

CONTROLLED DOCUMENT

Fuel Plan

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Amendment Tracker

Version	Changes	Date
1	New Trust wide document	Sept 2019
1.1	Annual review <ul style="list-style-type: none"> Align to Trust structures Amendment to vehicle listing and adding Subcontractors Plan review from yearly to Bi-Annual Removal of On Call EPO Provider Trust role 	July 2020
2	Virtual approval via email from Emergency Planning Group.	Nov 2020
2.1	Review of plan <ul style="list-style-type: none"> Appendix 5 – changes to user(s) details Change in plan terminology Organisations & titles changed	Oct 2022
3	Approved by the Emergency Planning Group	9 Nov 2022
3.1	Trust review <ul style="list-style-type: none"> Aims & Objectives added Change Predetermined key/priority users (Appendix 4) Change to other organisations names Changes in line with new Trust structure 	Jan 2024

	<ul style="list-style-type: none"> • New Planning for a Fuel Supply Disruption Checklist (Appendix 5) added • New reporting structures • New temporary users logo & log (Appendix 2) • Reference to Business Continuity Plans & checklist 	
4.0	Approval by Emergency Planning Group.	28 Feb 2024

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Background

The National Emergency Plan for Fuel (NEP-F) sets out how the Government and the oil industry would respond to a significant disruption to the fuel supply chain in the UK. The purpose of this document is to outline arrangements in preparation for and response to potential or actual implementation of the NEP-F. The Department of Energy & Climate Change (DECC) has lead Government Department (LGD) responsibilities for coordinating the response in a fuel emergency.

Constraints on the supply of fuel may arise for a variety of reasons, industrial accident or technical failure, industrial action, public protest, supply issues or problems with the delivery infrastructure.

The NEP-F sets out a range of emergency arrangements to respond to a fuel emergency. The National Plan provides for a number of designated filling stations (DFS) across the Country and the activation of fuel rationing arrangements during an actual fuel shortage or a perceived one. These arrangements include the options of activating, where required, a maximum purchase scheme and/or an activation of priority user schemes for the emergency services and the utilities.

Aim

The aim of this plan is to outline how the University Hospitals Birmingham NHS Foundation Trust (UHB) intends to respond in the event of a fuel shortage to ensure that it maintains the delivery of critical & essential services, including any actions to be taken in conjunction with other agencies, during a local or national road fuel disruption. This plan should be used in conjunction with the Trust's Business Continuity Plans.

Objectives

The objectives for this plan are: -

- To implement the special arrangements required to reduce demand and prioritise supply in accordance with the NEP-F.
- To ensure that the Trust continues to provide essential services during a fuel shortage as far as is reasonably practicable.
- To ensure that the staff delivering essential services can access fuel as per the Emergency Services Scheme (ESS) and Temporary Logo Schemes (TLS) contained in the National Plan.
- To ensure that all staff are advised about responsible purchasing of fuel and fuel conservation as well as cascading central government messages.
- To ensure access to health during a fuel supply disruption for vulnerable people

- To work with external agencies to minimise the impact of fuel shortages.

Command & Control

In the event of the NEP-F being invoked the Department of Health will notify NHS England (NHSE – NHSE Midlands locally) who will become the communication channel, this will be subsequently managed locally by the Birmingham & Solihull Integrated Care Board (BSol ICB). The Trust will work with local partners to ensure the impact on patients and normal business is minimised so far as is possible and practical. A road fuel disruption is not likely to have an immediate impact as prior warning is likely. In the event that this should happen the Chief Operating Officer (COO) will evoke this plan, Command & Control will be instigated at Hospital sites through the Hospital Operational Directors (HOD).

For business continuity each department within the Trust maintains a business continuity plan. Clinical Decision Groups (CDG's) Management teams will be asked to consider both the key functions of each service as well as the upstream and downstream effects of reducing service provision. These plans alongside the defined list of critical services will be combined to determine how a safe reduction of key services will be achieved should a fuel supply incident become so acute that not all services can be maintained.

