



MEETING TITLE Trust Board Meeting in Public		MEETING DATE 30/07/2020	
TITLE of PAPER	EPRR and Special Operations Six-Monthly Report	PAPER REF	TB20.029
KEY PRIORITIES	Create a safe and high performing organisation based on openness, ownership and accountability Deliver the best possible response for each patient, first time Be a respected and influential system partner, nationally, regionally and at place		
PURPOSE OF THE PAPER	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; October 2019 up to and including the end of March 2020.		
For Approval	<input type="checkbox"/>	For Assurance	<input checked="" type="checkbox"/>
For Decision	<input type="checkbox"/>	Discussion/Information	<input type="checkbox"/>
AUTHOR / LEAD	John Holden, Head of EPRR and Special Operations	ACCOUNTABLE DIRECTOR	Nick Smith, Executive Director of Operations
DISCUSSED AT / INFORMED BY – include date(s) as appropriate [free text - please provide an audit trail of the development(s) / proposal(s) subject of this paper: see also guidance 3 overleaf]: Head of EPRR and Special Operations has 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 monitored by the Resilience Governance Group for compliance and progress.			
PREVIOUSLY AGREED AT:	Committee/Group:	Date:	
RECOMMENDATION(S)	The Board are updated and assured of the Trusts compliance and progress of the EPRR / Special Operations agenda.		
RISK ASSESSMENT		Yes	No
Corporate Risk Register and/or Board Assurance Framework amended <i>If 'Yes' – expand in Section 4. / attached paper</i>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Equality Impact Assessment <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input 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 checked="" type="checkbox"/>
Legal implications/Regulatory requirements <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input 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)		

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1.0 Purpose

1.1 To provide an update and assurance to the Trust Board on the Emergency Preparedness Resilience and Response (EPRR) agenda and Special Operations and associated work streams for the period: October 2019 up to the end of March 2020.

2.0 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.
- Maintaining Hazardous Area Response Team (HART)
- Maintaining Chemical, Biological, Radiological, Nuclear (CBRN) capability
- Maintaining Marauding Terrorist Attack (MTA) capability
- Maintaining Mass Casualty Vehicles (MCV)

2.2 The above forms part of NHS-E's EPRR Core Standards, as well as the Interoperable Capabilities standards.

3.0 Activity and Progress

3.1 Departmental Structure and Governance

3.1.1 The newly appointed Head of EPRR and Special Operations reports to the Associate Director (AD) of Operations – The Executive Director of Operations is the Trust's Accountable Emergency Officer (AEO).

3.1.2 The newly appointed Head of EPRR & Special Operations is currently conducting a full review of the department's role, structure and outputs and will submit a formal report listing all recommendations to the AD of Operations in due course.

3.2 Multi-Agency Working

3.2.1 The department continues to work closely with its partner organisations both in daily business as part of the Local Resilience Forums (LRFs)¹, Local Health Resilience Partnerships and JESIP (detailed in the following section). Work practices have evolved to accommodate COVID-19. Routine LRF has been suspended throughout the region since March 2020, but is beginning to return.

3.2.2. The EPRR Team engages with partners in relation to SAGs, covering regular and ad-hoc sporting and entertainment events across the region. These have also been suspended due to COVID-19 and the cancellation of all sporting fixtures, but are beginning to be discussed in light of future events once again being planned.

3.2.3. 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 JESIP - Working Together, Saving Lives

3.3.1. The Trust continues to work with partner organisations to ensure that JESIP is maintained and continues to be embedded across the region. There is a robust governance structure in place with three regional groups meeting on a regular basis. These groups are JESIP Yorkshire Strategic Leads Groups, JESIP Yorkshire Delivery Leads Groups and JESIP Yorkshire Control Room Delivery Leads group. The Strategic group reports directly into the LRFs and the both delivery groups are chaired by YAS.

3.3.2 Regional JESIP Command and Control Room has been held up until February 2020; however the training programme is now postponed due to COVID 19. Both training programmes are delivered to a Yorkshire & Humber wide audience including blue-light emergency services and a number of Category 1 and 2 responders, ensuring effective interoperability and cross-border engagement.

¹ This includes Strategic and Tactical Coordinating Groups (SCG, TCG) and Recovery Groups (RCG)s

3.4 BREXIT

3.4.1 The UK formally left the European Union (EU) on 31st January 2020. The Transition period is due to end on 31 December 2020. Work is ongoing in LRFs to monitor and manage the ongoing risks, and some LRFs have increased the risk RAG rating. Key areas being addressed in this transition period which will contribute to the planning and work stream development include: Law enforcement, data sharing and security; supplies of electricity and gas; and licensing and regulation of medicines

3.5 COVID-19

3.5.1 EPRR are currently supporting the Trust response to COVID-19. The LRF Strategic and Tactical Coordinating Groups have all been managed by the EPRR team to ensure a consistent approach. A member of the EPRR team has been embedded in the COVID-19 Strategic Incident Command Cell since March 2020; providing Strategic Advice to the Strategic Commander and wider Trust. This process will remain in place until September 2020, moving to virtual support from June 2020.

