

Report to the NHS Somerset Clinical Commissioning Group on 26 November 2020

Title: Emergency Planning, Resilience and Recovery (EPRR) Self Assessment Assurance Update Report 2020	Enclosure G
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Summary and Purpose of Paper

The NHS England Core Standards for Emergency Preparedness, Resilience and Response (EPRR) are the minimum standards which NHS organisations and providers of NHS funded care must meet. Every year commissioners and providers have to complete a self-assessment.

As all NHS organisations are preparing for a potential further wave of COVID19, as well as seasonal pressures and EU Exit, NHS England and NHS Improvement (NHS EI) have refined the process to focus on three areas:

- 1 Progress made by organisations that were reported as partially or non-compliant in the 2019/20 process. In 2019/20 Somerset CCG, Yeovil District Hospital NHS Foundation Trust and Taunton and Somerset NHS Foundation Trust were rated as Fully Compliant. Somerset Partnership NHS Foundation Trust was rated as Substantially Compliant, not meeting three of the standards.
- 2 The process of capturing and embedding the learning from the first wave of the COVID19 pandemic
- 3 Inclusion of progress and learning in winter planning preparations

The attached report provides a summary of assurance for Somerset Clinical Commissioning Group, Yeovil District Hospital NHS FT and Somerset NHS FT. A statement of compliance for 2020 is attached to the report as Appendix 1

Recommendations

The Governing Body is asked to:

- note the results of the assurance process for 2020 and the position of the CCG and its partners
- approve the CCG's Statement of Compliance for 2020 (Appendix 1)
- note that the Clinical Executive Committee will be responsible for signing off the EPRR policy at its December meeting

Impact Assessments – key issues identified				
Equality	Equality and Diversity is considered in focusing planning on vulnerable groups who may be at risk in the event of an adverse incident. During any incident the vulnerabilities of people affected are considered as part of the response. For example, during the pandemic response people with vulnerabilities to the virus were identified on the shielded patient list and provided with additional support.			
Quality	A key principle of EPPR planning is to ensure that controls and assurances are in place to manage the identified community risks and to minimise disruption and maintain the quality of services as far as possible.			
Privacy	All partner agencies in Somerset are signatories to the Somerset Information Sharing Protocol.			
Engagement	The Emergency Planning and Resilience Policy is published on the NHS Somerset CCG website. The LHRP provides the forum for consultation on the development of plans.			
Financial / Resource	Resources have been identified within the CCG budget for emergency planning and business continuity.			
Governance or Legal	The CCG's Legal duties in relation to Emergency Preparedness Resilience and Response (EPRR) are set out in section 4 of the Emergency Planning and Resilience Policy.			
Risk Description	There are no significant risks to identify in relation to the compliance position. Risks have been identified in relation to each local plan and linked to the Local Resilience Forum Community Risk Register where appropriate.			
Risk Rating	Consequence	Likelihood	RAG Rating	GBAF Ref
	n/a	n/a	n/a	n/a

**EMERGENCY PLANNING RESILIENCE AND RESPONSE
SELF ASSESSMENT ASSURANCE AND
STATEMENT OF COMPLIANCE 2020/21**

1	INTRODUCTION
1.1	The NHS England and NHS Improvement (NHSEI) Core Standards for Emergency Preparedness, Resilience and Response (EPRR) are the minimum standards which NHS organisations and providers of NHS funded care must meet. Every year commissioners and providers have to complete a self-assessment.
1.2	By exception, as all NHS organisations are preparing for a potential further wave of COVID19, as well as seasonal pressures and EU Exit, NHS England and NHS Improvement (NHS EI) have refined the process for 2020/21 to focus on the following areas: <ol style="list-style-type: none"> 1 Progress made by organisations that were reported as partially or non-compliant in the 2019/20 process 2 The process of capturing and embedding the learning from the first wave of the COVID19 pandemic 3 Inclusion of progress and learning in winter planning preparations 4 Chemical, Biological, Radiological and Nuclear (CBRN) Audits
1.3	The below provides a summary of assurance for Somerset Clinical Commissioning Group, Yeovil District Hospital NHS FT and Somerset NHS FT against these three areas. Attached, at Appendix 1, is the annual Statement of Compliance, which is presented to the Governing Body for approval.
2	PROGRESS OF PARTIALLY OR NON COMPLIANT ORGANISATIONS
2.1	Somerset Clinical Commissioning Group
2.1.1	Somerset CCG was awarded full compliance for the 2019/20 process. There have been no changes and the CCG remains compliant with all the EPRR core standards.
2.1.2	Notable achievements/ improvements in the last 12 months include: <ul style="list-style-type: none"> • Appointment of Incident Director to ensure executive level of leadership to respond to the incident • Expansion of on call capacity and capability to be a more robust system • Delivery of refresher training at all levels to respond to the incident • The CCG had already developed a protocol to run a virtual ICC, which has now been tested and embedded. Staff to run the ICC have been recruited to ensure that the ICC has resilience through to 2021 as staff have returned to their BAU roles