Staff will be asked to prioritise journeys, avoiding unnecessary journeys, taking into consideration fuel needed to attend work. They will be advised to utilise other means of transport where possible such as public transport, car sharing, walking or cycling to work. Staff will make every attempt to attend work by other means when they have inadequate fuel to make the journey.

Staff may be redeployed to a role at a Trust site nearest to their home address to reduce the amount of travelling. Staff may also be required to work from home if their role has been pre-identified and they have the capability to work from home i.e., have access to a laptop or PC at home.

Staff may be requested to park at the site nearest their home and then use the Trust Shuttle bus for the final part of their journey if they are not able to redeploy to another site. This would need to be in agreement with their line manager as this additional travel time may need to be taken out of their normal contracted hours. Shuttle bus timetables may need to be reviewed to reflect this.

Selected Facilities Department fleet vehicles will also need to be identified to ensure maintenance, repairs and services to key Trust infrastructure continues. These vehicles would not be used for redeployment of staff or to/from home.

To assist with the planning & implementation of this plan, the Planning for a Fuel Supply Disruption Checklist (Appendix 5) and Ward/Service Business Continuity Plans (BCM) will be completed prior to issuing staff with a Temporary logo and an Emergency Fuel Log Form (Appendix 2).

Communications

National Communications

Government communications on fuel supply disruption in England will be led and co-ordinated by Department for Business, Energy & Industrial Strategy (BEIS). All other Government departments and local responders must follow BEIS's lead regarding media briefing and communicating with third party intermediaries, such as motoring organisations and trade associations.

Local Communications

The Trusts Communications Team will work to manage local communications in accordance with national messages and in liaison with Command & Control. Once it is sensible to do so communications for staff will be placed on the intranet/email and will be tailored to meet the demands of the situation. Communications will be realistic, constructive and creative, and have an accent on self-help including car sharing, carpooling, and the use of public transport, but will not raise unrealistic expectations of meeting increased staff demand for fuel and not seek to take the responsibility away from staff of attending for work. The Trust Communications Team will use the Trust social media accounts to cascade public messages.

If necessary, the Communications Team will distribute via internal communications channels guidance and expectations around use of the temporary logo scheme by community staff, emergency staff and other priority groups of staff.

Response to a Fuel Shortage

The National Plan recognises that a number of different strategies can be used to manage a potential or actual fuel shortage, depending on the circumstances. These tools or schemes are designed to reduce panic buying and ensure fuel is shared fairly and prioritised for essential services.

Designated Filling Stations (DFS)

The DFS process will be used to control the supply of fuel to a defined number of UK filling stations that will receive supplies for priority use only. The LRF and Regional Emergency Division Midlands & East (RED) hold a list of organisations which qualify for fuel under DFS/ESS. Once the decision to implement DFS/ESS has been made, the LRF/RED will provide a suitable list of designated filling stations within the region. The Emergency Planning Team will ensure that essential users have access to the list of DFS.

Emergency Services Scheme (ESS)

This involves targeting the available supply to essential users within emergency services via DFS. Essential users are identified by vehicle type and agency logos. A temporary logo scheme has been introduced to accommodate essential users who do not drive logoed vehicles.

The ESS is likely to be introduced once a fuel shortage extends beyond 10 days or when supply levels become critical. The decision to introduce ESS lies with the Government.

Depending on supply levels Maximum Purchase, Emergency Services and Temporary Logo schemes may run in parallel. However, as supply levels become critical it is likely that only DFS will receive deliveries of fuel.

Forecourt Supply Management (FSM)

This involves the fair allocation of fuel by discouraging impulse purchasing (panic buying) and restricting the supply to customers via a Maximum Purchase Scheme (MPS).

This may include giving priority to the commercial sector by directing supplies to non-retail outlets to secure key supply chains, particularly health and food.

Maximum Purchase Scheme (MPS)

This will see motorists restricted to a maximum purchase of 15 litres of fuel per visit (The limit may be adjusted depending on the incident). The MPS is likely to be introduced during the first 10 days of a fuel shortage when supply levels are limited but not critical.

