

# National Ambulance Resilience Unit NARU



NHS Ambulance Services
Emergency Preparedness,
Resilience & Response
Quality Assurance Framework



Document Name	National Ambulance Resilience Unit National Ambulance Commissioning Group  Emergency Preparedness, Resilience and Response Quality Assurance Framework
Area	NHS Ambulance Services NHS Ambulance Services Foundation Trusts
Purpose	To provide a structured quality assurance framework for EPRR to support the assessment of the capability and maintenance of national standards, identifying best practice and areas of improvement and future development.
Contact for further Information / Additional Copies	
Location of Document	National Ambulance Resilience Unit
Approved By	
Date Approved	
Review Date	Post Audit
Version	1.0

### **Background**

The quality assurance framework has been developed against the Emergency Preparedness, Resilience and Response (EPRR) service specification to allow a comprehensive review of each NHS Ambulance Services Trusts and NHS Ambulance Services Foundation Trusts in England. The quality assurance review will allow reflection on the state of readiness against their emergency preparedness, resilience and response arrangements in respect to organisational risks and threats.

Assuring delivery of the Department of Health Policy for EPRR in NHS Ambulance Trusts and NHS Ambulance Foundation Trusts in England is the responsibility of each Ambulance Trust, through national and local commissioning arrangements.

The assurance framework seeks to maintain standards, improve performance, provide credibility and provide government departments with assurance that organisations are compliant with statutory and other relevant national requirements.

### **Approach to Quality Assurance**

The rationale and purpose behind the EPRR Quality Assurance Framework is to objectively audit the function of EPRR capabilities in Ambulance Trusts. There are clear minimum standards and standard operating procedures that have been developed and adopted nationally. The audit will seek to draw together evidence that supports the effective implementation, delivery and maintenance of those standards.

A consistent approach that upholds national arrangements is paramount to enabling interoperability and collaborative responses or mutual aid scenarios. A consistent approach does not mean that all EPRR arrangements will be identical. Trusts will be audited to the nationally set of standards as identified in this document. The Quality Assurance framework forms part of the evaluation process in place to ensure continued improvement and development of EPRR arrangements locally and nationally. Commissioners, strategic decision makers and Trust Executive teams will be able to clearly see the performance achieved with their EPRR teams and the value added by the capability.

### A Quality Assurance Framework and Audit Model

The Quality Assurance Framework is based on the model as described in the NARU Service Specification for NHS Ambulance Services Emergency Preparedness Resilience and Response. The framework follows a straightforward approach that will see the collection and collation of data that will provide evidence to demonstrate that the capability is being operated and managed in each Trust in accordance with the National Model. In all cases the audit will seek evidence and data that demonstrates how EPRR is being managed locally within Trust.

#### **Audit Approach**

The Quality Assurance framework sets out the required model and performance standards for EPRR. In order to assess and review both the quality and quantity of operational delivery a number of different approaches will be followed. Audits may draw from specific sections within this framework, using a risk based or phased approach, or may cover the entire specification.

Information will be collated to form a clear picture of the level of performance and quality of delivery of EPRR in trusts. Wherever possible, findings will be triangulated to validate any information that supports the audit outcomes. The final audit report will be reviewed by the NARU Programme Manager prior to presentation to the Host Trust to ensure any recommendations are evidence based and proportionate to any associated risk.

From the outset there has been a clear desire to reduce duplication with respect to the collection of performance data. This does however need to be balanced against the requirement to report both locally and nationally on the performance of EPRR to commissioners and other key decision makers.

### Requests for information:

- Documentation
- Performance reports
- Informatics
- Responses to structured questions

# Observation / Inspection of:

- Visits to Trusts
- Audit of base / vehicles / equipment

### Interviews / Discussions will potentially involve:

- Executive Director with responsibility for EPRR
- Finance Director
- EPRR leads
- Operational Manager
- Operational trainer
- Control room staff
- Others as identified as necessary

#### **Audit Schedule**

A schedule of audits for EPRR will be agreed and implemented each year. These may be run in conjunction with audit of other areas such as HART.