	<ul style="list-style-type: none"> • The strong partnerships already developed through the Somerset Health and Social Care Emergency Planning Group stimulated excellent collaboration and information sharing at the onset of Covid19 • The establishment of a Covid19 response page on NHS Futures Platform to record and share information • As a consequence of business continuity planning, staff were prepared for remote working at short notice. This has been developed through the digital team, the adoption of MSTeams and a cultural approach of support to staff to work remotely • A strong incident coordination team has been enhanced and developed supported by a cell structure which has strengthened the CCG's resilience for managing wave 2, along with Winter, EU Exit and any other incident that may arise • Creation of task and finish cells to have nominated subject matter experts who are able to respond quickly to priority risks, issues and questions as they arise. Some task and finish cells are expected to be stood up for the length of the Covid19 response (eg PPE), whereas others will exist to respond to specific questions as they arise. Generic Terms of Reference were developed for these groups • Clear decision making and recording process developed for task and finish cells with clear escalation routes for decision at an executive level and maintain principles of subsidiarity • Restoration has become a dynamic process which has run in tandem with the incident response with the recovery of services being closely linked to learning from the response and new ways of working adopted during the pandemic • We have adopted an approach to learning based on continual improvement. We have used some fixed events such as workshops, surveys and debrief events to build our learning and develop our incident response, as well as using regular forums, such as the system tactical calls, to identify issues and respond quickly to find and adopt solutions. The key has been to delegate decision making to the appropriate forum or executive level and then record these decisions and actions accordingly.
2.2	Yeovil District Hospital NHS Foundation Trust
2.2.1	Yeovil District Hospital NHS FT was awarded full compliance for the 2019/20 process. The position remains the same and we are assured that the Trust is compliant with all the core standards.
2.2.2	<p>Notable achievements/ improvement in the last 12 months include:</p> <ul style="list-style-type: none"> • Improved system working • Completion of all outstanding business continuity work relating to previous audit undertaken by BDO • Greater trust-wide engagement at all levels with business continuity planning • Temporary increase in EPRR lead hours; however work is still needed to create a support/ succession mechanism for this role • Active participation in Somerset system response to Covid19

2.2.3	EPRR and CBRN training have suffered due to Covid19 response/ restrictions but the Trust remains compliant as confirmed by the CBRN Audit held on 16 October 2020. Plans are in place regarding e-learning, and the situation will be closely monitored to ensure the Trust remains compliant going into next year.			
2.3	Somerset NHS Foundation Trust			
2.3.1	You will be aware that Taunton and Somerset NHS Foundation Trust and Somerset Partnership NHS Foundation Trust merged on 1 April 2020 to form the Somerset NHS Foundation Trust. NHS England and NHS Improvement and Somerset CCG have agreed the assessments awarded during the 2019/20 process can be carried forward into the new merged organisation. A number of EPRR actions were taken in advance of the merger to ensure continued resilience in the event of a critical or major incident.			
2.3.2	<p>Notable achievements/ improvements include:</p> <ul style="list-style-type: none"> • An EPRR Strategic Group oversees the resilience work • The development of a three tiered integrated command and control structure for on call managers has proved effective • The development of a Strategic EPRR Policy, and Tactical Response Plans for the Acute Hospital and Community/ Mental Health Service, along with a number of other new plans, support the Trust's Major Incident Response Plan • The continual maintenance of an EPRR specific Risk Register • Active participation in Somerset system response to Covid19 			
2.3.3	Whilst Taunton and Somerset NHS Foundation Trust was awarded full compliance for 2019/20, Somerset Partnership NHS Foundation Trust was assessed as substantially compliant for 2019/20. Progress has been made on the three standards not meeting the level required as follows:			
	Core Standard	Level of compliance	Actions required to be fully compliant	Due date
	52. The organisation's Business Continuity Management systems are monitored, measured and evaluated against established Key Performance Indicators. Reports on these and the outcome of any exercises, and status of any corrective action, are annually reported to the board.	Amber	A new Joint Business Continuity Management policy and procedures is being developed building on the Covid-19 lessons being learned. In the meantime existing business continuity arrangements and specific contingency plans remain in place across the organisation. A new Tactical Business Impact Analysis and risk assessment tool were developed and were being implemented when Covid-19 emerged. This will inform new KPIs (Key Performance Indicators) which will be included in the new merged policy.	March 2021
	55. The organisation has in place a system to assess the business continuity	Green	The former TST Suppliers' Checklist is now being used by the merged Trust's procurement	Complete

