

**Executive Summary****Report to the Board of Directors****Held on 28 July 2020**

<b>Subject</b>	Emergency Preparedness Resilience and Response Arrangements
<b>Supporting TEG Member</b>	Michael Harper, Chief Operating Officer
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<b>Status<sup>1</sup></b>	A*

**PURPOSE OF THE REPORT**

The Emergency Preparedness, Resilience and Response Core Standards 2020/21 stipulate that the annual report for Emergency Planning must be signed off by the Board. This report outlines the work undertaken by the Emergency Planning Team since April 2019/20 to ensure that arrangements are in place to respond to business continuity and emergency planning challenges.

**KEY POINTS**

- The Trust has a statutory requirement to ensure it is able to respond to both planned and unplanned incidents (Civil Contingencies Act 2004) and regularly undertakes both live and table top exercises to ensure its plans are fit for purpose.
- During 2019/2020 the Trust planned for 38 business continuity events and responded to 19 unplanned incidents including the COVID-19 Pandemic, a significant fire in the RHH Radiology Unit, mains power outage in the A&E Department and Critical Care, a bus crash into the Chesterman Unit and a total network failure.
- The Trust has undertaken a number of Major Incident Table Top exercises with individual Care Groups, a Silver Command action card exercise and run two electricity generator blackstart tests.
- The Emergency Planning Team has undertaken 55 awareness sessions for STH staff including general induction, newly qualified nurses, post graduate nurses, clinical support workers, duty matrons and business continuity training for Information Services.
- The Trust Major Incident/Mass Casualty Plan action cards for the clinical Care Groups were updated as was the Trust Internal Incident Plan and Pandemic Influenza Plan.
- The Trust is required each year to demonstrate its compliance against the NHS Core Standards for Emergency Preparedness Resilience and Response (EPRR). The Trust submitted partial compliance against the Standards this year and the required remedial action to achieve compliance has been completed.
- TEG have reviewed the Annual Report and are assured that it provides an appropriate summary of activities and the actions undertaken and planned for the future. TEG recommend its approval by the Board of Directors.
- The Health Care Governance Committee have also reviewed the Annual Report and recommend its approval by the Board of Directors.

## IMPLICATIONS<sup>2</sup>

AIM OF THE STHFT CORPORATE STRATEGY 2017-2020		TICK AS APPROPRIATE
1	Deliver the Best Clinical Outcomes	
2	Provide Patient Centred Services	✓
3	Employ Caring and Cared for Staff	
4	Spend Public Money Wisely	
5	Deliver Excellent Research, Education & Innovation	

## RECOMMENDATIONS

The Board of Directors are asked to:

- Note the activities of the emergency planning team and the work done to deliver the EPRR responsibilities of the Trust throughout 19/20
- Approve the report as recommended by TEG

## APPROVAL PROCESS

Meeting	Date	Approved Y/N
Trust Executive Group	15/07/20	Y
Board of Directors	28/07/20	

<sup>1</sup> Status: A = Approval  
A\* = Approval & Requiring Board Approval  
D = Debate  
N = Note

<sup>2</sup> Against the five aims of the STHFT Corporate Strategy 2017-20

# Emergency Preparedness Resilience and Response Arrangements

## 1 Introduction

The Trust has experienced 38 planned and 19 unplanned internal business continuity challenges during 2019/20 and has also been required to:

- Ensure robust arrangements are in place in order to continue to provide key services during both planned and unplanned business continuity challenges.
- Be compliant with the NHS England Core Standards for Emergency Preparedness Resilience and Response (EPRR).
- Continue to meet with external agencies both locally and nationally with regard to national and citywide events.
- Review existing plans and action cards to ensure they are able to meet identified business continuity challenges.

## 2 Legislative and Guidance Framework

The Health and Social Care Act 2012 emphasises the need for assurance regarding EPRR. All NHS organisations must maintain the required standard of preparedness to respond safely and effectively to a full spectrum of threats and hazards such as flooding, flu pandemic and a terrorist incident. The Act also confirms the requirement on all NHS organisations to comply with the Civil Contingencies Act 2004, which focuses on local arrangements for civil protection.

## 3 Emergency Preparedness Structures and Accountability within the Trust Executive and Operational Director Leads

To support the arrangements for emergency preparedness, the NHS EPRR Standards recommend that an Emergency Accountable Officer at Board Level is designated to take responsibility for emergency preparedness on behalf of the organisation. For STH this is Michael Harper, Chief Operating Officer.

Overall responsibility for Emergency Preparedness is exercised through the Emergency Preparedness Operational Group (EPOG). The group ensures communication and coordination of Emergency Planning and Business Continuity is maintained across the Trust. Membership is drawn from Clinical and Non Clinical Directorates and meets quarterly.