If customers attempt to purchase fuel from a DFS site or attempt to purchase more fuel than they are entitled to from a MPS site they commit an offence under section 18

of the Energy Act 1976. The maximum penalty in the Magistrate's Court is up to three months imprisonment or a fine of £5000. On conviction (or sentence) in the Crown Court it is two imprisonment or a fine (no maximum).

(National Emergency Plan for Fuel (NEP-F) Version 4)

Temporary Logo Scheme (TLS)

The scheme is similar to ESS but recognises that there are essential users in health, social care and critical lifesaving services that drive non-logged vehicles, e.g., GPs, Community Nurses and Midwives. Use of a temporary logo will allow these users access to fuel via DFS. To obtain fuel, user must present the following at the DFS:

- Temporary logo
- Staff photo pass
- Method of payment

Reference: West Midlands Conurbation LRF Fuel Disruption Options Framework, December 2023, v2.2 (DRAFT)

The Trust will not be able to defend staff from any prosecution for misuse of the TLS.

Commercial Scheme

This prioritises diesel supply to commercial filling stations and truck stops (e.g., motorway service stations) to support the continuation of critical supply chains. The Trust may need to activate this scheme for use of Sub Contractors to ensure essential maintenance/services i.e., linen, reference Appendix 4.

Triggers & Alerting Procedure

The Trust is likely to be alerted to the activation of the NEP-F from DECC via Bsol ICB. Upon receiving notification, the Trust will activate this plan.

National Trigger Levels & UHB Response

Using National Guidance, the below table is the likely pattern of response and decision making required including plan triggers.

National Triggers

Trigger Levels

LEVEL 1 – WHITE
Situation Normal



LEVEL 2 – BLACK
Potential Fuel Emergency



LEVEL 3 – AMBER
Actual Fuel Emergency



LEVEL 4 – RED
Severe Fuel Emergency

Lowest alert level when the situation is as normal. This period is used by organisations for testing and reviewing the NEP-F and business continuity processes and for maintaining contacts between stakeholders.

Incident occurs with the potential to cause disruption to fuel supplies. A higher state of preparedness is required, and action may need to be taken to coordinate a precautionary emergency response, including increased monitoring.

Significant disruption to fuel supplies requiring action to coordinate the emergency response across government and industry.

Severe disruption to fuel supplies requiring immediate action to coordinate the emergency response and consequence management across government and industry.

UHB Response

Level	Response	By Whom	Possible Time Frame
1	<ul style="list-style-type: none"> Review latest NEP-F and LRF Fuel Disruption Options Framework Update Trust Fuel Plan based on changes Key colleagues to be advised in terms of readiness Initiate arrangements to identify essential car users (staff delivering essential services in the community) Notification to, Chief Operating Officer (COO) Hospital Operational Directors (HOD's), Managing Director of Procurement, Director of Operational Estates and Director of Facilities & complete respective check list as detailed in Appendix 5 and activation of plan if appropriate All fleet vehicles to maintain a full tank of fuel on daily basis 	Emergency Planning Team	Minimum of 7 days' notice of strike action
2	<ul style="list-style-type: none"> Confirm which of the fuel schemes have been activated through BSol ICB Implement communications strategy to inform staff of the current situation and any special arrangements (nationally & locally) required to reduce demand; improve fuel efficiency and target supply. Community/vulnerable people/children's services to have up to date lists of the patients at risk during a fuel shortage and consider the potential impact Review care plans for the individuals who have been identified as at risk. BCPs are activated or reviewed and arrangements to ensure staff and other critical resources will remain available as required. Complete daily SBAR's to ICB once BCM plan activated Site Teams to work with Clinical Decision Groups (CDG's) to nominate/identify staff for the possible introduction of temporary logo scheme. Designation of a 'safer' parking/storage area for all Trust vehicles as risk of fuel theft will be high. 	Emergency Planning Team, Communications Team, COO & HOD's (Potential to activate Command & Control) Estates & Facilities	Teams to review fuel levels every 24 – 48 hours on fleet status Prioritise Critical Services

