group policies and procedures

# ACCOUNTABLE EMERGENCY OFFICEr & response policy

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| Category | Corporate Governance  |
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**Related policies and guidance**

NHS Core standards for emergency preparedness resilience and response guidance

**Document revision and approval history**

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#  CORE STANDARDS FOr emergency prePARDNESS, RESILIENCe & response guidanCe

**1. Introduction**

Castleman Healthcare Ltd is a provider of NHS Services and as such is obliged to respond and act upon the NHS England Emergency Preparedness, Resilience and Response (EPRR) Framework to ensure that the company can effectively respond to major, critical and business continuity incidents whilst maintaining services to patients and member practices.

This document will outline the standards that Castleman Healthcare Ltd will adhere to.

**2. Relevant legislation and guidance**

The Civil Contingencies Act 2004 and the NHS Act 2006, as amended by the Health and Social Care Act 2012, underpin EPRR within health.

Both Acts place EPRR duties on NHS England and the NHS in England.

Additionally, the NHS Standard Contract Service Conditions (SC30) requires providers of NHS funded services to comply with the EPRR Framework and other NHS England guidance.

**3. EPRR annual assurance process**

Castleman Healthcare Ltd will assess annually, as part of the statutory requirements brought in by the EPRR, its own processes and contingency plans.

The NHS Core Standards for EPRR provide a common reference point for all organisations and as such this document has been written based on the recommendations of the EPRR.

Castleman Healthcare Ltd will complete an assurance self-assessment based on the EPRR core standards.

**4. Core Standards for EPRR**

The NHS Core Standards for EPRR cover ten domains:

1. Governance

2. Duty to risk assess

3. Duty to maintain plans

4. Command and control

5. Training and exercising

6. Response

7. Warning and informing

8. Cooperation

9. Business continuity

10. Chemical Biological Radiological Nuclear (CBRN) and Hazardous Material (HAZMAT).

**4.1 Governance**

The EPRR stated that NHS providers much have a statement in place outlining the company’s commitment to deliver EPRR and part of this document forms that statement.

Organisations must have an appointed Accountable Emergency Officer (AEO) who is a board level director and responsible for EPRR in their organisation.

Castleman’s appointed Accountable Emergency Officer is James Leyland, Director of HR.

James Leyland will be supported by a non-executive board member.

**4.2 Duty to risk assess**

Castleman Healthcare Ltd has provisions in place to regularly assess the risks to the population it serves. This is largely the responsibility of Castleman’s member practice who use various stratification tools such as QOF, PARM, the DiiS as well as their own in house Health and Safety documentation, business continuity plans, employment checks etc. But where Castleman delivers a service, or helps to deliver one the risks will be stratified and assed by Castleman Healthcare Ltd in line with local and national risk registers.

**4.3 Duty to maintain plans**

All Castleman plans will set out how the company will respond to and recover from major incidents, critical incidents and business continuity incidents. These will be developed in collaboration with partners, practices and service providers to ensure the whole patient pathway is considered.

**4.4 Command and control**

Castleman Healthcare Ltd will received EPRR notifications by email / telephoning the Accountable Officer James Leyland 01202 772541 or james.leyland@dorsetgp.nhs.uk.

**4.5 Training and exercising**

A EPRR training needs analysis will be carried out to ensure this policy is robust. Included in this analysis will be:

* communications exercise
* table top exercise.

**4.6 Response**

The Accountable Officer will liaise with practices, Castleman Staff, NHSE, the CCG / ICS, partners and will where necessary submit situation reports (SitReps) and briefings. These arrangements will also include an alternative ICC, should the primary location(s) be affected by the incident itself or be unavailable at the time of response.

**4.7 Warning and informing**

Tested processes will be put in place for communicating with partners and stakeholders, and warning and informing public and staff when responding to major incidents, critical incidents and business continuity incidents.

**4.8 Cooperation**

Arrangements will be in place to share appropriate information with stakeholders. This includes participation in Local Health Resilience Partnerships (LHRPs) to demonstrate engagement and co-operation with other responders.

The Castleman communications team will be instrumental in this process as well as, if necessary, the CCG’s/ICS’s communications team and practice media systems.

**4.9 Business continuity**

Castleman Healthcare Ltd has an up to date business continuity plan in place as do all member practices which set out the maintenance of critical activities when faced with disruption for any Castleman business activity whether this be outside or within any member practice. These Continuity plans are to current nationally recognised business continuity standards.

**5. Reviews and updates**

The NHS Core Standards for EPRR are subject to an annual review and Castleman Healthcare Ltd will ensure that this policy reflects the most up to day EPRR standard.