Organisation: Yorkshire Ambulance Service

Core standard reference	Core standard description	Improvement required to achieve compliance	Action to deliver improvement	Deadline
HAZMAT/CBRN Core Standards 40	HAZMAT/ CBRN decontamination risk assessments are in place which is appropriate to the organisation.	CBRN Risk Assessment revised in September 2015. Final version to be available on ResWeb by the end of December 2015	Complete risk assessment and upload to ResWeb by end of December 2015	Dec-15
HAZMAT/CBRN Core Standards 41	Rotas are planned to ensure that there is adequate and appropriate decontamination capability available 24/7.	Rota's do not provide adequate cover 24/7. SORT staff are provided with a pager to recall to duty. HART staff are 24/7, Commander cadre is 24/7. There is insufficient trained SORT staff across the organisation. Courses programmed to address the shortfall have been suspended until February 2016.	Review rota provision whilst the Trust reviews rota's over the coming months. Training programmes to be recommenced in 2016	2016 for rota review. February 2016 for recommencement of SORT courses.
HAZMAT/CBRN Core Standards 51	Staff that are most likely to come into first contact with a patient requiring decontamination understand the requirement to isolate the patient to stop the spread of the contaminant.	The annual Emergency Preparedness update for operational staff is considerably behind; therefore staff have not had an update on CBRN for a protracted period. However, this year they are all being sent a DVD with the IOR principles and given access to an elearning programme for IOR.	DVD to be sent to all staff	Review in April 2016
MTFA Core Standard 3	Organisations have the ability to ensure that ten MTFA staff are released and available to respond to scene within 10 minutes of that confirmation (with a corresponding safe system of work).	HART staff are 24/7 and compliant with the MTFA standards. In addition YAS has 60 staff trained as AIT providers, who are available via pager and recall to duty. HART are based close to the the Model Response site and easily repsond within 45 minutes. AIT are across teh Trust and therefore may take longer to respond, depending on their location. EOC have procedures to identify and MTFA	A&E Operations are reviewing the Trust rotas in 2015/16. A request to ensure 10 staff are available 24/7 will be submitted to the Rota review Group	End of 2016

		incident, share with their emergency service colleagues and protect those staff responding to an MTFA incident, and stop other staff form entering the Hot Zone. It is not always possible to ensure there is 10 staff on duty at any one time, due to rota patterns. Trained AIT staff are subject to annual fitness assessment and two day refresher. All new AIT staff must pass the Physical Competence Fitness Assessment before being allowed to undertake the AIT course. There are training records for each member of the AIT held on ResWeb. All MTFA equipment is stored and maintained to the manufacturer's recommendations.		
MTFA Core Standard 6	Organisations have an appropriate revenue depreciation scheme on a 5-year cycle which is maintained locally to replace nationally specified MTFA equipment.	MTFA monies received annually have an amount for depreciation of ballistic equipment. However it has not been transferred across into capital expenditure and depreciated down. Additionally capital expenditure rules determine that any individual item with a value of less than £5,000 is not a capital item and is therefore revenue.	Paper to be submitted to Finance to identify how the ballistic vests will be replaced given funding has been provided.	Q4 2015/16
HART Core Standard 11	Organisations maintain an appropriate register of all HART safety critical assets. Such assets are defined by their reference or inclusion within the National HART	A register of all safety critical equipment is on ResWeb, with the appropriate service and maintenance records. However they are not asset tagged.	Safety critical equipment to be asset tagged	Dec-15

HART Core Standard 18	Standard Operating Procedures. This register must include; individual asset identification, any applicable servicing or maintenance activity, any identified defects or faults, the expected replacement date and any applicable statutory or regulatory requirements (including any other records which must be maintained for that item of equipment).  Organisations maintain a set of local HART risk assessments which complement the national HART risk assessments covering specific training venues or activity and pre- identified high risk sites. The provider must also ensure there is a local process / procedure to regulate how HART staff conduct a joint	HART Risk assessments available on ResWeb. However they are in need of a refresh, but have been delayed, pending a review of the national risk assessments, which is due for completion before the end of the financial year	To update once the national risk assessments have been concluded	Mar-16
	dynamic hazards assessment (JDHA) at any live deployment.			
EPRR Core Standards	Arrangements include a training plan with a training	Being able to demonstrate that people responsible for carrying out	YAS has identified as a challenge and a risk that it needs to release staff to	Incremental improvements
34	needs analysis and ongoing training of staff required to	function in the plan are aware of their roles	undertake incident education, this is mitigated by ensuring there is e-	2015-16 2016-17
	deliver the response to		learning available to staff and its	2017-18
	emergencies and business continuity incidents	<ul> <li>Programme and schedule for future updates of training and exercising</li> </ul>	included in the statutory and mandatory training workbook	

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	(with links to multi-agency exercising where appropriate)	YAS has this identified on the risk register and has a workforce improvement programme in place that will enable staff to be released for this training when we improve the rotas and increase the available operational hours.	