3	<ul style="list-style-type: none"> Assess the ongoing impact on services and patient care and if necessary convene Command & Control. Finalise temporary logo scheme arrangements as nominated by the CDG's approved by the HODs. Confirm arrangements in place for vulnerable patients. (taking into consideration that the shortage may extend over a weekend) Ensure BCPs are invoked to ensure essential services continue to be delivered. A 'Battle Rhythm' will be set to ensure a coordinated response within the Health Service and Partner Agencies. Reinforce key messages to staff Send situation reports to BSol ICB as per set battle rhythm 	<p>Command & Control</p> <p>Emergency Planning Team</p> <p>Communications Team</p>	<p>Teams to review fuel levels between 4 – 8 hours on fleet status</p>
4	<ul style="list-style-type: none"> Review local arrangements in support of the Temporary logo scheme for critical usage only. Plan all journeys carefully to conserve fuel. Consider prior authorisation of all journeys/visits Level 3 actions continue to apply NHSE Midlands Incident Response Plan will be activated. The Government's News Co-ordination Centre will assume overall responsibility for communications. 	<p>Command & Control</p> <p>Emergency Planning Team</p> <p>Communications Team</p>	<p>Teams to review fuel levels hourly on fleet status</p>

General Principles for Temporary Logo Scheme Usage

The temporary logo scheme provides for drivers of non logoed vehicles to draw fuel at designated sites to enable the essential health services to continue to be provided.

Temporary logos should not be issued to staff simply commuting to and from work, but where the vehicle is used in such duties i.e., District Nurse visits, domiciliary visits by clinicians, palliative care, community midwives, and Acute care (relatively small).

The use of the logos is for the purpose of providing NHS care and not for private use. It would be difficult to differentiate the two when private vehicles are used which is why it is important to record fuel usage and official miles travelled on NHS Business. (See Appendix 2)

CEOs of all Trusts would be accountable if they are abused, and robust audit trails will be in place.

These are individual sheets registered to the license plate of the staff members car. These will be issued to the relevant Command & Control rooms on activation of the plan with strict auditable documentation and will need to be returned once fuel is obtained.

On Call

In the event of fuel disruption, the Trust should again look at BCP's to review where essential on call is required. If the on call is essential and the usage cannot be accommodated in the MPS scheme then a logo may be used but only for the period of the on call and not for personal use. We may need to consider accommodation for some on-call staff to reduce the number of journeys made during the on-call period.

Major Incident

The Trust must always be ready to respond to a major incident, but this does not mean that all staff will have a predetermined requirement for a temporary logo to cover this unlikely eventuality.

Management of the Temporary Logo Scheme – Temporary Logo Scheme requires the Trust to:

- Review their BCP's to identify those staff who are conducting essential health, social care and life saving services and take into account the level of service that would be reasonably expected to be delivered during an emergency period. Operations should be scaled down to reflect the fact that an emergency situation is occurring and the same level of service may not realistically be possible.
- Ensure that staff issued with temporary logos understands the purpose and scope of the scheme and the penalties for misuse.
- Note that temporary logos are not generally to be used to obtain fuel for the purpose of getting staff to work and that public transport should be used wherever possible. However, it is recognised that certain staff i.e., midwives respond to calls directly from their homes so more flexibility has to exist. It is also recognised that for shift workers and those living in rural areas, public transport may not always be available to allow these staff to get to work to provide their essential service.
- Strictly control the number of temporary logos issued to ensure the integrity of the scheme is not compromised and only issue logos where they are required to provide services identified as critical in BCP's.
- Hold the temporary logos in the event of an emergency and strictly manage them to mitigate the possibility of abuse. Temporary logos will be issued to the staff members license plate and records kept of the person holding the logo. Consideration will also be given to whether or not logos are issued permanently or whether they are returned after a user has filled up their vehicle. This would reduce the risk of loss/misuse. *Appendix 1* contains an issue log to be used to record which members of staff have been issued with temporary logos.
- Work with BSol ICB to ensure the DFS sites are fully aware of the organisations that have been permitted to use temporary logos within their respective areas. Agree with BSol ICB the arrangements to be put in place whereby DFS operators can contact an incident control room by telephone to authenticate temporary logos or where they have any doubt concerning the identity of the user. Similarly, temp logo users may also use this contact number to confirm their status if a situation occurs whereby the DFS operator has refused to allow them access to fuel.