3.6 Events / Safety Advisory Groups (SAGs)

3.6.1 The majority of events have been cancelled due to C-19, including Tour de Yorkshire and Leeds Festival. EPRR managers are working closely with the SAGs with regards reimplementation of events.

3.7. Exercise and Testing

3.7.1 Appendix A lists the main exercises held during this period. Exercises conducted this year can be seen on the YAS ResWeb© Exercise Calendar.

3.8 EPRR Training and Education

3.8.1. Course Delivery October 2019 – March 2020

EPRR Training	Course	Total
JESIP	6	42
AIT Refresher	6	58
SORT Refresher	5	50
SORT Initial Training	0	0
AIT Initial Training	1	13
Structured Debrief Course	1	10
Business Continuity	0	0

3.8.2. Business Continuity Training

- All internal and external training was cancelled for Q4 and part of Q1 due to COVID-19.
- The BC Manager delivered a 2 day debrief training course to 6 HART and 4 Air Ambulance staff on the 12th and 13th May 2020. A further course was run on the 26th and 27th May 2020 and another scheduled for June 2020.
- The BC Manager was due to deliver Decision Model for Health training to the Humber Teaching NHS Foundation Trust on the 6th April. This training was cancelled due to the pandemic. This training will be rearranged subject to the requirements of the receiving Trust and social distancing requirements.
- BC training is available on the YAS247 portal: 1892 staff members have completed the course to date.

3.9 Exercises, Debriefs and lessons Identified

- 3.9.1 The Trust has a policy to exercise all level 1 BC plans on an annual basis. The 'BC Leads' day on the 21st November tested loss of Premises and Loss of ICT (see appendix B for Exercise Dashboard). The Trust remains compliant with its Policy Requirements for 2019 / 2020.
- 3.9.2 Planning has been taking place for the COVID-19 with a series of workshops, arranged and facilitated by the Head of EPRR and Special Operations. The BC team provided an administrative and supportive role to these events.
- 3.9.3 There was a plan to live test the loss of power in June 2021, this live test would have met the policy requirements for the 2020/2021 assurance, however due to C-19 this test has been postponed. If this is not reinstated then consideration will need to be given on an alternative exercise for the Trust to ensure Policy and ISO22301 requirements can be achieved for 2020/2021.

3.10 Business Continuity Plan Reviews

- 3.10.1 The Trust has a requirement to ensure all BC plans are reviewed on an annual basis. YAS is compliant with policy requirements. (see appendix B for BC plans dashboard).
- 3.10.2 The Trust has a Policy objective to review all Business Continuity Plans (including BIA's) on an annual basis; the following plans have been reviewed and published:

- HART
- EPRR
- Corporate Communications

The following departmental plans are currently under review or awaiting sign-off:

- HR
- ROC
- Procurement

The Reception/Switchboard plan and the ancillary services plan are currently in the development stage with the first draft of BIAs and BC Plans for these areas (no plan was previously held).

3.10.3 Site Specific BC plans

- All YAS ambulance stations have a site specific BC Plan, which were due for review in May 2020. The RGG on the 6th May approved a request to extend the review date of all station plans to May 2021. All plans will be updated and any learning from the pandemic incorporated in the 2021 review.
- Estates have commissioned a piece of work for technical drawings for the YAS estate. These will show the location of electricity and gas mains, stop cocks etc. these will be included in the business continuity folders at each station when they become available, prior to the pandemic these were approximately 2/3 completed.

3.11 BC Exercises October 2019 – March 2020

3.11.1 The Trust has a policy to exercise all level 1 BC plans on an annual basis. YAS is compliant with Policy Requirements (see appendix C for Exercise dashboard).

3.12 Events and Incidents.

3.12.1 The BC Team continue to encourage all departments to log a BC incident on DATIX, which are checked monthly by the BC team and all those specifically relating to Business Continuity are included in the Table at Appendix D. 155 incidents were reported of which 36 were actual business continuity incidents. This upward trend in reporting is very reassuring as it demonstrates that the Trust is increasingly embedding business continuity.

3.13 Special Operations

3.13.1. HART

- HART have recruited 3 bank staff from A&E Operations who remain fully compliant with competencies and are utilised to cover staff absence and secondments. YAS are the only Trust to introduce this nationally and it should be recognised as Best Practice if successful to ensure compliance.
- HART carried out numerous transfers of critically ill patients to Infectious disease units during C-19 response.
- HART supported the transfer model of moving patients to the Nightingale hospital. Due to Nightingale being stood down, HART have increased staffing numbers, which was diverted to create an RRV in support of A&E Operations.

