Appendix 1

The Clinical Commissioning Groups role in Emergency Preparedness, Resilience and Response (EPRR)

The NHS needs to be able to plan for, and respond to, a wide range of incidents that could impact on health or patient care. These could be anything from prolonged period of severe pressure, extreme weather conditions, an outbreak of an infectious disease, or a major transport accident. A significant incident or emergency is any event that cannot be managed within routine service arrangements. It requires the implementation of special procedures and involves one or more of the emergency services, the NHS or a local authority.

From a health perspective NHS England has the main coordinating role in any major incident or emergency which crosses CCG boundaries. The Clinical Commissioning Group (CCG) has a duty to co-operate with the NHS England South East Area Team.

In summary, the EPRR role of CCGs is to:

- Ensure contracts with provider organisations contain relevant emergency preparedness, resilience (including business continuity) and response elements
- Support NHS England in discharging its EPRR functions and duties locally
- Provide a route of escalation for the Local Health Resilience Partnership (LHRP) should a provider fail to maintain necessary EPRR capacity and capability
- Fulfil the responsibilities as a Category two responder under the Civil Contingencies Act 2004
- Maintain business continuity plans for their own organisation
- Be represented on the LHRP
- Seek assurance provider organisations are delivering their contractual obligation.

We do this by:

- Working with the Local Health Resilience Partnership to develop strategic multi-agency plans for responding to emergencies
- Participating in training and testing exercises which are used to review multiagency plans

- Assisting with the local co-ordination of the response to emergencies in partnership with the NHS England South East Area Team
- Working with the LHRP to ensure the capacity, skills and competencies required are in place to co-ordinate the local health response to an emergency
- Undertaking regular performance monitoring of CCG commissioned and NHS funded services
- Co-operating with the multi-agency planning and response network in accordance with the Civil Contingencies Act 2004 (as amended) requirements as a category two responder
- Ensuring a 24 hour a day, seven day a week on-call system
- Ensuring compliance with the national core standards for EPRR for both CCG's and NHS funded healthcare providers
- Maintaining business continuity plans to ensure CCG service delivery is maintained
- Working with the Kent Resilience Forum to ensure health is represented when co-ordinate the local response to an emergency

The Kent Resilience Forum (KRF)

The forum is comprised of local Emergency Service Responders (Police, Fire, Ambulance), Local Authorities, and associated businesses, organisations and voluntary sector representatives, working together to reduce risk in the local area and improve community resilience. One of its key aims is to help us prepare ourselves, our family and our local community against emergencies including flooding and winter weather.

EU Exit – Health and Care Services in Kent and Medway

The United Kingdom (UK) remains scheduled to exit the European Union (EU) at 2300 (GMT) on 29 March 2019. A 'no deal' exit is not the Government's policy, but it is our duty to prepare for all scenarios. The UK exit from the EU is not a civil emergency.

Background

Coordinated by the Kent and Medway STP the preparedness work across Kent and Medway continues to focus on planning for two situations, these are:

 Working with government to ensure the continuation of the supply of medicines and medical products to the whole of the UK in the event of a no deal EU Exit. This includes the NHS, social care and the independent sector and covers medicines (prescription, pharmacy and general sales list medicines); medical devices and clinical consumables (such as needles and syringes); supplies for clinical trials; vaccines and countermeasures; and blood, tissue and transplant materials.

Working with NHS and multi-agency partners across the South East

With the publication of the Department of Health and Social Care's 'EU Exit Operational Readiness Guidance' in December 2018, the Government set out its expectation for all health and care commissioners and providers (including adult social care providers) to undertake local EU Exit readiness planning, local risk assessments and test and plan appropriately for the UK's withdrawal from the EU on the 29 March 2019.

The guidance covered seven key areas of risk:

- 1. supply of medicines and vaccines,
- 2. supply of medical devices and clinical consumables,
- 3. supply of non-clinical consumables, goods and services,
- 4. workforce,
- 5. reciprocal healthcare,
- 6. research and clinical trials,
- 7. data sharing, processing and access.

In addition, Kent and Medway health and care organisations are part of the Kent Resilience Forum (KRF) multi-agency EU Exit planning.

Owing to its unique geography and large number of UK border ports, (Dover Harbour, Euro Tunnel and Ramsgate Harbour) these plans focus primarily on the potential increased traffic volume caused by border checking delays.

Approach

To ensure a consistent and joined up approach to planning and assurance, the Kent and Medway Sustainability and Transformation Partnership (STP) is coordinating the business continuity (BC) review and planning for health and care commissioners and providers.

In November 2018, NHS provider organisations were also directed by NHS Improvement to review their supply chains. The outputs from these reviews were fed into the Governments EU Exit Operational Readiness Guidance.

The STP work programme has been divided into three phases:

- Planning phase (Dec 2018 March 2019)
 - Identification of impacts

- Assurance of Clinical Commissioning Groups (CCG) BC plans
- o Assurance of key providers BC plans
- Command and Control structure review
- o Training, testing and exercise
- o Communications
- Response phase (March 2019)
 - o Strategic and tactical response teams operational
 - o Communications
- Recovery phase
 - Initiate recovery protocols within each agencies business continuity plans
 - o Communications

The STP, on behalf of the Kent and Medway CCGs, has also been contributing to the KRF road traffic planning to ensure the health and care needs are recognised in these national plans.

A programme of tests by all agencies is nearing completion, the outputs of these have been shared across the system and plans amended as necessary.

Matthew Capper. STP Director of EU Exit planning