## 4 Business Continuity Planned Interruptions

Over the last 12 months STH has been required to plan for 38 business continuity events (including external events). These have included two Blackstart Generator tests, two periods of Lorenzo down time, Tramlines music festival, the Sheffield Half Marathon and the assistance and co-ordination of the modular units on Vickers corridor over a period of four weekends.

## 5 Unplanned business continuity interruptions

During the period April 2019 to March 2020 there have been 19 unplanned business continuity incidents, including a significant fire to the CT control room at RHH, a bus crash into the Chesterman Building, an attempted theft of a power cable leading to total power loss in the A&E department, Theatres and Critical Care, a total network outage across all sites, major flooding in Sheffield and in 2020 the (ongoing) COVID 19 pandemic. Full debriefs were held for these events and reports and action plans developed. In line with national guidance both hot and cold debriefs were held with key members of staff involved in the incidents to identify any immediate risks to patients, staff or buildings, and action plans drawn up for longer term consideration. At the time of writing this report the covid-19 incident is on-going and will therefore be included in the 2020/2021 annual report. By way of example, this report will focus on one of these events, the total power outage on 9<sup>th</sup> June 2019.

- At 15.50 power was lost to the Accident and Emergency Department including the resuscitation area. It became immediately apparent that a number of other critical areas had also been affected and the situation was very serious. The emergency generator had

not started and, despite being late afternoon, some patients were being cared for by torch light.

- Silver Command was immediately established and a full estates team came to site. Given the seriousness of the situation, a discussion was had with the CEO and all ambulances and major trauma patients were diverted to other hospitals. Critical Care began to plan to move their patients out to Theatre Assessment Unit and Cardiac ITU. A&E began to plan to move their patients to the Bev Stokes Day Surgery Unit.
- The estates team, in consultation with Silver Command, agreed the generator controls would be put into manual operation. Power was restored at 18:45 and the hospital divert rescinded.
- The estates team undertook an inspection of the grounds and found a badly damaged cable (due to an attempted theft) on the roofing walkway next to the Critical Care building. In attempting to steal the cable the circuit breakers for the generator were tripped which therefore required a manual intervention to re-set them. The police were fully briefed of the incident and a number of security initiatives were immediately put into place.
- Following the incident both hot and cold debrief meetings were held with key staff and an action plan developed.

## **6 Training and exercises**

The Civil Contingencies Act 2004 stipulates that the Trust is required to undertake table top exercises every year. In 2019 the Emergency Planning Team ran a number of table top exercises to test individual Care Group response to a major incident. This included a comprehensive review of all major incident action cards and a review of the roles of lead nurse, lead consultant and Bronze Commander in an incident.

In April, the Emergency Planning team ran a table top exercise to test the Trust response to an unplanned electronic prescribing outage. Following this a complete review of the EPMA action cards was undertaken.

In May the Emergency Planning team ran a business continuity seminar for the Combined Community and Acute (CCA) Care Group to test the understanding of business continuity, identifying potential interruptions to service delivery and working up contingency arrangements. The Care Group used the event to help shape their internal plans.

The Emergency Planning Team has participated in two learning events, in June the Greater Manchester Police ran a conference following the Manchester bombing incident. This was a multi-agency learning event entitled "An Approach to Recovery".

In August the Emergency Planning Team took part in a series of table top exercises delivered by NHSE - Operation Wellington focussed on the UK Exit from the EU, in particular the disruption to the UK's strategic road networks. A number of lessons learnt were fed into the STH plans.

## **7 Review of plans and Action Cards**

The Major Incident Plan and Internal Incident Plan were updated to reflect changes to the national guidance with regard to types and levels of incidents – Major, Mass casualty, Business Continuity and Critical. With levels 1 – 4 ranging from local management - (1) to NHSE National Command and Control - (4)

The Pandemic Influenza Plan was updated to reflect changes to the national planning assumptions for infection rates. This will be updated again in light of ongoing learning from the 'live' COVID19 pandemic response.

As part of the review planning cycle, a number of Trust wide Business Continuity Action Cards were updated. These included the Hospital Bleep system, Chemical Biological, Radiological and

Nuclear (CBRN) Cards for Emergency Department staff and Silver Command Team members. The Major Incident Box was also refreshed and, for ease of access, divided into Internal and Major Incident response sections.

## **8 NHS England Core Standards 2019/20**

The annual NHS England Core Standards for EPRR are the minimum requirements commissioners and providers must achieve in order to show that they can effectively respond to major, critical and business continuity incidents whilst maintaining services to patients. There were 64 Core Standards for 2019, with an expanded focus on severe weather/flood prevention. Following a self-assessment, the Trust was assigned an EPRR assurance of “substantial” meeting 89-99% of the required target.

## **9 Recommendations**

Note the activities of the emergency planning team and the work done to deliver the EPRR responsibilities of the Trust throughout 19/20

Approve the report as recommended by TEG and HCGC