3.13.2 HART shift fill October 2019 to March 2020

HART Activity Report	
Month	Shift Fill %
October	95%
November	95%
December	96%
January	100%
February	98%
March	98%

3.13.3 SORT and AIT

- YAS currently has 110 x trained CBRN staff (known as Special Operations Response Team – SORT) and 101 trained MTA staff (known as Ambulance Intervention Team – AIT). NHS-E require 12 SORT staff on duty in any one 24 hour period for CBRN and 10 AIT staff for MTA. These numbers are reported every 12 hours to NARU and monitored by NHS-E. Due to the COVID-19 response all Special Operations training courses have been cancelled, and after seeking advice from NARU all those staff who are currently still compliant, have had their skill sets extended by 4 months. This risk is being reviewed.
- Following the 17 x Acute Trust CBRN Audits in 2019, CBRN Awareness Training was provided to all trusts in November 2019. Interim audits were scheduled to take place early this year but have been put on hold due to COVID-19.
- ACCS capability remains extant after the recent re-stock.

HART Activity Report		
Month	AIT Shift Fill	SORT shift Fill
October	97%	100%
November	100%	100%
December	100%	97%
January	100%	100%
February	98%	100%
March	100%	100%

3.13.4 Yorkshire Air Ambulance

3.13.4.1 Between 1st October 2019 and 31st March 2020, YAA responded to 705 incidents. Key observations:

3.13.4.2 Nostell Priory is undergoing a structural extension to segregate the building into: Accommodation, Operations and management and Training/visitors. Access to operations will be prohibited from the training/visitors side to allow the charity to fulfil their requirements with the public without impacting on current operations. There has been a delay due to CV19 but the builders are now back on site and works are expected to be completed within the next 6-8 weeks.

3.13.4.3 YAA are due to take delivery of their two new Skoda Kodiaq RRVs. This has been delayed due to CV19. These RRVs will be owned by the YAA charity but will be insured and maintained by YAS. The vehicle branding/wrapping will be predominantly YAA with the inclusion of Ambulance external safety features.

3.13.4.4 CV19 and YNH support meant that all YAA operations were suspended whilst the team integrated with and supported the move to the Nightingale Roster. All YAA staff provided 24/7 cover across 2 shifts and also performed a small number of inter facility transfers (IFT) between acute trusts. Due to the de-escalation of YNH, all YAA operatives were assimilated back into YAA operations after three weeks on the YNH roster.

3.13.4.5 YAA are currently operating one of the two aircraft due to scheduled maintenance. This schedule was brought forward during the teams secondment onto the YNH roster and with the uncertainty of duration was deemed necessary.

3.13.4.6 Development opportunities have been offered to existing HEMS operatives to become HEMS Clinical Supervisors to assist with tasks for the Clinical Operations Manager whilst inserting a second tier of supervisory support. Four

staff took up the opportunity and their appointment has been staggered due to ongoing circumstances. They remain in position and this was at no additional cost to the trust.

3.13.4.7 YAA completed their BC exercise in February and the completed debrief form is with the BC team. The exercise looked at invoking their own BC plan during critical failures in vital services.

3.13.4.8 Blood supply was extended to Topcliffe so is now being operated out of both air bases for the utilisation of HEMS Paramedics on both the aircraft or RRV during downtime.

3.13.4.9 8 x YAA staff attended the services Mental Health First Aider course, in conjunction with Mental Health England. This was well received and ensures that the wellbeing of the team is looked after.

3.14 Resilience Training

3.14.1 Resilience training for all commanders within YAS is delivered by the YAS Academy. CPD compliance is coordinated and managed by the Resilience Educators and assured by the Command and Resilience Education/CPD Manager. In readiness for the EPRR Submission later on in the year, YAS Academy have now been asked to provide a monthly dashboard detailing Commander compliance which will be presented at RGG. Details of the education and learning requirements for Commanders can be found in the Commander Framework.

