date	Under Review	Current
HART Team	Current	Completed	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