	plans of commissioned providers or suppliers; and are assured that these providers' business continuity arrangements work with their own		and supplies functions and has been well tested during the Covid 19 response	
	66. Internal CBRN training is based upon current good practice and uses material that has been supplied as appropriate. Training programmes should include training for PPE and decontamination	Amber	The CBRN training programme has been delayed due to operational pressures arising from the Covid response. It is not possible to use the equipment for training due to viral risks. A new video training package is currently being developed by the CBRN trainers	30.12.20
2.3.4	From attendance at Trust EPRR meetings, discussions and on reviewing the Trust's evidence, Somerset CCG is confident that Somerset NHS Foundation Trust meets the core standard requirements.			
3	IDENTIFICATION AND APPLICATION OF LEARNING FROM THE FIRST WAVE OF THE COVID19 PANDEMIC			
3.1	Somerset CCG			
3.1.1	Creation of system wide task and finish cells to have nominated subject matter experts who are able to respond quickly to priority risks, issues and questions as they arise. Some task and finish cells are expected to be stood up for the length of the Covid19 response (eg PPE), whereas others will exist to respond to specific questions as they arise. Generic Terms of Reference were developed for these groups. Clear decision making and recording process developed for task and finish cells with clear escalation routes for decision at an executive level and maintain principles of subsidiarity.			
3.1.2	During May 2020, Somerset CCG undertook a staff survey inviting staff to provide their insights into the Covid19 response to enable us to learn from them and, where applicable, identify areas of best practice or requiring improvement to incorporate into our future ways of working. The survey concentrated on issues that went well, the difficulties faced, what could be improved or have been done better, and what changes should continue.			
3.1.3	Building on the above, Somerset CCG commissioned the Academic Health Science Network (AHSN) to undertake a survey of staff engaged in the response to capture the learning for the system in Somerset. Their findings have been converted into a report supported by an action plan which is being monitored and progressed through the Restoration Cell.			
3.1.4	The Communications and Engagement Team has worked with the Somerset Engagement and Advisory Group (SEAG) and they fed back positively on the system's response to the Covid-19 pandemic in Somerset. The Communications and Engagement Team has also been integrated in the incident response and has published regular updates and useful information as part of the public engagement strategy.			