It is anticipated that audits will require three days for trusts, plus a day each for subsequent report writing; however as the audit process is developed this may be altered.

The audit should cover all elements of the EPRR operating model, as defined in the Service Specification, namely:

- 1. Emergency Operations Centre
- 2. Command and Control
- 3. Specialist Response
- 4. Emergency Logistics
- 5. National Mutual Aid
- 6. Business Continuity Management
- 7. Media
- 8. Plans Procedures and Guidance
- 9. Debriefing
- 10. Event Management
- 11. Public Order
- 12. Training
- 13. Wider NHS
- 14. Resilience Forum and Partnership
- 15. Exercising
- 16. Staff and Facility Resources
- 17. Occupational Health, Human Resources
- 18. Legal Arrangements
- 19. Specialist Information Technology
- 20. Audit

### The audit team will comprise:

- a) Department of Health Internal Audit Lead Auditor
- b) The local Strategic Health Authority / Commissioning lead
- c) Care Quality Commission (CQC) Manager
- d) NARU Lead(s)

### **Feedback to Trusts**

Following audit visits a report will be compiled and reviewed by NARU prior to presentation to the Trust. Audit results are key to ensuring an accurate overview and accountability of EPRR activity within England and devolved administration, thus influencing future EPRR models. The overarching outcome is to support commissioning process ensuring value for money and a service provision that is compliant with the specification.

The audit report will seek to provide findings on:

- Areas of good practice to be shared with other EPRR teams;
- Areas of non-compliance with the Service Specification, and assessment of the implications and associated risks;
- Recommendations for changes or interventions that will enhance preparedness and performance.

#### **Audit Process**

### 1. Emergency Operations Centre

Summary

This element of the Quality Assurance Framework and audit will consider the extent to which the Trust adheres to the specification

Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook
- National guidance related to EOC capacity and capabilities

### Relevant documentation

- Establishment figures, rates of attrition
- · Recruitment campaigns and approach
- Job Descriptions
- Questionnaire
- · Outcome from internal exercising
- Proclus, lessons learnt action log

- Observation, review on site interviews with EOC staff
- Areas of specific 'issue or concern' as raised
- Structured responses to various scenarios
- Review lessons identified from internal exercises
- Review Proclus submissions
- Review of documentation

Key Indicator	Evidence Provided			Describe the method used for evidence reporting
	Yes	Partially	No	
Effectively and efficiently manage				
a major incident delivering				

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expected high standards of		
patient care.		
Manage a major incident still		
deliver a business as usual		
function to nationally agreed		
standards.		
Have the capability to manage		
significant and or high profile		
events that could bring the		
service into disrepute or the		
subject to legal challenge.		
Within an urban conurbation must		
be able to manage up to four		
simultaneous incidents and two		
within rural areas.		
Appropriately resourced to		
manage such events.		
All staff are fully trained and		
exercised on a regular basis to		
manage and sustain such events.		
Able to manage media attention		
relating to such events at any		
given time of the day or night.		
Have resilience IT infrastructure		
to manage all of the above from		
any location and from a fall back		
emergency operations centre.		
Have flexibility with IT and or staff		
to engage in more than one		
control centre or more and can		
collectively manage such events		
as required.		
Have formal arrangements in		
place to recall staff to duty in any		
such event.		
Have the ability to deploy a		
mobile communication unit with		

fully trained and exercise staff.		
Have the ability to provide a		
forward control team to any such		
event.		
Have an on call and on duty		
loggist drawn from a wide cadre		
or staff.		
Have arrangements to		
communicate with and control		
resources from other ambulance		
providers.		
Have access to the complete		
suite of service plans, guidance		
and action cards.		

### 2. Command and Control

### Summary

This aspect of an audit will consider the organisations ability to provide robust command arrangements as described in the specification, focus will be for a number of simultaneous or prolonged events. A clear evidence base for command and control training, education and development requirements, delivery and effectiveness needs to be kept. This is often the first aspect to be scrutinised if anything untoward occurs during an incident.