Implementation of the Temporary Logo Scheme

In the lead up to a fuel shortage, CDG management teams across the Trust will be asked to:

- Identify the essential car users to be nominated for a temporary logo based on information held in their BCP
- CDG Associate Directors of Operations should submit applications (Appendix 3) to Command & Control.
- Command & Control will issue a temporary logo to the designated driver when fuel is required and complete the Temporary Logo Scheme Issue Log (Appendix 1) with the required information.
- Command & Control will have a list of the DFS.
- In order to obtain fuel essential users will be required to produce the temporary logo along with their Staff ID at the point of sale or kiosk at the DFS. Once the fuel retailer is content that they are a legitimate user they will then turn on the pumps. Where there is doubt about a temporary logo or identification the DFS operator will contact Command & Control on the number provided to them for advice or vice versa.
- The temporary logo holder will need to complete their Emergency Fuel Log Form (Appendix 2) provided by Command & Control each time they refuel. Once refuelled the logo & form is returned and will be reissued when refuelling is next required.
- Trust command team to liaise with BSol ICB for any temporary logo holders (and those driving a recognised logoed vehicle) who need to re-fuel their vehicles at a DFS outside their LRF/SCG area. BSol ICB to liaise with the respective NHSE/LRF/RED in advance to ensure that refuelling problems are not encountered.
- Staff will be encouraged to purchase fuel from a DFS near to their base site if they live outside the BSol ICB area.

A sample temp logo to be used is contained in Appendix 2. The license plate and staff members details will need to be added in the spaces provided, taking care not to obscure any other text on the page.

Temp logos should be printed in A4 size using a colour printer, HODS & CDG Associated Directors of Operations will ensure that staff using non-logoed vehicles, are using their vehicles for essential patient related journeys only.

Temporary logo scheme abuses

During a period of fuel supply disruption, The Trust needs to make all staff aware that abuse of their privileged provision in obtaining fuel under any of the schemes in the NEP-F is a criminal offence.

Abuses of the Temporary Logo Scheme can result in offenders being prosecuted under the Energy Act 1976 and be subject to disciplinary action by the Trust.

The maximum penalty is 2 years imprisonment or unlimited fine.

(National Emergency Plan for Fuel (NEP-F) Version 4)

The Department of Energy and Climate Change's legal advice is that:

'Once issued with a logo, on the part of the user, the filling of a vehicle where its use is not necessarily incidental to the carrying out of the functions of the service provider is where the offence lies.'

Temporary Logo Scheme Examples of Do's & Don'ts

Do's

- Complete personal fuel record sheet (Appendix 2)
- Delivery of care in the community
- On Call response
- Only request TLS when fuel level is $\frac{1}{4}$ of tank or less
- Photographic ID (Trust ID Card & other form of ID), Temporary logo and method of payment must be present when purchasing fuel

Don'ts

- Family members driving your car
- Fill family members car(s)
- Fill portable containers with road fuel
- Use for commuting to & from work day to day
- Use for personal travel (Shopping, school run, visiting family, etc.)

Appendix 1 – Temporary Logo Scheme Issue Log

The following table should be used to record the details of when and to whom temporary logos have been issued and returned.