4.0. Horizon Scanning

4.1. Humber

Humber LRF work stream programme including:

- Review National Security Risk Assessment and update Community Risk Register as required
- Self-assess against all National Standards
- Develop Black Start Plan
- Scope and commence planning for Exercise Wilberforce 2
- Regional JESIP Validation exercise – scope and commence planning
- Resilience Direct – phase 2: Movement of ResWeb functionality to RD platform

4.2. West Yorkshire

- Currently still in the response phase but will start to focus on recovery in the next few weeks
- Normal business (Sub Group planning) not expected to return until late June early July albeit may not be face to face and may rely on Teams/Skype/Teleconference
- No exercises planned to take place in the next 3 months.
- No SAG meetings currently arranged but future meetings will be held remotely
- Leeds Festival and Leeds Carnival have been cancelled by the organisers

4.3. **North Yorkshire.**

- NY LRF COVID-19 Recovery Coordinating Group established and will continue for as long as deemed applicable based around two recovery and renewal work streams – economic impacts and humanitarian (or community) impacts aim to develop a LRF recovery and renewal strategy. An initial recovery and renewal strategy in place.
- LRF sub groups will commence again shortly
- NYLRF Exercising 2020 calendar to be able to take place again in the near future this is dynamic and dependent upon COVID-19 restrictions
- Safety Advisory Groups put on pause at moment however (as of this email) SAGs such as York now beginning to look at how events could be managed such as Horse racing, Football etc. Horse racing looking at having a new Racing fixtures calendar for 2020 and attempting to hold some of the larger planned Festivals all be it behind closed doors.

4.4 **South Yorkshire**

- SYLRF suspended routine activity with the onset of COVID-19 on the declaration of a Major Incident in March.
- LRF sub-groups are now beginning to resume with recovery at the heart of SYLRF's activity.
- Training and exercising within the region may begin from September 2020, with Ex AMPHORA being the main event. Phase 1 of Ex AMPHORA will be a Strategic and Tactical table top exercise followed by the LIVEX, which is currently scheduled to take place in March 2021.

5.0 **Risk - YAS Assurance Rating**

5.1 **NHS England EPRR Statement of Compliance**

YAS are **substantially compliant** against the EPRR Core Standards. YAS submitted its EPRR Core Standards review in November 2019. The action plan was created to address 19 x standards across 9 x domains, 3 of which were not included in the main bodies of Core Standards, Deep Dive or Interoperable Capabilities. Progress of the action plan has been impacted upon by COVID-19, but 4 of the 19 actions have now been completed. Work continues to address the remaining action points and the COVID-19 risks are being mitigated where possible. Appendix E summarises the Action Plan to date.

6.0 Appendices

Appendix A - EPRR Exercise Summary

Appendix B - BC Dashboard

Appendix C - BC Exercise Dashboard

Appendix D - Business Continuity Events and Incidents

Appendix E - EPRR Core Standards Action Plan

Appendix A EPRR Exercise Summary Oct 2019 - March 2020

COMAH

	North	East	South	West
Totals	0	1	1	2

SAG Meetings

	North	East	South	West
Totals	15	3	13	17

Exercise Summary

<u>Exercise Name</u>	<u>Type (i.e. Live / Table Top)</u>	<u>Date</u>	<u>Region</u>
NY LRF Operational Annual Exercise	Table top	14 th November 2019	North
WY LRF Exercise Harati	Table Top	19 th November 2019	West
Exercise EREBUS	LIVE (Night)	26 th November 2019	West
COMAH Exercise (Hanson Logistics)	LIVE/Table Top	4 th December 2019	West
COMAH Exercise (Perneco)	Table Top	4 th December 2019	East
SY Police Plato Exercise	LIVE	4 th February 2020	South
SY Police Plato Exercise	LIVE	7 th February 2020	South
COMAH Exercise (Esseco)	CANCELLED	7 th April 2020	West
COMAH Exercise (Victrex) LIVE	CANCELLED	22 nd April 2020	South

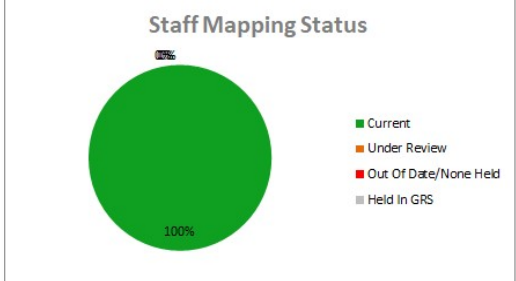
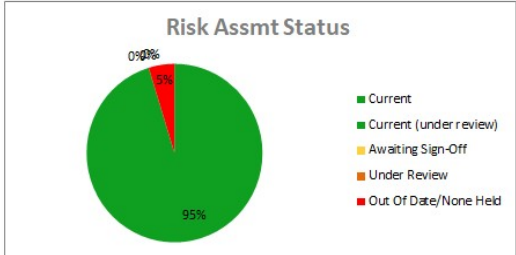
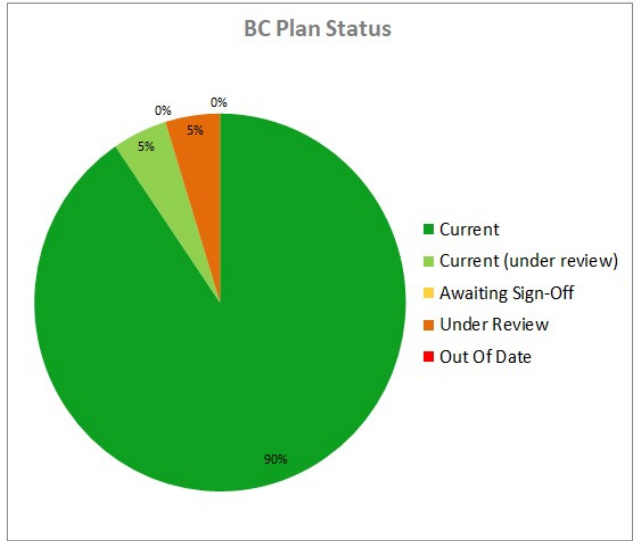
Appendix B

