

# Guidance on the roles and responsibilities of Clinical Commissioning Groups (CCGs) in preparing for and responding to an influenza pandemic

The Health and Social Care Act (2012) places a statutory duty on each Clinical Commissioning Group (CCG) to "take appropriate steps for securing that it is properly prepared for dealing with a relevant emergency". Similar duties are imposed on each NHS provider as a term of their contracts with the CCGs to provide NHS services.

In addition, the Civil Contingencies Act (CCA) 2004 places a statutory duty on emergency frontline responders to prepare, respond and recover from significant incidents and emergencies. There is also an expectation that CCGs, as Category Two responders under this legislation, will collaborate, coordinate and cooperate in planning for and responding during an incident. To this end, CCGs have a role in supporting NHS England and providers of NHS funded care in planning for and responding to an influenza pandemic.

The NHS England Emergency Preparedness Resilience and Response (EPRR) Framework (2015) requires each NHS funded organisation to have a nominated Accountable Emergency Officer (AEO) responsible for 'ensuring that the organisation is properly prepared and resourced for dealing with an incident'. In conjunction with local A&E Delivery Boards, CCGs must assure their Governing Body, NHS England and Local Health Resilience Partnership (LHRP) that suitable arrangements are developed, tested and maintained for responding to an influenza pandemic.

Detailed below is guidance for CCG AEOs and EPRR leads on their role in influenza pandemic preparedness and response, and to support CCGs in identifying their high level priorities towards this. Wider multi-agency and health resilience partnership will also find this guidance useful. More detailed guidance will be developed and circulated as necessary, as part of health economy wide pandemic influenza documentation.

#### Before a pandemic, each CCG will:

- identify an executive lead (likely to be the AEO) to lead the CCG's pandemic preparedness activities
- undertake business continuity planning for pandemic influenza
- participate in relevant groups to discuss, plan, share best practice and exercise
- have a robust communications plan for managing communications with all stakeholders during a pre-pandemic period
- work with commissioned service providers in planning for surge in relation to elective work and the possible financial implications if there is ongoing disruption to normal services during an influenza pandemic including the recovery phase
- participate in appropriate assurance processes to ensure commissioned services have adequate pandemic plans in place
- work with NHS England to support local preparedness activities

#### During a pandemic, each CCG will:

- support the national pandemic response arrangements as outlined in Department of Health (DH) and NHS England pandemic influenza guidance
- participate in discussions with NHS England, NHS Improvement and local providers regarding any proposed or actual changes to services, targets, tariffs, performance

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- standards etc. whilst maintaining safe patient care at the forefront of any decisions
- maintain robust 24/7 on-call arrangements, particularly with respect to surge and responding to major incidents
- work with commissioning colleagues, providers and partners to lead the local health economy response, eg through proven surge capacity arrangements, appropriate mutual aid of staff and facilities, and supporting the management of local clinical queries
- activate the CCG pandemic influenza communications plan and participate in local communications activities
- participate in the multi-agency response to ensure a comprehensive local response
- enact business continuity arrangements as required to maintain critical activities
- maintain local data collection processes including completion and submission of situation reports and participation in teleconferences as required
- participate in timely and proportionate debriefs to ensure sharing and adoption of best practice
- implement a process to collate financial and contractual impact information from commissioned providers

## After a pandemic, each CCG will:

- implement appropriate recovery arrangements to ensure the recovery of their own services and commissioned services as soon as appropriate
- maintain preparedness for a future wave of pandemic activity, or further significant system activity
- contribute to local, regional and national post-pandemic debriefs and implement the recommendations from subsequent reports
- acknowledge staff contributions
- review and update plans, contracts and other arrangements to assess the impact of the pandemic and reflect lessons identified
- provide recovery updates to the public and stakeholders through locally coordinated communications activity
- collate and review financial and contractual impact information from commissioned providers and respond accordingly

### **Practical support**

A range of options are available to CCGs in undertaking the activity required to develop pandemic response arrangements. These include:

- the LHRP, a statutory group which oversees health economy-wide pandemic planning activities
- the Local Resilience Forum (LRF), a statutory multi-agency forum
- working across joint representative boards and through relationships with NHS England, local health partners, and members of the wider resilience partnership
- the Public Health England (PHE) pandemic influenza off-the-shelf-exercise available through exercises@phe.gov.uk to test local arrangements

For more information on pandemic influenza preparedness and response, please refer to www.england.nhs.uk/ourwork/eprr/pi/ and www.gov.uk/guidance/pandemic-flu.