

REPORT CLASSIFICATION	✓	CATEGORY OF PAPER	✓
Official	✓	Proposes specific action	✓
Official: Sensitive Commercial		Provides assurance	✓
Official: Sensitive Personal		For information only	

**BOARD****27 JANUARY 2026****Report Title:****Emergency Preparedness, Resilience and Response (EPRR)  
Annual Assurance 2025****Purpose of report**

The purpose of this report is to provide the ICB Board with an overview of the NENC ICB and provider organisation's self-assessment against the NHS England EPRR core standards for 2025.

**Key points**

- NENC ICB has undertaken a self-assessment against the EPRR core standards as per the NHS England EPRR Core Standards guidance.
- NENC ICB have moved from a position of being partially compliant in 2024 to substantially compliant in 2025 (89% of core standards rated as Substantial).
- The areas which are currently assessed as being partially compliant (11% of standards) for NENC ICB will be addressed and monitored as part of a specific action plan and continuously assessed within the Emergency Preparedness, Resilience and Response Steering Group for the remainder of 2025 and into 2026. Progress will also be reported to the Local Health Resilience Partnership (LHRP).
- NENC, as Strategic Commissioner and system convenor have also led and overseen the assurance process undertaken by each Foundation Trust and Ambulance Service, ensuring that each Trust is compliant, have an effective emergency response planning process and are able to respond appropriately and proportionately to any declared incident.

**Risks and issues**

- NENC ICB: Whilst a rigorous and robust review of business continuity arrangements has been undertaken this financial year, along with a new Business Continuity Plan developed, it has not been possible to review the business continuity management arrangements for each directorate due to the impact of the transition programme. Work though will begin immediately to assess the impact and business continuity underpins the new ICB model of operational delivery.

**Assurances and supporting documentation**

- The areas which are currently assessed as partially compliant for provider organisations will be monitored and maintained as part of an action plan and continuously assessed by the Local Health Resilience Partnership as well as during the monthly meetings with EPRR Leads chaired by the ICB. An action plan will be developed by each Trust for the ICB to oversee progress which will be shared and discussed by the LHRP to ensure system oversight.
- NENC ICB: An action plan will be developed and monitored by Executive Committee to ensure progress toward full compliance.

## Recommendation/action required

The ICB Board are asked to;

- Endorse the NENC ICB EPRR Core Standards self-assessment declaration of Substantially Compliant as validated by the Local Health Resilience Partnership (LHRP) and Regional Health Resilience Partnership (RHRP). This was approved by the ICB Executive Committee on 9 December 2025.
- Acknowledge that a workplan is in place, overseen by the ICB EPRR Steering Group, to ensure rapid progress in further enhancing EPRR Core Standards during 2026-27.

## Acronyms and abbreviations explained

EPRR – Emergency Preparedness, Resilience and Response

LHRP- Local Health Resilience Partnership

RHRP – Regional Health Resilience Partnership

SCC – System Coordination Centre

<b>Executive Committee Approval</b>	9 December 2025
<b>Sponsor/Approving Executive Director</b>	Jacqueline Myers, Chief Strategy Officer
<b>Report author</b>	Marc Hopkinson, Director of System Resilience

## Link to ICP strategy priorities

Longer and Healthier Lives	✓
Fairer Outcomes for All	✓
Better Health and Care Services	✓
Giving Children and Young People the Best Start in Life	✓

## Relevant legal/statutory issues

Note any relevant Acts, regulations, national guidelines etc

<b>Any potential/actual conflicts of interest associated with the paper?</b>	Yes		No	✓	N/A	
<b>Equality analysis completed</b>	Yes		No		N/A	✓
<b>If there is an expected impact on patient outcomes and/or experience, has a quality impact assessment been undertaken?</b>	Yes		No		N/A	✓

## Essential considerations

<b>Financial implications and considerations</b>	Not applicable
<b>Contracting and Procurement</b>	Not applicable
<b>Local Delivery Team</b>	The ICB EPRR Steering Group, Chaired by the Director of System Resilience, is a quarterly ICB meeting group consisting of representatives from each LDT. The Group leads on internal EPRR

	workstreams, business continuity matters, identified risks to operational services, new initiatives, regional and national updates etc.
<b>Digital implications</b>	Not applicable
<b>Clinical involvement</b>	Not applicable
<b>Health inequalities</b>	Not applicable
<b>Patient and public involvement</b>	Not applicable
<b>Partner and/or other stakeholder engagement</b>	Not applicable
<b>Other resources</b>	Not applicable

# **North East and North Cumbria Integrated Care Board Emergency Preparedness, Resilience and Response (EPRR) Annual Assurance 2025**

## **1. Introduction**

- 1.1 The purpose of this paper is to report the outcome of the North East and North Cumbria ICB EPRR core standards annual self-assessment process for 2025.