Yorkshire Ambulance Service Business Continuity Dashboard

Produced by the YAS Business Continuity Team

07/05/2020

Department	BC Plan & BIA	Risk Assmnt	Staff Mapping
EOC (Emergency Operations Centre)	Current	Current	Current
ICT (Information, Communication & Technology)	Current	Current	Current
Resilience	Current	Current	Current
A&E Operations	Current	Current	Out Of Date/None Held
PTS (Patient Transport Service)	Current	Current	Current
Fleet	Current	Current	Current
Estates	Current	Current	Current
Procurement	Current (under review)	Current	Current
Standards & Compliance	Current	Current	Current
Clinical	Current	Current	Current
Corporate Communications	Current	Current	Current
Private & Events	Current	Current	Current
NHS 111	Current	Current	Current
Capacity Planning	Current	Current	Current
Business Intelligence	Current	Current	Current
Air Ambulance	Current	Current	Current
Community Resilience	Current	Current	Current
Finance	Current	Current	Current
HR (Human Resources)	Under Review	Out Of Date/None Held	Current
Education & Learning	Current	Current	Current
HART Team	Current	Current	Current
ROC	Under Review	Under Review	Current



KEY:

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

Testing & Exercising Status
 Completed
 Completed (aw siting 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

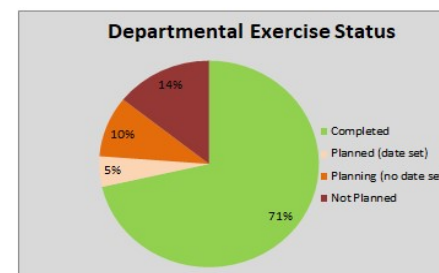
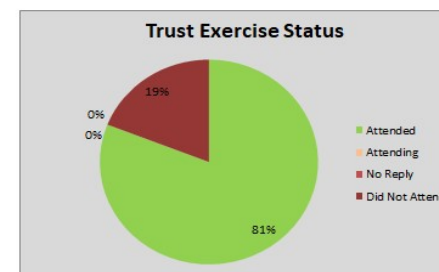
Appendix C

Yorkshire Ambulance Service - Exercising Dashboard - 2019 - 2020

Produced by the YAS Business Continuity Team

07/05/2020

Department	Trust Exercise Status	Departmental Exercise Status	Date of Exercise (mm/yy)	Brief summary of exercise (e.g. what is being tested - loss of Staff/Premises/ICT/Supplies/Vehicles etc.)
EOC (Emergency Operations Centre)	Attended	Completed	Ongoing	Exercise programme running throughout the year testing each team within EOC
ICT (Information, Communication & Technology)	Attended	Completed	Jan 2019	Exercise Cleric, jointly held with PTS testing loss of Cleric system.
Resilience	Attended	Completed	Apr 2019	Exercise Remote Robin, tested use of RD when responding to adverse weather scenario causing loss of staff.
A&E Operations	Attended	Completed	Jan 2019	Exercise Alcatraz 3 testing response to lockdown scenario.
PTS (Patient Transport Service)	Attended	Completed	Mar 2019	Exercise Alcatraz 5 testing response to lockdown scenario.
Fleet	Attended	Completed	Jan 2019	Exercise Alcatraz 2 testing response to lockdown scenario.
Estates	Attended	Completed	Feb 2019	Exercise Alcatraz 4 testing response to lockdown scenario.
Procurement	Attended	Completed	Jun 2019	Exercise Alcatraz 7 testing response to lockdown scenario.
Corporate Communications	Attended	Completed	Apr 2020	Attended Trust exercise at BC leads day on 21st Nov 2019. Ex battle Creek held in team meeting Spring 2020.
NHS 111	Attended	Completed	Jan 2020	Exercise held 21st Jan 2020 to test Callflex site shutdown
Air Ambulance	Attended	Completed	Jan 2020	Attended Trust exercise at BC leads day on 21st Nov 2019.
HART Team	Attended	Planned (date set)	Apr 2020	Attended Trust exercise at BC leads day on 21st Nov 2019. Exercise planned Spring 2020 to test loss of water/drainage in ureo for actual planned event.
Community Resilience	Attended	Completed	Mar 2019	Exercise EagleHasLanded tested response to adverse weather scenario and loss of staff.
Clinical	Attended	Completed	Feb 2019	Exercise Greenfinch, testing loss of supply chain resulting in shortage of medical supplies.
Capacity Planning & Scheduling	Attended	Completed	Jul 2019	Exercise Alcatraz 6 testing response to lockdown scenario.
Quality Governance Performance Assurance	Attended	Completed	Feb 2019	Exercise run by R Harrington using Alcatraz as a template
Private & Events	Did Not Attend	Planning (no date set)		No exercise held to date
Finance	Attended	Planning (no date set)		Attended Trust exercise at BC leads day on 21st Nov 2019.
HR (Human Resources)	Did Not Attend	Not Planned		No exercise held to date
Education & Learning	Did Not Attend	Not Planned		No exercise held to date
Business Intelligence	Did Not Attend	Not Planned		No exercise held to date



