

CONTROLLED DOCUMENT

EMERGENCY PREPAREDNESS POLICY

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PURPOSE	This document sets out the strategic framework for the management of emergency planning and business continuity at University Hospitals Birmingham NHS Foundation Trust
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Version Control

Version No	Title	In Force From
1	Emergency Preparedness Policy	14/12/2009
2	Emergency Preparedness Policy	24/01/2013
3	Emergency Preparedness Policy	21/07/2015
4	Emergency Preparedness Policy	28/01/2019
5	Emergency Preparedness Policy	02/02/2022
5.1	Emergency Preparedness Policy	19/03/2024

1. Policy Statement

- 1.1** The purpose of this policy is to ensure that University Hospitals Birmingham NHS Foundation Trust (the Trust) will comply with the requirements of the Civil Contingencies Act 2004 and the NHS England Emergency Preparedness, Resilience and Response (EPRR) Framework 2015, and its statutory duty to implement arrangements to ensure that it can:
- 1.2** Identify, plan, resource and implement preventative actions and contingency plans through regular risk assessments which enable the Trust to:
- a) React effectively to emergencies.
 - b) Continue to support emergency response partners during an emergency.
 - c) Continue to provide essential services as far as is reasonably practicable in the event of an emergency; and
 - d) Share information with local and regional partners.
 - e) Provide the public with appropriate information regarding an impending or ongoing emergency situation.
 - f) Mitigate any financial impact of such events.
- 1.3** These requirements will be met through the implementation of Major Incident and/or Business Continuity plans, which will enable the Trust to respond effectively in emergency situations and continue to deliver its services. The individual plans contain detailed actions required by sections a-f above.
- 1.4** The Trust must also ensure that it has effective contingency plans in place to enable it to maintain the provision of its services in abnormal circumstances, such as the failure of a supplier or a sudden increase in demand on services.

2. Scope

- 2.1** This policy applies to all areas and services of the Trust and all individuals employed by the Trust, including contractors, volunteers, students, locum, bank and agency staff and staff employed on honorary contracts who are involved in Trust business on and off the premises.

3. Definitions

Business Continuity Incident	A Business Continuity Incident is an event or situation which: Threatens the services, personnel, buildings or the organisational structure of the Trust; and Requires special measures to be taken to respond to the interruption and to restore normality.
Local Business Continuity Issue	Local Business Continuity Issues are interruptions to a service that affect only one area of the Trust and can be resolved at a local level.
Critical Incident	Critical Incidents are Business Continuity Incidents which affect one or more Critical Services of the Trust, and require site or potentially Trust-wide coordination to ensure resolution.
Business Continuity Management	Business Continuity Management is a process that helps to manage risks to the smooth running of an organisation or delivery of service, ensuring continuity of critical functions in the event of an interruption to services and effective recovery afterwards. Continuity Management is a generic management framework that is valid across the public, private and voluntary sectors. It is an ongoing process that helps organisations anticipate, prepare for, prevent, respond to and recover interruptions to services, whatever their source and whatever aspect of the organisation they affect.
Major Incident	A Major Incident is an occurrence that presents a serious threat to the health of the community, disruption to the service or causes such numbers or types of casualties as to require special arrangements to be implemented by the Trust.
Pandemic	A global disease outbreak of a new virus where there is little or no immunity, and no available vaccine.
Accountable Emergency Officer (AEO)	The Executive Director who has overall responsibility for EPRR in the Trust. As per NHS England EPRR framework 2015, page 17.
Strategic Emergency Planning Group	A Trust level group that is chaired by the AEO and which provides strategic direction to the Emergency Planning Group.
Emergency Planning Group	Operational level group, chaired by the Head of Emergency Planning & BCM, reporting to the Strategic Emergency Planning Group.
Core Standards	The NHS England EPRR annual assurance process to assess the preparedness of NHS Commissioners and Providers against common EPRR standards.