## **2. Background**

- 2.1 Emergency preparedness, resilience, and response (EPRR) is a core function of the NHS and is a statutory requirement of the Civil Contingencies Act (CCA) 2004, the NHS Act 2006 and the Health and Care Act 2022. As such, NHS North East and North Cumbria Integrated Care Board, along with all its commissioned providers, must demonstrate its ability to respond effectively to a wide range of incidents and emergencies while maintaining services to patients. These can range from extreme weather conditions to infectious disease outbreaks, a major transport accident, or a terrorist incident.
- 2.2 NENC ICB works very closely with all providers to coordinate the Integrated Care Systems preparedness as well as monitor each commissioned provider's compliance with their contractual obligations ensuring that organisations effectively plan for, and are able to respond to, and recover from emergencies. The ICB must also be able to demonstrate that, when required, it is able to provide system leadership to any significant incident within any part of the ICS.
- 2.3 As part of the EPRR work programme, each year, all NHS organisations including the ICB, must complete a self-assessment against a core set of National Standards for EPRR, covering areas like risk assessment, incident response, business continuity, training, and partnership working. These standards set out the minimum standards which NHS organisations and providers of funded care must meet. The evidence provided against these standards are intended to demonstrate preparedness for events such as pandemics, severe weather, cyberattacks, or mass casualty incidents.
- 2.4 The annual Emergency Preparedness, Resilience & Response (EPRR) assurance process for 2025-2026 was launched by NHS England on 1st July 2025. This consisted of a National letter outlining the process and timelines for the year, culminating in a Statement of compliance needing to be submitted to NHSE in December 2025.
- 2.5 The North East and North Cumbria ICB is responsible for implementing and leading this annual EPRR Core Assurance Process.
- 2.6 The self-assessment document contains 9 Domains with a total number of 47 core standards for Integrated Care Boards, 62 for Acute Trusts, 58 for Community/MH Providers and 58 for Ambulance Services for which to provide evidence:
  - Domain 1 – Governance
  - Domain 2 – Duty to Risk Assess
  - Domain 3 – Duty to maintain Plans
  - Domain 4 – Command and Control
  - Domain 5 – Training & Exercising
  - Domain 6 – Response
  - Domain 7 – Warning & Informing
  - Domain 8 – Cooperation
  - Domain 9 – Business Continuity Planning

2.7 Completion of the self-assessment process results in four levels of compliance:

- Fully Compliant - The organisation meets all the required standards.
- Substantially Compliant - The organisation meets most of the standards, with minor areas for improvement.
- Partially Compliant - The organisation meets some of the standards but has significant areas for improvement.
- Non-Compliant - The organisation does not meet a significant number of the standards and requires urgent improvement.

2.8 In addition to our completing our own EPRR assurance process against the core standards, NHS NENC ICB are also required to oversee, lead on and support our local health partners with their assurance process. This includes reviewing each providers assessment and evidence and then submitting a consolidated assurance report detailing assurance ratings for each organisation within the NENC integrated care system (ICS). The process fosters accountability and continuous improvement, ensuring alignment with national priorities and legal requirements.

### **3. EPRR Core Assurance Process 2025 – NENC**

3.1 North East and North Cumbria ICB are declaring a Compliant rating for 2025 following completion of the NHSE Annual EPRR Core Standards Assurance process, increasing from a rating of Partially compliant in 2024. This has been assigned based on the percentage of NHS EPRR Core Standards (87%) against which the organisation has assessed itself as being compliant.

The table below shows the Domains, number of standards included in each domain, along with the ICBs compliance ratings for 2025.

Domain	Standards Applicable	Fully Compliant	Partially Compliant	Non Compliant
Governance	6	6	0	0
Duty to Risk Assess	2	2	0	0
Duty to Maintain Plans	11	8	0	0
Command and Control	2	2	0	0
Training and Exercising	4	4	0	0
Response	7	7	0	0
Warning and Informing	4	4	0	0
Cooperation	4	4	0	0
Business Continuity	10	5	5	0
Hazmat/CBRN	12	N/A	N/A	N/A
<b>Totals:</b>	<b>47</b>	<b>42</b>	<b>5</b>	<b>0</b>

3.2 The 2024 Core standard process identified a small number of areas which required further action to move the organisation from last year's Partially Compliant to its desired, new position. NENC ICB System Resilience Team have worked diligently to ensure that the organisation was quickly able to make progress throughout 2025 to maintain and increase compliance against measured standards with the work programme overseen by the ICB EPRR Steering Group and Executive Committee.