Appendix D – BC Events and Incidents

Incident Number	Incident Date	Incident Location
INC-67399	24/10/2019	Beverley Ambulance Station
INC-67392	24/10/2019	Longley Ambulance Station
INC-67941	07/11/2019	Batemoor Ambulance Station
INC-67842	08/11/2019	Doncaster Ambulance Station
INC-68958	11/12/2019	Springhill 1 -2 -Trust HQ - Wakefield
INC-68960	11/12/2019	EOC
INC-69180	17/12/2019	Springhill 1 -2 -Trust HQ - Wakefield
INC-69372	21/12/2019	Wakefield Ambulance Station
INC-70683	28/01/2020	EOC
INC-71268	13/02/2020	Rotherham Call Flex
INC-71380	15/02/2020	Air Support Unit (Nostell Priory)
INC-71429	17/02/2020	Fleet Hull Workshop
INC-71806	21/02/2020	Menston Ambulance Station
INC-72355	13/03/2020	EOC
INC-72379	15/03/2020	Beverley Ambulance Station
INC-72727	16/03/2020	Scarborough Ambulance Station
INC-72484	18/03/2020	EOC

Appendix E – EPRR Core Standards

Summary of EPRR Core Standards Action Plan; Progress Report

Ref	Standard	Self Assessment	Requirement	Lead	Timescale	Comment
(a)	(b)	(c)	(d)	(e)	(f)	(g)
Domain: Training and Exercise						
28	Strategic & Tactical Responder Training	Partially Compliant	<p>Strategic and tactical responders must maintain a continuous personal development portfolio demonstrating training in accordance with the National Occupational Standards, and / or incident / exercise participation.</p> <p>Evidenced by:</p> <ul style="list-style-type: none"> • Training records • Evidence of personal training and exercising portfolios for key staff 	Academy	Q3 - 2020	<p>Commanders' CPD requirements are stated in the Trust' Commander Framework.</p> <ul style="list-style-type: none"> • Auditing of Commanders' CPD is currently only achieved via the PDR process. <ul style="list-style-type: none"> ○ Plan for Academy to monitor CPD was submitted through a BC for 4 x Educators. Only 2 were approved, so plan was taken at risk by AD. A further BC is currently with AEO – pending approval. • Alternate options for audit: <ul style="list-style-type: none"> ○ Use of CPD platform on ResWeb – Academy to scope and update at Q2 report. ○ Use of RD – Academy to scope and update at Q2 report. ○ External validation by peer group – Academy to scope and update at Q2 report.
Domain: Ambulance Resilience (Deep Dive)						
8	Resource Tracking	Compliant	The trust can continue to track operational resources in the event of failure.	Head of EOC	Q1 - 2020	Terra-track is operational and has been tested during a planned down-time.
11	Evacuation	Partially Compliant	The Trust has the capability to execute a coordinated evacuation and is able to establish capacity at the fall-back facilities, and be operational within 1	Head of EOC	Q1 – 2020	<p>Refers to York & Call-flex.</p> <p>Completed. BC Plans updated</p>