The audit will establish if the provision and organisation of this capability, education and development meets the requirements for the operation of all aspects of command and control capabilities. This is in respect of quality and delivery. Consideration will be given in an operational context – legislative requirements relating to recertification, stipulated frequency of refresh and review, assuring safe systems of work, personal and team competency, and partner agency confidence in a command capability.

# Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook
- NARU Command and Control Guidance

### Relevant documentation

- National Training requirements
- National Occupational Standards
- Annual Local Training plan
- Evidence of training, education and development
- Learning outcomes/training needs analysis
- Evaluation of training
- Learning points from exercises
- Resilience & Capability reports

- Observation, review on site
- Focus Groups, interviews, requests for information
- Reports from information on Proclus

- Areas of specific 'issue or concern' as raised
- Structured responses to various scenarios
- Inspection of documentation training records etc
- Observation of operational duties or exercises
- Feedback from local partners

Evidence Provided		ided	Describe the method used for evidence reporting
Yes	Partially	No	
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radiological, nuclear, explosive		
and hazardous material events		
and to support Gold and Silver		
level officers in managing such		
events.		
Have 24 hour Radiation		
Protection Supervisor		
arrangements within Trust and as		
part of the national response in		
line with local and national Mutual		
Aid arrangements.		
All commanders maintain a		
Continuous Personal		
Development portfolio in relations		
to their role.		
Have an annual exercise		
programme for all command staff		
and involvement in multi-agency		
exercising to remain qualified in		
their role function and remain		
National Occupational Standards		
compliant.		
Have an emergency		
preparedness structure that		
supports command arrangements		
for NHS Partners, Acute Trusts		
and NHS Gold and that all staff		
are trained tested at a		
multiagency exercise on an		
annual basis.		
Have communication and general		
equipment to support the		
designated a command role.		

### 3. Specialist Response

# Summary

This element of the Quality Assurance Framework and audit will consider the specialist response arrangements and the specialist kit and equipment that the trust are required to use in order to safely and effectively operate a capability. There are clear guidelines for the storage, maintenance and replacement of vehicles, kit and equipment as part of national capabilities.

The audit will establish if the management and organisation resources, kit and equipment including specialist personal protective equipment and meet the requirements for the operational capabilities. Trusts are expected to be able to demonstrate full compliance.

## Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook
- HART Model as described in Service Specification for NHS Ambulance Services Hazardous Area Response Teams April 2012 C 4.7 and C 4.8
- National Ambulance Contract
- Manufacturer's instructions
- Operational instructions / Standard Operating Procedures
- Vehicle & Equipment Inventories
- Guidance for what is carried on what vehicle and where including weight limits

#### Relevant documentation

- Organisational and National vehicle support requirements including Servicing information / documentation
- Appropriate storage of vehicles and equipment
- PROCLUS Asset management system
- Evidence of budget to support running costs
- Budgeted depreciation strategy and Trust commitment to replace equipment

### Nature of assessment

- Observation, review on site
- Reports from information on Proclus

- Areas of specific 'issue or concern' as raised
  Structured responses to questions
  Inspection of documentation and resources

Key Indicator	Evic	lence Prov	ided	Describe the method used for evidence reporting
•	Yes	Partially	No	
HART capability compliant with the current National Service Specification, February 2012, including vehicle and equipment replacement programme.				
Have the capability to respond to marauding firearms incidents in line with National Joint Operating Procedures.				
Have the capability to respond to and manage a chemical, biological, radiological, nuclear or explosive event for an extended period in line with National CBRN guidance.				
Have the capability to manage a Pandemic Influenza epidemic for a prolonged period in line with the Department of Health guidance.				
Have the capability to manage a flood event for a prolonged period.				
Have a mobile emergency response incident team (MERIT) capability for the operational area compliant with the Department of Health guidance.				
Have capability to manage a mass casualty event in line with the Department of Health and Cabinet Office guidance;				

Have capability to manage a		
casualty clearing station with		
significant numbers of P1, 2, and		
3 patients for a protracted period		
in line with the Department of		
Health guidance.		

