

Trust Board Meeting in Public28/11/2019TILE of PAPEREmergency Preparedness, Beapapea and Beapyory (EBBR)PAPER REF5.2			
<b>ITLE of PAPER</b> Emergency Preparedness, <b>PAPER REF</b> 5.2			
Roomana and Room (EDDD)			
Response and Recovery (EPRR)			
Self-Assessment 2019/20.			
<b>XEY PRIORITIES</b> Deliver the best possible response for each patient, first time			
Be a respected and influential system partner, nationally, regiona	Be a respected and influential system partner, nationally, regionally		
and at place			
Create a safe and high performing organisation based on openes	Create a safe and high performing organisation based on openess,		
ownership and accountability			
	The purpose of the paper is to inform the Trust Board of the		
PAPER improvement of Interoperability self-assurance from 'Non			
Compliance' to 'Substantial Compliance' prior to submission to N	HS		
England.			
or Approval D For Assurance D			
or Decision Discussion/Information			
UTHOR /     Jeevan Gill, Associate     ACCOUNTABLE     Nick Smith, Executive			
	DIRECTOR Director of Operations		
paper was previously presented at the Trust Board on the 26 <sup>th</sup> September 2019			
PREVIOUSLY AGREED AT: Committee/Group: Date:			
Trust Management Group 30/10/2019	30/10/2019		
<b>RECOMMENDATION(S)</b> The Trust Board are asked to <b>NOTE</b> the change of			
	compliance level for the EPRR self-assessment prior to		
sharing with the Regional EPRR NHS England team on th	sharing with the Regional EPRR NHS England team on the		
31 <sup>st</sup> October 2019 and note the next steps.			
RISK ASSESSMENT Yes No			
Corporate Risk Register and/or Board Assurance Framework			
If 'Yes' – expand in Section 4. / attached paper			
Equality Impact Assessment - [New]			
If 'Yes' – expand in Section 2. / attached paper			
Resource Implications (Financial, Workforce, other - specify)			
If 'Yes' – expand in Section 2. / attached paper			
egal implications/Regulatory requirements			
If 'Yes' – expand in Section 2. / attached paper			
ASSURANCE/COMPLIANCE			
Care Quality Commission1: Safe			
Choose a DOMAIN(s)			
IHSI Single Oversight Framework 4. Operational Performance	4. Operational Performance		
	2. Quality of Care (safe, effective, caring,		
responsive)			

#### 1.0 **OVERVIEW**

- 1.1 In September the Trust Board was presented with the findings following completion of the Emergency Preparedness, Response and Recovery (EPRR) Statement of Compliance as set out in the NHS England Core Standards and the Annual NHS EPRR self-assessment process.
- 1.2 The rating of the Core Standards was Substantial and Interoperability Non-Compliant. However following discussion with partners from other ambulance trusts it was felt the there was an error in the original worksheet. This was escalated to NHS England. This has now been ratified and following the transfer of information it resulted in an increased level of compliance for Yorkshire Ambulance Service for the interoperability standards.

## 2.0 TRUST COMPLIANCE 2019

2.1 The Yorkshire Ambulance Service has assessed itself as:

# SUBSTANTIALLY - compliant in the EPRR Core Standards and SUBSTANTIALLY - compliant for Interoperable Capabilities.

The Deep Dive around severe weather, long term adaption planning and control room resilience are **not rated this year**. An action plan has been developed for all partial and non-compliant elements, including those under the deep dive section even though the Trust will not be formally monitored on the delivery of these.

EPRR Assurance Area	Assurance Rating
EPRR Core Standards	Trust is <b>98%</b> * (56 fully compliant out of 57 standards) compliant.
Deep Dive – Severe Weather Long Term Adaption Planning Control Room Resilience	Trust is <b>83%</b> complaint. The below breaks down into the specific areas: Severe Weather – 100% Long Term Adaption Planning – 40% Control Room Resilience – 80%
Interoperable Capabilities	Trust is <b>92%</b> (151 fully compliant out of 164 standards) which is deemed substantially compliant. Each of these areas has an action plan in place to address.

Note: \*Trust achieved 96% in 2018

#### 3.0 EVIDENCE

3.1 To demonstrate compliance the Trust must be able to provide the information and data as requested within the self-assessment matrix document that withstands its own internal scrutiny and that of NHS England and Commissioners.

### 4.0 NEXT STEPS

- 4.1 The self-assessment matrix and statement of compliance was submitted to the Regional EPRR NHS England team on the 31<sup>st</sup> October 2019.
- 4.2 The Accountable Emergency Officer (AEO), along with the Associate Director of Operations will attend the Local Health Resilience Partnership 'Confirm and Challenge' meetings week commencing 18 November 2019. If no changes are required the final self-assessment matrix and statement of compliance will be submitted to NHS England.
- 4.3 If any changes are required to the self-assessment from the 'Confirm and Challenge" then the Trust Board will be informed of this on the 28<sup>th</sup> November prior to the final submission to NHS England in December 2019.
- 4.4 The AEO and Associate Director of Operations will ensure the actions within the action plan are completed and demonstrate this as part of the Trust's governance and monitoring structures.

#### 5.0 **RECOMMENDATIONS**

5.1 The Trust Board are asked to **NOTE** the change of the YAS EPRR self-assessment and statement of compliance.