Ref	Standard	Self Assessment	Requirement	Lead	Timescale	Comment
(a)	(b)	(c)	(d)	(e)	(f)	(g)
			<p>hour.</p> <p>Evidenced by:</p> <p>Disaster Recovery:</p> <ul style="list-style-type: none"> • Processes in place which ensure staff are clear on the actions to take in the event of an evacuation • Documented plans for staged evacuation • Documented plans for immediate escalation to other site / sites • Documented pre-plans covering how dispatch function will be taken up within other site / sites • Documented plans to inform “buddy” sites of potential support requirement and likely overflow of calls • Pre-plans to increase staffing levels (short term) in remaining site / sites • Plans to ensure sustainability of alternative site / sites during outage of failed site <p>Business Continuity:</p> <ul style="list-style-type: none"> • Evidence of exercise / practice scenarios 		Q3 – 2020	Remaining: Scoping remote CAD via client zero solution.
12	EOC	Partially Compliant	<p>The trust has arrangements for both short (<24 hrs) and longer term (> 24 hrs) loss of control room estate for each control room.</p> <p>Evidenced by:</p> <p>Disaster Recovery:</p> <ul style="list-style-type: none"> • Ability for each control to work autonomously • Appropriate arrangements for immediate 	Head of EOC	<p>Q1 – 2020</p> <p>Q3 – 2020</p>	<p>Refers to York & Call-flex.</p> <p>Completed. BC Plans updated</p> <p>Remaining: Scoping remote CAD via client zero solution.</p>

Ref	Standard	Self Assessment	Requirement	Lead	Timescale	Comment
(a)	(b)	(c)	(d)	(e)	(f)	(g)
			<p>and staged evacuation (see number 11 above)</p> <ul style="list-style-type: none"> • Demonstrate an understanding of capacity, location and capability of fall-back desks • Pre-plans to increase staffing at alternative site (initial response) • Pre-plans to move staff from failing site to alternative site <p>Business Continuity:</p> <ul style="list-style-type: none"> • Failover tested regularly (minimum bi-annually) • Evidence of exercise / practice scenarios • The trust has sufficient fall-back capacity at alternative site / sites (including accommodating the loss of their largest control room for a sustained period of time e.g. days) • Sufficient dispatch positions with ICCS or desk top set access • All desks identified as part of the system always in a "ready" state for control room functions" 			
HART						
H8	Six operational HART staff on duty	Compliant	Organisations must maintain a minimum of six operational HART staff on duty, per unit, at all times.	Head of EPRR & Special Ops	Q1 – 2020	<p>HART has developed resilience within the team by:</p> <ul style="list-style-type: none"> • Recruiting - 2 HART vacancies • Establishment of 3 x relief/bank HART trained staff (5 total) <p>Future work to scope viability of staffing 2 x DCAs from Manor Mill with crews being HART trained.</p>
MTFA (MTA)						
M11	Staff training requirements	Partially Compliant	Strategic 100% Tactical 100% front line operations expected fully compliant by March 2020	Academy	Q4 – 2019	<p>As at May 2020:</p> <p>119 x Commanders attended to date.</p>

Ref	Standard	Self Assessment	Requirement	Lead	Timescale	Comment
(a)	(b)	(c)	(d)	(e)	(f)	(g)
					Q2 – 2020	Trust decision that Operational Commanders (CS – excluding HART) were not required to attend the MTA Commander course as elements of MTA is covered on the 1 day Operational Commander Foundation course). Academy requested to update at Q2 Report on the impact of C-19 on this action and outline how it will deal with the risk (Transfer, Tolerate, Treat, Terminate).
M23	10 minute response time	Partially compliant	Action to review deployment options / response teams / model needs to be tested to ensure response times are met quarter 4	Head of EPRR & Special Ops	Q4 – 2019 Q2 - 2020	Deployment options: Pending review. One issue is the separation of AIT/SORT personnel from EBA, which is centralised. HART have the ability to respond (NTM) within 10 minutes, but YAS only have 1 x HART Team on duty. Last major test was Ex HISTORIAN. Ex AMPHORA (SY Police) was postponed during C-19, pending re-schedule. Update will review laydown of MTA capability, response time, and will identify key risks, for consideration and escalation to TEG.
CBRN						
B5	Commander Competence	Partially compliant	Courses for CBRN command are planned and expected to be fully compliant by Q 2020/21	Academy	Q2 - 2020	As at May 2020, 19 x staff attended YAS CBRN Commander Course. Academy requested to update at Q2 Report on the impact of C-19 on this action and outline how it will deal with the risk (Transfer, Tolerate, Treat, Terminate).
Command and Control (C2)						
C20	Tactical commander	Compliant	Original Action Plan incorrectly listed ' <i>Business case to ensure sufficient</i>	Academy	Q4 – 2019	Tactical Commanders attend the NARU Tactical Commander course which is aligned to the National