# 4. Emergency Logistics

# Summary

This element of the Quality Assurance Framework and audit will consider the extent to which the Trust adheres to the specification

# Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook

### Relevant documentation

- Estates plans and business cases
- Local SOPs
- Capital Budgets
- Estates revenue budgets
- Resilience & Capability reports

- Observation, review on site
- Areas of specific 'issue or concern' as raised
- Structured responses to previously circulated questions
- Review of documentation

Key Indicators	Evidence Provided			Describe the method used for evidence reporting
	Yes	Partially	No	
Have arrangements to provide and supply large quantities of medical consumables and general ambulance equipment to one or more concurrent events.				
Have arrangements to identify organisational and national asset location and availability.				
Have arrangements to be able to				

respond with organisational and national asset and provide situational reports to the National Ambulance Coordination Centre.		
Have arrangements for assets to be called for or respond to a local and or national mutual aid request.		
Have capability to have staff identified, trained and exercise to drive these assets and respond to such events.		
Have formal arrangements for the dispatch of and or reception of assets and an agreed trigger mechanism for they request, this should be supported by a robust audit process.		
Have formal arrangements in place for resupply during the recovery phase of any incident.		

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# Summary

This element of the Quality Assurance Framework and audit will consider the extent to which the Trust adheres to the specification

# Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook

### Relevant documentation

National mutual Aid Arrangements

- Observation, review on site
- Areas of specific 'issue or concern' as raised
- Structured responses to previously circulated questions
- Review of documentation

Key Indicators	Evidence Provided		ided	Describe the method used for evidence reporting
	Yes	Partially	No	
Have mutual aid arrangements to support neighbouring ambulance trust and or an incident of national importance.				
Have arrangements to ensure compliance with national mutual aid plan.				
Have arrangements for communication and logistic infrastructure to support national mutual aid.				
Have trigger mechanism for the				

request of mutual aid and an		
request of mutual aid and an		
identified person with the		
authority to agree this, the		
process should identify what is		
required, what can be supplied		
and how the response will be		
managed when arriving at the		
specific destination.		

6.	<b>Business</b>	Continuity	/ Management
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# Summary

This element of the Quality Assurance Framework and audit will consider the extent to which the Trust adheres to the specification.

# Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook

# Relevant documentation

- Observation, review on site
- Areas of specific 'issue or concern' as raised
- Structured responses to previously circulated questions
- Review of documentation

Key Indicators	Evic	Evidence Provided		Describe the method used for evidence reporting
	Yes	Partially	No	
Have robust arrangements that support organisational critical				
infrastructure.				
Have arrangements that support				
the organisation during periods of				
adverse weather.				
Have arrangements to audit and				
seek assurance that their agency				
suppliers also maintain and have				
robust Business Continuity				
process in place to ensure they				
can support the Trust in a				
business as usual function.				
Have formal arrangements in				

place for rapid resupply of goods		
and services during the recovery		
phase of any business continuity		
challenge to the organisation.		
Certification to BS2599 or		
ISO22301		

# 7. Media

# Summary

This element of the Quality Assurance Framework and audit will consider the extent to which the Trust adheres to the specification.

# Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook

### Relevant documentation

• Organisational Media and Communication plan

- Observation, review on site
- · Areas of specific 'issue or concern' as raised
- Structured responses to previously circulated questions
- Review of documentation

Detail	Evidence Provided			Describe the method used for evidence reporting
	Yes	Partially	No	
Have in place systems to manage				
the media at all Emergency				
Operational Centres plus fall back				
locations and the wider				
organisational structure.				

# 8. Plans, Procedures and Guidance

# Summary

This element of the Quality Assurance Framework and audit will consider the extent to which the Trust adheres to the specification.

# Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook

### Relevant documentation

NARU minimum Requirements for an Emergency Plan

- Observation, review on site
- Areas of specific 'issue or concern' as raised
- Structured responses to previously circulated questions
- Review of documentation

Detail	Evidence Provided			Describe the method used for evidence reporting	
	Yes	Partially	No		
Have in place appropriately					
trained staff to develop, maintain					
and exercise a range of specific					
plans guidance documents					
detailed for a range of events.					
Have in place arrangements for					
ad-hoc emerging threat and risks.					