3.3 To support attainment of the higher standards the regional ICB EPRR Teams in the North East and Yorkshire have also regularly met to identify and discuss leading practice and share examples of fully compliant standards and the evidence required to achieve them.

- 3.4 Throughout 2025, the ICB System Resilience Team have reviewed, developed and collated evidence for several previously non or partially compliant standards in the Governance, Command and Control and Response domains and are now able to demonstrate a high level of compliance.
- 3.5 The ICB have also held two successful EPRR table-top exercises with multi-agency partners in September and November 2024 as well as using the ICBs rigorous and robust incident response plans to manage a number of significant incidents throughout the past year in-line with their category 1 responsibilities. This has provided a significant amount of further evidence and enhanced competencies.
- 3.6 It is important to note that although the ICB has declared itself as being compliant in 2025, the organisation will continue to strive to maintain and improve its rating in 2026. The ICB System Resilience Team are confident that with the support of focused monthly meetings, standards and evidence will constantly evolve and be enhanced.
- 3.7 The November NENC Local Health Resilience Partnership was dedicated to the 2025 EPRR Annual Assurance process with the ICB detailing the outcome of its self-assessment process and enabling the outcome to be debated and challenged by LHRP core members. NENC ICB then presented the outcome and declaration of the 2025 assurance process to the Regional Health Resilience Partnership Chaired by NHSE in December 2025.

#### **4. EPRR Core Assurance Process 2026 - NENC**

- 4.1 Whilst good progress has been made this year, the Core Standards process has identified a small number of areas requiring further action and were therefore rated as Partially Compliant. These areas will be progressed during 2026 in order to ensure they move to the desired Substantially Compliant position. There are currently 5 areas rated as Partially Compliant, which all come under the Business Continuity domain.
- 4.2 Under the Civil Contingencies Act 2004 and the Health and Care Act 2022, all NHS organisations have a duty to put in place continuity arrangements.
- 4.3 Whilst the ICB has a strong and robust business continuity plan, it is recognised that the ICBs internal business continuity management needs to be reviewed as the organisation progresses with the Strategic Commissioning Transition programme. This will require Business Impact Assessments to be undertaken for all teams and directorates to identify all potential threats and the impact to business operations those threats, if realised, might cause. A specific business continuity plan will then be developed for each team and directorate.
- 4.4 NENC ICB as a commissioner of healthcare services will also work with all its NHS provider organisations and providers of NHS funded care to identify risks and potential threats as well as the impact to business operations these risks, if realised, might cause on the wider ICS. Whilst our organisations have well structured and credible business plans, there has been a number of incidents this year which has required the ICB to provide system leadership and coordinate mutual aid. System plans will therefore be developed to mitigate these system risks which will include more robust response arrangements that will enable services to be maintained during any disruption or recovered as soon as possible.

#### **5. EPRR Core Assurance Process 2025 – Trusts**

- 5.1 The 2025 Trust core standards assurance process, led by NENC ICB EPRR team began in earnest in January 2025. Regular monthly workshops were established and attended by all providers to focus on specific areas of concern, develop action plans and ensure

the availability of suitable evidence. Provider colleagues feedback that these meetings were extremely useful to review and share progress across the system, promote collaborative and coordinated working, address gaps and areas for development as well as report progress. A number of work streams and work programmes (at Trust or ICS level) were also identified, established and overseen by the group which enabled Trusts to demonstrate to the ICB progression and/or compliance for each of the relevant standards.

5.2 Throughout September and October 2025, each provider completed a self-assessment against the core standards using the methodology and collation and evidence thresholds previously adopted for EPRR self-assessments. This included a Peer to Peer review process with other similar size/type of Trusts. Prior to final submission of Trust core standards returns, NENC ICB held a face to face check and challenge session with each provider (Accountable Emergency Officer, ICB Director of System Resilience and EPRR Team) to review the Trusts submission, discuss the rationale for any changes in compliance ratings and review the evidence prior to ICB endorsement. Once complete (and after any final amendments following the check and challenge session) Trusts then submitted their final declaration to NENC ICB.

The table below shows the final submission rating and percentage of compliant standards for each Trust.

5.3 The November NENC Local Health Resilience Partnership was dedicated to the 2025 EPRR Annual Assurance process with each Trusts providing an update to the LHRP on their process and declared rating, enabling further challenge from LHRP core members.