Ref	Standard	Self Assessment	Requirement	Lead	Timescale	Comment
(a)	(b)	(c)	(d)	(e)	(f)	(g)
	competence - National Occupational Standards		<i>resources to monitor and measure CPD compliance by quarter 4 2019/20'</i> as the action plan. This standard is linked to training standards and NOT CPD compliance.			Occupational Standards. This is outlined as a mandatory requirement in page 29 of the Commander Framework.
C22	Operational commander competence - National Occupational Standards	Partially Compliant	Original Action Plan incorrectly listed ' <i>Business case to ensure sufficient resources to monitor and measure CPD compliance by quarter 4 2019/20'</i> as the action plan. This standard is linked to training standards and NOT CPD compliance.	Academy	Q4 – 2019 Q2 – 2020	YAS Academy ran a foundation Operational Commander Course, providing interim competence, and currently in discussion to secure sufficient places on NARU (4 day) Operational Commander's course. Academy requested to update at Q2 Report on the impact of C-19 on this action and courses booked with NARU, and outline how it will deal with the risk (Transfer, Tolerate, Treat, Terminate). Course requirement will be affected by outcome of TBW.
C23	Operational commander competence - nationally recognised course	Partially compliant	Original Action Plan incorrectly listed ' <i>Business case to ensure sufficient resources to monitor and measure CPD compliance by quarter 4 2019/20'</i> as the action plan. This standard is linked to training provision and NOT CPD compliance.	Academy		As above
C24	Commanders - maintenance of CPD	Partially compliant	Business case to ensure sufficient resources to monitor and measure CPD compliance by quarter 4 2019/20	Academy	Q4 – 2019 Q2 – 2020 Q2 – 2020	As per Ref 28: Commanders' CPD requirements are stated in the Trust' Commander Framework. <ul style="list-style-type: none"> • Auditing of Commanders' CPD is currently only achieved via the PDR process. <ul style="list-style-type: none"> ○ Plan for Academy to monitor CPD was submitted through a BC for 4 x Educators. Only 2 were approved, so plan was taken at risk by AD. A further BC is currently with AEO – pending

Ref	Standard	Self Assessment	Requirement	Lead	Timescale	Comment
(a)	(b)	(c)	(d)	(e)	(f)	(g)
						<p>approval.</p> <ul style="list-style-type: none"> • Alternate options for audit: <ul style="list-style-type: none"> ○ Use of CPD platform on ResWeb – Academy to scope and update at Q2 report. ○ Use of RD – Academy to scope and update at Q2 report. ○ External validation by peer group – Academy to scope and update at Q2 report.
C25	Commanders - exercise attendance	Partially compliant	Original Action Plan incorrectly listed ' <i>Business case to ensure sufficient resources to monitor and measure CPD compliance by quarter 4 2019/20</i> ' as the action plan. This standard is linked to internal/external exercise availability and NOT CPD compliance.	Academy	Q4 – 2019 Q2 – 2020	<p>Current training/exercise programme suspended due to C-19.</p> <p>Update on exercise calendar will be produced by EPRR & Special Ops for Q2 Report</p>
C26	Training and CDP - suspension of non-compliant commanders	Partially compliant		Academy	Q2 – 2020	<p>Update as at May 2020 – Risk is being TOLERATED.</p> <p>Academy requested to update at Q2 Report on the BC review that is with AEO, and outline how it will deal with the risk (Transfer, Tolerate, Treat, Terminate).</p>
C27	Assessment of commander competence and CDP evidence	Partially compliant		Academy	Q2 – 2020	<p>Update as at May 2020 – Risk is being TOLERATED.</p> <p>Academy requested to update at Q2 Report on the BC review that is with AEO, and outline how it will deal with the risk (Transfer, Tolerate, Treat, Terminate)..</p>
J8	Awareness of JESIP - Responders	Partially compliant		Academy	Q2 – 2020	<p>JESIP underpins all training and courses, but there is no mandatory annual refresher.</p> <p>Academy requested to update at Q2 Report on possible use of e-learning through ESR (to be discussed and agreed through PGB)</p>

Ref	Standard	Self Assessment	Requirement	Lead	Timescale	Comment
(a)	(b)	(c)	(d)	(e)	(f)	(g)
Actions Supernumerary to the Core Standards: Long Term Adaptation Planning						
16	Risk Assess	Compliant	Evidence that the there is an entry in the organisation's risk register detailing climate change risk and any mitigating actions	Head of Estates	Q1 – 2020	Completed and entered on the Trust Risk Register
18	Building Adaptations	Partially compliant	The organisation has an adaptation plan that includes suggested building modifications or infrastructure changes in future	Head of Estates	Q3 – 2020	Update as at May 2020: Climate change adaption plan and a flood risk assessment are complete. This is ongoing work, covering 110 buildings and around £80k of funding for external assistance for work strands to enable adaption plans to be produced for the Estate. Update on progress requested for Q3 report.
19	Flooding	Partially compliant	Areas are identified in the organisations adaptation plans that might benefit drainage surfaces, or evidence that new hard standing areas considered for SUDS	Head of Estates	Q3 – 2020	Update as May 2020: This work is included as per Ref 18. Update on progress requested for Q3 Report.