# 9. Debriefing

# Summary

This element of the Quality Assurance Framework and audit will consider the extent to which the Trust adheres to the specification.

# Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook

### Relevant documentation

- Proclus LID
- Trim assessment

### Nature of assessment

- Observation, review on site
- Review of recruitment approach
- Areas of specific 'issue or concern' as raised
- Structured responses to previously circulated questions
- Review of documentation

Detail	Evidence Provided			Describe the method used for evidence reporting
	Yes	Partially	No	
Have arrangements in place to debrief and identify lessons, embracing electronic technology and shared on a national basis.		-		

# 10. Event Management

# Summary

This element of the Quality Assurance Framework and audit will consider the extent to which the Trust adheres to the specification

# Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook

#### Relevant documentation

- Guide to Safety at Sports Grounds (2008), Department Culture, Media and Sport
- Event Safety Guide (2005), Health and Safety Executive
- The Good Practice Safety Guide (2006), Home Office
- Managing Crowds Safely (2000), Health and Safety Executive
- Safety Guidance for Street Arts, Carnivals, Processions and Large-Scale Performances (2004) Independent Street Art Network (ISAN)
- CAP 403 Flying Displays and Special Events (2012), Civil Aviation Authority
- British Horseracing Authority (BHA).

### Nature of assessment

- Observation, review on site
- Review of recruitment approach
- Areas of specific 'issue or concern' as raised
- Structured responses to previously circulated questions
- Review of documentation

Detail	Evic	lence Prov	ided	Describe the method used for evidence reporting
	Yes	Partially	No	
Have arrangement in place for routine events involving large numbers of the public i.e. social events, demonstrations and any public event that is not funded				

through private means.		
Have arrangements in place for		
the organisation to recover from		
events which ensure, resupply,		
and restock of resources and		
equipment maintenance.		
Have in place arrangements		
attend safety advisory groups		
which supports the Trust to		
mitigate organisational risk at the		
planning and actual event, Police		
Fire and Ambulance are standing		
members of safety advisory		
groups.		
Have in place arrangements for		
inspections during an event or		
performance to ensure private		
providers of healthcare are		
delivering what they claim at the		
safety advisory group.		

# 11. Public Order

# Summary

This element of the Quality Assurance Framework and audit will consider the extent to which the Trust adheres to the specification.

# Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook

### Relevant documentation

- National guidance for Ambulance services
- Lessons identified

### Nature of assessment

- Observation, review on site
- Review of recruitment approach
- Areas of specific 'issue or concern' as raised
- Structured responses to previously circulated questions
- Review of documentation

Detail	Evide	nce Provid	ed	Describe the method used for evidence reporting
	Yes	Partially	No	
Have in place arrangements to meet local or national acts of public disorder i.e. Riots or demonstrations.				

### 12. Training

# Summary

This element of the Quality Assurance Framework and audit will consider the extent to which the Trust adheres to the specification with regard to the identification, organisation, delivery and evaluation of EPRR training, education and development. The specification makes provision for a Training Manager (or equivalent) to lead and assure this area of work. Training and the time set aside for training, education and development is a pressure area for EPRR. A clear evidence base for training, education and development requirements, delivery and effectiveness needs to be kept. This is often the first aspect to be scrutinised if anything untoward occurs during an incident.

The audit will establish if the provision and organisation of training, education and development meets the requirements for the operation of all EPRR capabilities. This is in respect of quality and delivery. Consideration will be given in an operational context – legislative requirements relating to recertification, stipulated frequency of refresh and review, assuring safe systems of work, personal and team competency, and partner agency confidence in EPRR capability.

# Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook

### Relevant documentation

- NARU Command and Control Guidance
- National Training requirements
- Annual Local Training plan
- Evidence of training, education and development
- Learning outcomes/training needs analysis
- · Evaluation of training
- Learning points from exercises
- Learning points from Incidents
- Resilience & Capability reports

### Nature of assessment

- Observation, review on site
- Review of recruitment approach

- Areas of specific 'issue or concern' as raised
  Structured responses to previously circulated questions
  Review of documentation

Detail	Evidence Provided		ided	Describe the method used for evidence reporting
	Yes	Partially	No	
Have in place arrangements to				
identify the need for training for all				
new and existing staff and				
refreshed on an annual basis,				
training must include the				
underpinning knowledge essential				
for emergency preparedness.				
Have in place arrangements for a				
continuous professional				
development programmes that				
supports the training need.				
Have in place arrangements for				
training for incidents involving				
radiation and compliance to the				
Department of Health guidance.				
Have in place arrangements for				
the provision of Radiation				
Protection Supervisors (RPS).				
Have in place arrangements for				
operational staff and managers to				
receive training to a major				
incident response for both the				
trust or as part of mutual aid.				
Have in place arrangements to				
train the voluntary and community				
first responders.				
Identify internal and external				
providers for the training.				
Have in place arrangements to				
identify training needs for NHS				
partners in the use of personnel				

protective equipment.		
Have in place arrangements to		
provide training support to NHS		
partners in the use of personnel		
protective equipment for		
chemical, biological, radiological,		
nuclear, hazardous material and		
casualty clearing.		
Have in place arrangements		
which maintain develop and		
improve the HART training		
programme.		
Have in place arrangements to		
provide and develop teams to		
respond to planned firearms and		
marauding firearms incidents.		

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# Summary

This element of the Quality Assurance Framework and audit will consider the extent to which the Trust adheres to the specification.

# Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook

### Relevant documentation

- Civil Contingencies Act 2004
- NHS Planning Guidance 2005

- Observation, review on site
- Focus Groups, interviews, requests for information
- Reports from information on Proclus
- Areas of specific 'issue or concern' as raised
- Structured responses to questions
- Inspection of documentation training records etc
- Observation of operational duties or exercises
- Feedback from local partners

Detail	Evidence Provided			Describe the method used for evidence reporting
	Yes	Partially	No	
Have arrangements in place to				
link with other NHS stakeholders.				
Have arrangements that				
demonstrate consistent links with				
and for Acute Trusts in all areas				
of emergency preparedness.				
Can demonstrate there is a				
synergy in the planning process				

between the Ambulance service and support logistics in the event of a major incident for Acute Trusts.		
Can demonstrate the organisation		
have in place arrangements and		
plans to establish and operate		
shared incident control rooms		
with the Wider NHS where		
practicable.		
Organisation has provision for		
mutual aid either assets or staff:		
e.g. Hazardous Area Response		
Team, Air Support Unit, National		
Inter-agency Liaison Officer.		

# 14. Resilience Forum and Partnership

# Summary

This element of the Quality Assurance Framework and audit will consider the extent to which each Trust has embedded the requirements of engaging with Local Resilience Forum and Local Health Resilience Partnerships and takes into consideration the resilience, health & wellbeing of personnel, all of which will influence collective capability and preparedness to respond.

# Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook

### Relevant documentation

- Observation, review on site
- Focus Groups, interviews, requests for information
- Reports from information on Proclus
- Areas of specific 'issue or concern' as raised
- Structured responses to questions
- Inspection of documentation training records etc
- Observation of operational duties or exercises
- Feedback from local partners
- Civil Contingencies Act 2004
- NHS Emergency planning Guidance 2005

### Nature of assessment

- Observation, review on site
- Review of exercising records
- Areas of specific 'issue or concern' as raised
- Structured responses to questions
- Review of documentation
- Review exercising programme

Detail	Evidence Provided	Describe the method used for evidence reporting

	Yes	Partially	No	
Have in place arrangements to attend and participate in Local Health Resilience Partnership (LHRP) and Local Resilience Forums (LRF) and any relevant subgroups established.				
Have in place arrangements for engagement at both strategic (exec director) and tactical levels.				
Have in place arrangements of monitoring LHRP and LRF activity, each of these bodies have work programmes that require ambulance trusts to undertake actions that fall to them on such work programmes.				