NENC ICB then attended the North East and North Yorkshire Regional Health Resilience Partnership (RHRP) where it provided final Trusts positions to NHSE.

Organisation	Full / Substantial / Partial / Non		Change
	2024	2025	
<b>NEAS</b>	Substantial (93%)	Substantial (93%)	↔
<b>NCIC</b>	Substantial (93%)	Substantial (96%)	↑
<b>NHCT</b>	Substantial (98%)	Substantial (99%)	↑
<b>NUTH</b>	Partial (79%)	Partial (77%)	↓
<b>GHFT</b>	Substantial (93%)	Substantial (97%)	↑
<b>STSFT</b>	Substantial (92%)	Substantial (98%)	↑
<b>CDDFT</b>	Substantial (89%)	Substantial (95%)	↑
<b>NTHFT</b>	Partial (80%)	Partial (85%)	↑
<b>STHFT</b>	Partial (81%)	Partial (79%)	↓
<b>TEWV</b>	Partial (86%)	Partial (77%)	↓
<b>CNTW</b>	Partial (83%)	Partial (78%)	↓

## **6. Incident Management Response 2025**

6.1 Under the NENC ICB System Resilience Team's leadership, the annual work programme has delivered key outputs during this year, but project delivery has significantly been impacted by resource constraints, operational pressures, incident response priorities as well as a number of significant testing and exercising programmes (including Exercise Pegasus, the three phase National Tier 1 Pandemic Preparedness Exercise. The outputs and learning will be used to inform the revised ICBs Pandemic Plan).

6.2 These incidents, all requiring the ICB to provide system leadership and command and control arrangements on behalf of the integrated care system have ranged from:

- Extreme weather events (Storm Claudia)
- Major Incidents declared by wider system partners (Newcastle West End explosion, Cumbria West Coast Main Line Train Derailment and M6 closure)
- Critical incidents (Gateshead Health NHS Trust Picture Archiving and Communication System [PACS])
- Failure of utilities or IT systems
- GP Collective Action
- Resident Doctors Industrial Action
- Communicable disease outbreaks (measles, avian influenza, scabies, meningococcal, seasonal influenza, norovirus, group A streptococcus and RSV) which has resulted in the need to provide diagnostic testing, manage clinical assessment, prescribe medication and/or the facilitation and mobilisation of vaccination campaigns at multiple sites, premises or geographical locations.
- Multiple instances where organisations have lost the ability to deliver services which have affected healthcare delivery or where specific care has needed to be provided to a defined cohort of affected patients above and beyond core service delivery such as during surge/periods of escalation.

6.3 Each of these Level 1 and Level 2 incidents (as defined by the NHS Incident Response Level framework) have required a dedicated ICB command and control structure to be implemented (provided by the ICBs System Coordination Centre) in order to direct the actions of commissioned organisations and personnel and maintain patient safety.

6.4. It is important to note though, that whilst the North East and North Cumbria provided system leadership to a number of incidents, the ICB did not declare any Business Continuity, Critical or Major incidents during 2025.

6.4 These challenges are expected to remain, especially with future changes in the NHS operating model and an evolving threat landscape. However, NHS North East and North Cumbria is committed to strengthening NHS preparedness through its work plan, which includes providing guidance and frameworks, building response capability, running training and exercises, and collaborating with partners to ensure whole system planning.

6.5 The EPRR work programme for 2025/26 will therefore include:

- Rapidly reviewing local mass casualty arrangements with system partners whilst working with NSHE region to update the Mass Casualty Plan.
- Further enhancing the ICB System Coordination Centre role and function.
- Continuing to support CBRN local training and roll out.
- Pandemic preparedness which includes finalising the NENC ICB Pandemic Framework.
- Implementing health recommendations from the Manchester Arena Inquiry report in collaboration with NEAS.
- Developing core standards for the Great North Air Ambulance Service (GNAAS) and Medical Emergency Response Incident Team (MERIT).

## **7. Recommendations**

### **7.1. The ICB Board are asked to:**

- Acknowledge the process undertaken as part of the 2025 NHSE England EPRR Standards process.
- Endorse the NENC ICB EPRR Core Standards self-assessment declaration of Substantially Compliant as validated by the Local Health Resilience Partnership (LHRP) and Regional Health Resilience Partnership (RHRP).

- Acknowledge the workplan to be put in place, overseen by the ICB Steering Group, to ensure rapid progress in enhancing EPRR Core Standards during 2026 as well as ensuring preparedness.

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**Date:** 26/11/2025