4. Framework

- 4.1** This section describes the broad framework for ensuring the Trust has effective arrangements in place to enable it to:
- 4.1.1 Identify the potential areas of risk to the Trust's services in order to develop plans which prevent or minimise disruption. The Plans are produced by the Emergency Planning Team in consultation with relevant experts. They are review by the Emergency Planning Group to ensure quality and completeness and tested on a regular basis.
 - 4.1.2 React effectively to a Major Incident outside of the Trust, providing appropriate medical services and support to emergency response partners;
 - 4.1.3 React effectively to a Critical Incident within/directly affecting the Trust so that it can continue to provide essential services as is reasonably practicable;
 - 4.1.4 Minimise disruption when unplanned events have the potential to significantly interrupt normal business; and
 - 4.1.5 Manage impacts on capacity when demand outstrips available capacity and normal contingency plans are insufficient.
 - 4.1.6 React effectively to a situation where there is a significant loss of staff e.g., due to industrial action or Pandemic
 - 4.1.7 Respond to a Business Continuity Incident, alerting appropriate personnel, allocating resources and priorities for action to recover essential services and prepare for return to normal working as quickly as possible.
 - 4.1.8 Support effective communication during an emergency or service interruption.
 - 4.1.9 Ensure the Trust can continue to exercise its functions in the event of an emergency.
 - 4.1.10 Ensure all departments are involved in the preparation of the plans, so that there is an effective and consistent response to emergencies and/ or Business Continuity Incidents.
 - 4.1.11 Ensure that all plans are tested and updated in line with national requirements.
- 4.2** The Trust's Emergency Planning Team has two work streams which are identified as follows:

4.2.1 Major Incident Planning;

4.2.2 Business Continuity Planning;

4.3 The Trust's Business Continuity Plans are separate from the Trust's Major Incident Plans, under which the Trust would deliver its emergency response to a Major Incident, such as a road traffic accident, terrorist attack or chemical incident. Therefore, the Business Continuity Plans and Major Incident Plans can be implemented independently of each other.

4.4 However, a Business Continuity Incident may occur simultaneously to a Major Incident or an event, or situation, in the wider environment which requires the Major Incident response and may also cause an interruption to the Trust's services or functions.

4.5 In such circumstances, the Business Continuity Plans may need to be implemented in addition to, and independently, of the Major Incident Plans. However, a coordinated response to the Major Incident and the Business Continuity issue will be required, to ensure there is an effectiveness of the decision-making process and to avoid duplication of effort.

4.6 The Accountable Emergency Officer (AEO), through the Strategic Emergency Planning Group, will oversee the work carried out under each work stream to ensure that the plans and procedures in each are coordinated, and that work programmes are adhered to.

4.7 Major Incident Planning

4.7.1 The AEO will ensure that the following plans are prepared and submitted to the Strategic Emergency Preparedness Group for consultation:

- Major Incident/Mass Casualty Response Plans;
- Chemical, Biological, Radiological and Biological Response Plan (CBRN);
- These plans shall be reviewed as stated in each individual plan and submitted annually as part of the Core Standards Process.

4.8 Business Continuity Planning

4.8.1 The Trust shall develop plans to deal with Business Continuity Issues that would affect multiple services of the Trust as set out in the Business Continuity plans, such as staff shortages, interruption to IT services and power failures.

4.8.2 The AEO will ensure that the following plans are prepared and submitted to the Emergency Planning Group for approval, as part of the suite of emergency plans:

- Heatwave Plan;
 - Cold Weather Plan;
 - Fuel plan
 - Business Continuity plans
 - Critical Incident
 - Operation Consort
 - Evacuation and Shelter plan
 - Pandemic Flu Plan
 - Threat plan
- Reception Arrangement for Military Patients (RAMP) Plan (Military plan to which UHB contribute)

5. Duties

5.1 Chief Executive

It is the Chief Executive's responsibility to:

- 5.1.1 Ensure that the Trust has effective Major Incident and Business Continuity Plans;
- 5.1.2 Ensure that the Board of Directors receives regular reports regarding emergency and business continuity planning;
- 5.1.3 Designate an Executive Director as Accountable Emergency Officer (AEO) to take responsibility for emergency and business continuity planning throughout the Trust; and
- 5.1.4 Ensure that sufficient resources are available for the Trust to effectively prevent or respond to a Major Incident or a Business Continuity Incident.

5.2 Accountable Emergency Officer (AEO)

The AEO has been designated by the Chief Executive as the Executive Director with overall responsibility for emergency and business continuity planning throughout the Trust, and will be known

as the Accountable Emergency Officer for EPRR.

It is the AEO's responsibility to:

5.2.1 Provide regular reports to the Board regarding emergency preparedness and business continuity planning;

5.2.2 Chair the Strategic Emergency Preparedness Group

5.2.3 With the assistance of the Head of Emergency Planning and BCM ensure:

- a) a comprehensive set of contingency plans for the provision of key services are developed, reviewed annually, and made available to staff;
- b) that such contingency plans meet national requirements;
- c) that all relevant staff are aware of their responsibilities under those plans; and
- d) that staff are trained in the application of these plans

5.2.4 Approve the Major Incident/Mass Casualty and CBRN Plans

5.3 Chief Operating Officer

5.3.1 The Chief Operating Officer (COO) will assist the AEO by ensuring that the emergency plans for the Trust are implemented in line with this Emergency Planning policy.