### 15. Exercising

# Summary

This element of the Quality Assurance Framework and audit will consider the extent to which each Trust has embedded the requirements of exercising and takes into consideration the resilience, health & wellbeing of personnel, all of which will influence collective capability and preparedness to respond.

National job descriptions have been set for EPRR and command and the appointment criteria for operational positions are clearly set out in the national occupational standards manual. Similarly the competency based framework in organisational and personal development ensures that the skills required to effectively fulfilling the operational and management roles are understood and supported. All EPRR and command personnel are requested to participate in an annual Resilience & Capability survey which provides an assessment of their health & wellbeing, their individual and collective capability and identifies what factors are influencing these whether positively or negatively.

# Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook

#### Relevant documentation

- · Observation, review on site
- Focus Groups, interviews, requests for information
- Reports from information on Proclus
- Areas of specific 'issue or concern' as raised
- Structured responses to questions
- Inspection of documentation training records etc
- Observation of operational duties or exercises
- Feedback from local partners
- Civil Contingencies Act 2004
- NHS Emergency planning Guidance 2005

### Nature of assessment

- Observation, review on site
- Review of exercising records

- Areas of specific 'issue or concern' as raisedStructured responses to questions
- Review of documentation
- Review exercising programme

Detail	Evid	dence Provi	ided	Describe the method used for evidence reporting
	Yes	Partially	No	
Have in place processes and audit trail for all staff to train and exercise with multi-agency partners.				
Have arrangements in place to exercise with the voluntary sector.				
Have arrangements exercise with Acute Trusts.				
Demonstrate interoperability with all other stakeholders in relation to a major or any event that generates high profile media attention.				
Have in place the provision to share the outcome of exercises nationally electronically with other ambulance trust and cross government stakeholders.				

### 16. Staff and Facility Resources

### Summary

This element of the Quality Assurance Framework and audit will consider the extent to which each Trust has provided an appropriate base for the EPRR team. The Service Specification sets out requirements for the facilitating staff, resources and national assets. In some cases the requirements are to facilitate effective operation of the HART capabilities. In others there is a specific or legislative requirement for provision. Each EPRR and HART has been set up with a considerable number of essential assets that need to be appropriately housed, maintained and secured.

Teams need to be sufficient in numbers to support the emergency preparedness resilience and response capability, able to attend stakeholder groups, help facilitate national work groups, be part of a national response to incident in other roles trust feel is necessary.

Funding has been provided to Trusts to deliver a HART estates solution and each Trust has a location or locations within the Model Response plan to which a response is required within 45 minutes. Location and accurate and effective delivery of the required minimum as set out in the Estates Specification will be reviewed.

Where co-location with wider Trust services has been achieved the audit will look for operating procedures and physical use of the building for evidence that the EPRR and HART requirements have not been compromised and central funding has been used appropriately.

### Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook

### Relevant documentation

- Estates plans and business cases
- Local SOPs
- Capital Budgets
- Estates revenue budgets
- Resilience & Capability reports

- Observation, review on site
- · Areas of specific 'issue or concern' as raised
- Structured responses to questions

Review of documentation				
Detail	Evidence Provided			Describe the method used for evidence reporting
	Yes	Partially	No	
Have in place robust processes for staff profiling and facilities management to accommodate the emergency preparedness resilience and response function and storage of all assets in line with national guidance and as laid down in the Civil Contingencies Act 2004.				

# 17. Occupational Health, Human Resources

# Summary

This element of the Quality Assurance Framework and audit will consider the extent to which the Trust have in place arrangements for counselling, supporting staff and advising on long term clinical care following a traumatic incident, post incident or any event that generates high profile attention.

# Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook

### Relevant documentation

- Observation, review on site
- Focus Groups, interviews, requests for information
- Reports from information on Proclus
- Areas of specific 'issue or concern' as raised
- Structured responses to questions
- Inspection of documentation training records etc
- Observation of operational duties or exercises
- Feedback from local partners

- Observation, review on site
- Areas of specific 'issue or concern' as raised
- Structured responses to questions
- Review of documentation

Detail	Evic	lence Prov	ided	Describe the method used for evidence reporting
	Yes	Partially	No	
Organisations must demonstrate they are able to identify and monitor workplace factors affecting the health and wellbeing of staff required to command or				

respond to major incidents and be		
able to ensure their resilience and		
preparedness for such events.		
Have in place arrangements for		
counselling supporting staff and		
advising on long term clinical care		
following a traumatic incident post		
incident or any event that		
generates high profile attention.		

### 18. Legal arrangements

# Summary

This element of the Quality Assurance Framework and audit will consider the extent to which the Trust have legal arrangements in place that support the organisation and staff in the event of any legal challenge as a result of a major or critical incident or any event that generates high profile media attention.

Managers involved in any incident that could attract legal attention must have training to include standards of behaviour, what to expect in a court of law, how to speak to people, requirements of them as a professional witness and situational awareness. Staff and organisations must understand the legal ramifications of their involvement with the Civil Contingencies Act 2004, Corporate Manslaughter Act 2007 and Health and Safety 1974.

# Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook

### Relevant documentation

- Observation, review on site
- Focus Groups, interviews, requests for information
- Reports from information on Proclus
- Areas of specific 'issue or concern' as raised
- Structured responses to questions
- Inspection of documentation training records etc
- Observation of operational duties or exercises
- Feedback from local partners

- Observation, review on site
- Areas of specific 'issue or concern' as raised
- Structured responses to questions
- Review of documentation

Detail	Evidence Provided	Describe the method used for evidence reporting
	Yes Partially No	

Have arrangements in place to support the organisation and or its staff in the event of any legal challenge as a result of a major or critical incident or any event that generates high profile media attention.		
The organisation must demonstrate they are complaint with the European Convention on Human Rights namely articles 2, 8 and 14		

### 19. Specialist Information Technology

# Summary

This element of the Quality Assurance Framework and audit will consider the extent to which the Trust have arrangements in place for the IT requirements to support a major or critical incident or any event that generates the use of a specialised IT capability. The audit must establish if the trust has a resilient communications and IT platform.

### Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook

#### Relevant documentation

- Observation, review on site
- Focus Groups, interviews, requests for information
- Reports from information on Proclus
- Areas of specific 'issue or concern' as raised
- Structured responses to questions
- Inspection of documentation training records etc
- Observation of operational duties or exercises
- Feedback from local partners

- Observation, review on site
- Areas of specific 'issue or concern' as raised
- Structured responses to questions
- Review of documentation
- Review of lessons learnt
- Review of Proclus

Detail	Evidence Provided			Describe the method used for evidence reporting
	Yes Partially No		No	
Have arrangements in place for				

the IT requirements to support a		
major incident or any event that		
generates the use of a		
specialised IT capability.		
Have in place arrangements to		
regularly test the IT function and		
ensure it is understood by the		
staff who will utilise it.		
Ensure resilient communications		
and IT platform.		
Have in place appropriate levels		
of servicing and maintenance		
cover for their IT systems and		
equipment.		

### 20. Audit

# Summary

This element of the Quality Assurance Framework and audit will consider the extent to which the Trust manages an internal and external audit process in line with the specification

# Source material for standard requirements

- EPRR service specification
- EPRR service specification handbook

### Relevant documentation

- Observation, review on site
- Focus Groups, interviews, requests for information
- Reports from information on Proclus
- Areas of specific 'issue or concern' as raised
- Structured responses to questions
- Inspection of documentation training records etc
- Observation of operational duties or exercises
- Feedback from local partners

- Observation, review on site
- Areas of specific 'issue or concern' as raised
- Structured responses to questions
- Review of documentation
- Review of lessons learnt
- Review of Proclus

Detail	Evid	dence Prov	ided	Describe the method used for evidence reporting
	Yes	Partially	No	
Have in place a system for				
regularly testing the procedures				
and requirements listed above.				

Have in place internal audit		
programmes which cover the		
audit of the EPRR Function.		