3.1.5	<p>The Multi-agency Health and Care Tactical Coordination Cell System calls are currently held three times a week. The HCTCC has a set agenda and established terms of reference. Each organisation provides a sitrep and confirmation that they can maintain services for 24/72 hours, identifies risks and issues which require support to address or to escalate. An action tracker is reviewed and updated at each meeting. The command and control structures have proved versatile and robust and have been flexed appropriately to respond to the fluctuating demands of the pandemic.</p>
3.1.6	<p>A table top exercise was held on 28 October 2020 with members of the Health and Care Tactical Coordination Cell, which comprises the providers and major partners in the region. The exercise was based on the “4Ns” methodology – Nuggets, Nice-ifs, Niggles and No-nos. The exercise was designed to provide assurance that the Somerset Health and Care system were prepared for wave 2. The key outputs were:</p> <ul style="list-style-type: none"> • There was consensus that the system is well integrated and able to identify and resolve problems swiftly • The use of new technologies had been enthusiastically adopted and continued to be developed • The system had proved its ability to stand up operational responses at short notice • Sharing of knowledge and information resources had been effective
3.1.7	<p>Our incident structures were reviewed during the initial stage of Covid19 and additional support and structures put in place to support the pandemic. The Somerset CCG Director On Call facility was redesigned to a three way split across the week to reduce pressure, along with the instigation of a 2nd on call as backup, and six months fixed term posts were created for an ICC Lead Officer and ICC Office Coordinator to support the response. These arrangements are constantly under review as the pandemic progresses, and staffing for the ICC is also projected until the end of 2020 and will be rolled forward as appropriate into 2021.</p>
3.1.8	<p>The CCG EPRR Policy has also been reviewed in the light of the pandemic response. The Policy remains up to date against national guidance and will be reviewed at the Clinical Executive Committee at its meeting in December 2020.</p>
3.2	<p>Yeovil District Hospital NHS Foundation Trust</p>
3.2.1	<p>The Trust has consistently reviewed their incident response during the Covid19 Pandemic to reflect on-going learning. A surge planning/ preparedness event was held to comprehensively identify lessons and learning from Phase 1. Comprehensive documentation based on standard debriefing reporting templates has been created to support this.</p> <p>Examples of lessons learned and addressed include:</p> <ul style="list-style-type: none"> • Upskilling of additional staff where needed happened quickly and effectively in the first wave by clear delivery of targeted training/refreshing of skills. E-Rostering system used to clearly mark additional skills so that staff not committed to other essential areas can be identified and redeployed as required • Significant lessons learned about our ability to implement ‘virtual’ OP

	<p>Clinics with over 30,000 appointments performed virtually to date. This change management programme took three weeks to implement. The valuable ‘can do’ lessons learned are being used to shape the way we continue to manage our virtual clinics</p> <ul style="list-style-type: none"> • Implemented HR Absence Helpdesk where now, all absence is recorded and ‘triaged’ to ascertain if testing is required. This route is also used to access testing of a symptomatic household member if required. Data used to inform risk assessment of levels of sickness and potential impact on BAU (both Covid and Non Covid). Process is responsive and efficient. • Early learning indicated that strong, regular, clear staff communications would be needed at dual level. Daily Managers and Staff ‘Covid’ briefings with key information included advice on where staff could seek guidance and support during these difficult times and key messages surrounding social distancing, PPE levels etc.
3.3	Somerset NHS Foundation Trust
3.3.1	The Trust implemented, adapted and developed new EPRR responses to the first pandemic wave which presented both significant challenges but also great opportunities for the Trust and its resilience work in preparation for a possible second wave, for example implementation of remote and agile working, increased resources identified to support the Head of Resilience. The Trust also developed a Project Management Office server facility to manage communications, guidance and information requests to assure effective communication and decision making going forward.
3.3.2	<p>The Trust continues to scrutinise and reflect on the response to the pandemic, identifying and embedding lessons in preparation for any subsequent waves. Copies of the Covid Restoration and Managing Future Surges Breakout Sub-Group and EPRR meetings are available to support this. Examples of lessons learned and addressed include:</p> <ul style="list-style-type: none"> • Testing a Frailty Unit to improve assessment time and reduce admissions • Move of the Mental Health Liaison Services closer to the ED front door • Adoption of Discharge to Assess method is a significant way forward • Somerset Primary Link has been developed into the Somerset Hub for Co-ordinating Care working in collaboration with system partners • Further expansion of the Rapid Response service and collaborative working with Neighbourhoods • Consultant Connect was recognised as a real positive and there is a need to maximise the service as a whole system
3.3.3	The Trust commissioned its internal auditors to undertake an audit of their Covid business continuity plans and responses to the pandemic, and the recommendations made in their report will help them to identify and embed further learning.
4	INCORPORATING PROGRESS AND LEARNING INTO WINTER PLANNING ARRANGEMENTS
4.1	Somerset CCG
4.1.1	Somerset ICC will take responsibility for coordinating winter pressures,

