From the office of Lyn Simpson Director of NHS Operations

14th June 2012



To
Chief Executives –
Cluster Strategic Health Authorities
Chief Executives –
Cluster Primary Care Trusts

Gateway Reference Number 17762

Dear Colleagues,

Room 4N24 Quarry House Quarry Hill Leeds LS1 2NS

Email: <u>lyn.simpson@dh.gsi.gov.uk</u> PA - Karen Dark (07990 786192)

Maintaining NHS emergency preparedness, resilience and response (EPRR) staff capability during transition

I am writing to you with the agreement of David Flory, Deputy NHS Chief Executive at the Department of Health, who is responsible for EPRR across current NHS structures, and Ian Dalton, Commissioning Board Authority (NHS CBA) Chief Operating Officer, and the executive director accountable for EPRR across the NHS in England from April 2013.

Following publication in March 2012 by the Department of Health of the document; *Arrangements for Health Emergency Preparedness, Resilience and Response from April 2013 (gateway ref 172660)*, the NHS CBA agreed at its April board meeting to implement this new EPRR model.

Work is continuing with the full involvement of SHA Cluster Emergency Preparedness Leads and other key actors on delivering an appropriate corporate structure that is robust and capable of withstanding significant operational challenges in the future. An implementation plan will be considered by the NHS CBA in the near future.

While taking the transition programme forward and at the same time remaining resilient, it is important that staff with critical roles now in NHS resilience are identified. If this is not already the case, PCT and SHA Chief Executives should do so as a matter of urgency. This is especially important for those staff who are subject matter experts in the health emergency planning and response field, and who, currently, may be accountable to directors with a range of different portfolios. Due to the importance of understanding where these individuals are within organisations, SHA Chief Executives will need to confirm at the 3rd July NHS Operations Executive Board meeting on behalf of their cluster this mapping exercise is complete.

As work towards finalising the operational design of the NHS CB local and regional office structures is completed, it has been determined that **NO** staff currently identified as employed in PCTs and SHAs who are engaged in a health emergency planning and response role should for the moment transfer out of existing bodies, or be committed to other receiving organisations.

Once the NHS CB structure has been finalised, it is our intention that NHS CBA Area Directors, with support as necessary from the Regional Directors, commence discussions with Public Health England Transition Team/ Health Protection Agency and Local Authority Chief Executives to agree any transfer of functions and resource. Only when Regional Directors and Cluster SHA CEOs are satisfied that day-to-day resilience across the local NHS can be maintained should staff, where appropriate, be transferred to receiving organisations.

For those PCTs that have already established an agreement in principle to transfer staff, the assumptions used to base these original decisions should now be reviewed in light of emerging thinking regarding the structure of the NHS CBA and organisational responsibilities for the new EPRR model. Until this is completed, all transfers should stop and those that have occurred should be urgently reviewed.

Recognising the importance of maintaining resilience, it has been agreed to fast-track the appointments to four NHS CBA posts supporting the Regional Directors in emergency preparedness matters, along with two appointments to the central emergency planning team who will report to the Director – Performance & Operations. The Director will be appointed by July, and will be responsible for the day-to-day leadership of NHS resilience matters after March 2013. As soon as the NHS CBA Area Directors are appointed, it is the intention to move very quickly to appoint emergency planning staff within the Local Area Teams.

As you are aware, maintaining the resilience of the NHS remains a critical area of business. If you require any further information regarding this letter or have queries over resilience matters, please do contact me or Phil Storr, Head of NHS Preparedness, Department of Health. (phil.storr@dh.gsi.gov.uk)

Yours sincerely

Lyn Simpson

Director of NHS Operations

L. Singson

CC	

Sir David Nicholson KCB CBE NHS Chief

Executive/Chief Executive

NHS Commissioning Board Authority

David Flory CBE Deputy NHS Chief Executive

Department of Health

Ian Dalton CBE

COO NHS Commissioning Board Authority

Regional Directors -

NHS Commissioning Board Authority

Dr Felicity Harvey CBE Director General -

Public Health, Department of Health

Phil Storr, Head of NHS Preparedness,

Department of Health.

Emergency Planning Leads

Strategic Health Authorities