5.3.2 It is the COO's responsibility to ensure operational services have a business continuity plan.

5.4 Chief Strategy & Digital Officer (CSDO)

5.4.1 The CSDO will ensure that a comprehensive IT disaster recovery plan is developed, updated, and implemented. This plan must meet national requirements, and all relevant staff must be made aware of their responsibilities under the plan.

5.5 Head of Emergency Planning and BCM

It is the Head of Emergency Planning and BCM's responsibility to:

5.5.1 Chair the Emergency planning group and report to the Strategic Emergency Planning Group;

5.5.2 Ensure that the Trust Major Incident plans are updated, and that all staff are aware of their roles and responsibilities;

- 5.5.3 Ensure that Business Continuity plans are updated and that all service staff are aware of their responsibilities;
- 5.5.4 Ensure that key elements of all plans developed under the auspices of the Emergency Planning Policy are reviewed and tested in line with national and statutory obligations;
- 5.5.5 Evaluate the Trust's response and ensure modification to all emergency plans as necessary; and
- 5.5.6 Report the above to the AEO and the Chief Operating Officer so that they may advise the Board of Directors.

5.6 Hospital Operations Directors

It is each Hospital Operations Director's responsibility to:

- 5.6.1 Ensure all their staff are aware of their departmental responsibilities to assist Departmental Managers and the Business Continuity Management Team in the Trust's response to a Business Continuity Incident;
- 5.6.2 Ensure that all staff are made aware of other EPRR related plans and their responsibilities therein;
- 5.6.3 Ensure that each service within their area of responsibility has undertaken a business continuity risk assessment, developed appropriate plans and that this is reported centrally through the Strategic Emergency Planning Group;
- 5.6.4 Staff are aware of any service mitigation and recovery plans to prevent and respond to Major and Business Continuity Incidents and are prepared to implement them.

5.7 All staff

- 5.7.1 All staff have a responsibility to comply with the requirements of this policy and its associated plans where appropriate.

6. Implementation and Monitoring

6.1 Implementation

- 6.1.1 To ensure all departments are involved in the preparation of the plans, so that there is an effective and consistent response to emergencies and/ or Business Continuity Incidents.
- 6.1.2 Awareness training of the Trust Emergency Incident Plans will be undertaken by the emergency planning team across all Trust

sites.

- 6.1.3 The Emergency planning team will work with key areas/ departments to identify and deliver appropriate training.
- 6.1.4 All individuals with specific responsibilities under the Major Incident and Business Continuity plans shall undergo training specific to their role. The Head of Emergency Planning and BCM shall ensure that a central record is maintained of such training.
- 6.1.5 Exercising of the Major Incident and Business Continuity Plans
- 6.1.6 All Trust Emergency plans will be tested in line with national guidance; specific testing regimes are indicated within each plan.

6.2 Monitoring

Appendix A provides full details on how the policy will be monitored by the Trust.

6.2.1 Review of the Major Incident and Business Continuity Plans

- 6.2.1.1 All plans will be reviewed in line with specific timeframes identified within each plan and/or after significant changes or following incidents/activation of the plans.
- 6.2.1.2 This review will take into consideration any action arising from the evaluation of any incident or exercise, changes within the Trust, and of any new national guidelines that may have been issued.

7. References

Civil Contingencies Act 2004

NHS England EPRR Framework 2015

8. Associated Policy and Procedural Documentation

All Emergency Incident Plans as outlined in this policy which are available on Trust intranet.

Appendix A - Monitoring Matrix

MONITORING OF IMPLEMENTATION	MONITORING LEAD	REPORTED TO PERSON/GROUP	MONITORING PROCESS	MONITORING FREQUENCY
Plans are up to date, exercised and external assessments/audit are completed. Training is carried out.	Head of Emergency Planning & Business Continuity	Strategic Emergency Planning Group	National Core Standards assessment, external audit reports, training records, exercising and incidents debriefs	6 monthly
Annual report	Head of Emergency Planning & Business Continuity	Board of Directors	Annual EPRR report containing summary of the above and additional context. Update summary report submitted at 6 months.	6 monthly
Emergency plans are reviewed, and Post-Incident Evaluations carried out	Head of Emergency Planning & Business Continuity	Strategic Emergency Planning Group	Reviews are reported and take into consideration any action arising from the evaluation of any incident or exercise, changes within the Trust, and of any new guidelines that may have been issued.	Specific to individual plans
Business Continuity Plans are audited	Head of Emergency Planning & Business Continuity	Strategic Emergency Planning Group	Business continuity plans are audited, the results reported, and action plans followed up.	3 yearly cycle