	alongside Covid19 and EU Exit. The Covid19 Incident Director will also have oversight of all three areas and is supported by an ICC Lead working as part of the Urgent and Emergency Care team.
4.1.2	The Urgent and Emergency Care team have formed the Winter Cell and will continue to respond to winter as per normal business as usual (BAU) arrangements. Assurance on the readiness of the system has been provided through key lines of enquiry to NHSEI.
4.1.3	To support winter working the ICC is already being run remotely. The CCG continues to build on the digital opportunities to support remote and agile working for staff. A number of tools have been developed to support the virtual ICC, such as the use of the NHS Futures platform, to share information across system partners, and a care homes' tracker which provides partners with an up to date status of outbreaks.
4.1.4	The CCG has led system learning through the regular multi-agency Health and Care Tactical Co-ordination Cell System calls and the Somerset Health and Social care Emergency Planning Group. A multi-agency table top exercise was held on 28 October 2020 to review lessons identified and how they have been incorporated into planning, identify key risks and concerns in preparation for wave 2 and concurrent winter pressures, and to close the loop on lessons identified and how they have been incorporated into planning.
4.1.5	A series of winter workshops have been held to focus the learning into winter planning which the emergency planning teams feed into, and which has been closely integrated with the incident response and ongoing planning. Somerset CCG Urgent Care team held a winter workshop on 5 August 2020, which was attended by partner organisations. Of particular concern to all organisations was the availability of 4x4 resources during severe weather to support transporting staff to their base or vulnerable patients in the community, given the impact of Covid19. Somerset CCG has worked with Wessex 4x4 to risk assess and provided public health guidance to ensure compliance with requirements. The CCG is now working with its LHRP colleagues to support Wessex 4x4 with advice and guidance for their drivers to take into account Covid-19 restrictions. A Somerset system severe weather exercise is being planned to test the Somerset 4x4 transport protocol and how it interacts with the Avon and Somerset Local Resilience Forum (LRF) logistics cell.
4.2	Yeovil District Hospital NHS Foundation Trust
4.2.1	The learning identified from the learning and surge planning/ preparedness event links into the Trust's winter preparedness planning. Daily huddles of the Executive Team and their deputies created a platform for shared decision making and agreement for change in a timely way to support winter preparedness. This also built on the learning from the early stages of creating the Incident Management Team and has proved invaluable in managing decision making and governance for the Trust.
4.3	Somerset NHS Foundation Trust
4.3.1	The Somerset A&E Delivery Board is chaired by the Trust's Chief Operating Officer, and oversees winter planning at a system level, while the Somerset

	<p>Urgent Care Operational Group contributes to the development of the winter plan. The annual winter planning workshop exercises and tests the winter plan with system partners. Due to the unprecedented demands placed on the Trust's services arising from the Covid pandemic, and following a review of demand and capacity modelling, the plan has considered additional factors:</p> <ul style="list-style-type: none"> • Usual winter activity through the winter of 2019/20 • Modelled the impact if there is a slow stream of Covid cases throughout the winter • Modelled the impact if we have a further significant wave or waves of Covid cases
4.3.2	<p>The Trust has developed a new Severe Winter Weather plan, in consultation with CCG colleagues, who will oversee a Somerset Transport Hub MOU in case there is a severe weather event. They have also recognised with partners that the availability of volunteer drivers may be curtailed due to Covid-19 and NHS England is leading on developing this area of work. The Trust has identified a SRO and a lead senior manager for EU Exit and this work will be closely co-ordinated with the winter and ongoing incident response.</p>
5	<p>CHEMICAL, BIOLOGICAL, RADIOLOGICAL AND NUCLEAR (CBRN) AUDITS</p>
5.1	<p>Yeovil District Hospital NHS Foundation Trust</p>
5.1.1	<p>The CBRN audit was held on 16 October 2020, and the Trust was rated as 100% compliant. Whilst the Trust had concerns regarding training, as mentioned above, this does not pose a direct risk to their ability to respond, and the Trust remains compliant in all other CBRN areas. A live small scale incident held in June 2020 allowed plans to be tested and learning applied with good effect.</p>
5.2	<p>Somerset NHS Foundation Trust</p>
5.2.1	<p>An audit of the Trust's CBRN planning and arrangements was carried out by SW Ambulance Service on 5 October 2020 against the national CBRN response standards. The audit confirmed the Trust continues to have robust CBRN response arrangements in place and in particular it maintains a significant, high quality of equipment for decontamination at Musgrove Park Hospital. The Trust currently has 24 respirator suites, plus eight training suites, a decontamination tent and ancillary equipment ready for use.</p> <p>CBRN training has been recognised as a national issue and the Trust has found it challenging to deliver the normal training due to operational pressures and being unable to use the training suites and equipment due to the virus. The Trust's CBRN trainers are currently developing a video training package which show decontamination but not actual equipment which would otherwise have to be disposed of.</p>

6	SUMMARY
6.1	The Somerset system has responded well to the first wave of Covid19, having adapted and developed processes and procedures to work remotely across the system.
6.2	We have worked very closely with all our providers during the pandemic and are fully assured that, as a system, we are in a strong position and well prepared for a second wave of Covid19, and that the core EPRR standards have been maintained throughout. The previously strong position which existed prior to the pandemic between our organisations has considerably strengthened our ability to respond effectively.
6.3	<p>The CCG has informally sought emergency planning assurance from the other key providers in addition to the formal assurance process carried out as follows:</p> <ul style="list-style-type: none"> • Dorset CCG is leading the EPRR assurance review for the South Western Ambulance Service NHS Trust, and have invited feedback from the CCG. • Devon CCG is leading the EPRR assurance review for NHS 111 and out of hours service provided by Devon Doctors (Care UK are partners with Devon Doctors in providing the 111 service for Somerset and are separately assessed by the London CCGs). • BANES, Swindon and Wiltshire CCG is conducting the assurance review with E-zec which provides patient transport services in Somerset <p>We will ensure that we receive copies of the final assurance assessments for these providers, to ensure that we are aware of any risks identified.</p>
6.4	South Western Ambulance Service NHS Trust and Devon Doctors have been fully engaged in multi-agency Health and Care Tactical Co-ordination Cell System calls and the Somerset Health and Social Care Emergency Planning Group throughout the year, and have been supportive of the Somerset system in its emergency preparedness and response to the pandemic.
7	RECOMMENDATIONS
7.1	<p>The Governing Body is asked to:</p> <ul style="list-style-type: none"> • note the results of the assurance process for 2020 and the position of the CCG and its partners • approve the CCG's Statement of Compliance for 2020 • note that the Clinical Executive Committee will be responsible for signing off the EPRR policy at its December meeting

EMERGENCY PLANNING RESILIENCE AND RESPONSE STATEMENT OF COMPLIANCE

Emergency Preparedness Resilience and Response (EPRR) guidance, issued by the Department of Health and NHS England, requires Somerset Clinical Commissioning Group to plan for and respond to all declared major incidents as a Category 2 responder.

Under the requirements of NHS EPRR guidance Somerset Clinical Commissioning Group is required to:

- Have suitable and up to date incident response plans which set out how the CCG would respond to and recover from a major incident / emergency which is affecting the wider community or the delivery of services; and
- Adopt business continuity plans to enable the CCG to maintain or recover the delivery of critical services in the event of a disruption.

Somerset Clinical Commissioning Group is compliant in providing an EPRR structure through which:

- The CCG can meet its obligations to all appropriate EPRR guidance and standards and the Civil Contingencies Act 2004;
- The emergency preparedness, resilience and response roles and responsibilities of employees are defined;
- An Incident Response Plan is maintained in order to implement an effective response to a major incident / emergency;
- The reputation of the CCG is not compromised;
- The CCG shares information with partner agencies to enhance co-ordination and co-operation;
- A comprehensive business continuity management system is established and maintained, following the principles of PAS 2015 and ISO 22301;
- The CCG has identified those activities which are critical to the delivery of its responsibilities and applied systems to reduce the impact of a disruption to business continuity;
- Business continuity plans are developed, tested and regularly reviewed to ensure that the CCG can deliver an effective response to a disruption to service delivery;
- An annual cycle of EPRR exercises are held to test the effectiveness of the CCG's response to a business continuity disruption and major incident;
- The CCG annually reviews the business continuity management system and emergency preparedness with the aim of agreeing EPRR objectives and strategies to drive continual improvement

The Governing Body and the Director of Public Health can be assured that sufficient resources are in place to manage the business continuity management system and that Directorates have reviewed their plans and that desk top exercises are in place to test this. Assurance is also provided for emergency preparedness through the provision of an active training plan and work programme which are in place to ensure that Somerset CCG can deliver effective and robust support to the response to a major incident or business continuity disruption in line with our EPRR obligations. Our self-assessment position has been assured by NHS England and NHS Improvement EPRR team as Fully Compliant.

Signed: James Rimmer, Chief Executive