Date Issued	Name	Department, CDG & Site	Role & reason for fuel i.e. On Call	Number Plate	Issued by	Expected return date	Date Returned

Appendix 2 – Temporary logo and Emergency Fuel Log Form
(Reference: NEP-F)



**Department for
Business, Energy
& Industrial Strategy**

 <p>University Hospitals Birmingham NHS Foundation Trust</p> <p>University Hospitals Birmingham NHS Foundation Trust – Add Site</p>	 <p>PRIORITY FUEL USER BY ORDER OF HER MAJESTY'S GOVERNMENT UNDER THE ENERGY ACT 1976</p>
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**Add registration
plate details**

Once issued with this form it must be kept by the individual and a logo will be issued for each fuel purchase. Once form completed return to Command & Control. TLS should only be used when there is **only a ¼ tank** of fuel in your vehicle.

This Emergency Fuel logo form must only be used at the nearest DFS to your base site as may not be accepted outside of this area.

Name		License Plate		Department, CDG & Site	
Role			Purpose/Use		
Date & Time	Liters of fuel obtained	Type of fuel i.e., petrol/diesel	Filling Station		

Abuses of the Temporary Logo Scheme can result in offenders being prosecuted under the Energy Act 1976 and be subject to internal disciplinary action by the Trust. The maximum penalty is 2 years imprisonment or unlimited fine.

(West Midlands Conurbation LRF, Fuel Disruption Options Framework – V2.2 December 2023 DRAFT)

Appendix 3 – Temporary Logo Application

Name		Date	
Contact Tel:		Site & CDG	
Brief description of service provided, including any call out required			
Assessment or role/service (tick)	Yes	No	Reason
Has the above service been identified as a critical service within the BCM Plan & Planning for a Fuel Supply Disruption checklist (Appendix 5 been completed).			
Would the person fulfilling the role be conducting essential health, social care or lifesaving services, taking into account the levels of service that would be reasonably expected to be delivered during an emergency period.			
Would this scheme be used for the purpose of getting this member of staff to work?			
Could the service be delivered by the use of public transport?			
Could the above service be delivered by the use of car sharing?			
Could the service be delivered by using the MPS scheme?			
Could the service be delivered by homeworking?			
<p>Declaration: In applying for a temporary logo, I confirm that I understand:</p> <p>The purpose and scope of the scheme and the penalties for its misuse. Abuses of the Temporary Logo Scheme can result in offenders being prosecuted under the Energy Act 1976 and be subject to internal disciplinary action by the Trust. The maximum penalty is 2 years imprisonment or unlimited fine.</p> <p>Any purchases made under this scheme may be monitored cross referenced with mileage claims and require justification.</p> <p>Further clarification and documentation to support this application may be sought.</p>			
Print & sign:	Driver	Line Manager	Command & Control
Date:			

Appendix 4 – Predetermined key/priority users

The following staffing groups have been pre-identified as key/priority users for the Temporary Logo scheme if activated by the Government.

Staff Group	Reason
Community Nursing	Key/essential staff to ensure patient care in the community. To include Trust District Nurses
Estates Department	Essential maintenance & repair
Facilities Department	Essential Cleaning, Catering, Portering, Non-Patient Transport and Front of House Services
Command & Control On-Call	Key/essential staff
Key Support Services as identified in BCM plans	As Assigned to ensure patient care continues
Key Medical & Nursing (Including Midwifery)	As Assigned to ensure patient care continues
On-Call Staff	Key/essential staff
IT Services	1 x Leased van used for transporting kit across all sites
<p>UHB internal vehicles & other Sub Contractor Vehicles – to support/deliver essential maintenance/services.</p> <p>The following companies are an example of this</p> <ul style="list-style-type: none"> • Apogee • BAMT Couriers • Birmingham Ambulance Mobility Transport • Engie • G4S • Selection Services • Taxi Companies 	<ul style="list-style-type: none"> • PTS vehicles • Mortuary vehicle Heartlands. • Site shuttle services for staff to move across all Trust sites • Vehicles for movement of meals from Solihull & Queen Elizabeth Hospitals to other sites (key service) • Waste management • Procurement stores • 3 x Pharmacy Chemo labs • 4x4 (2 on site daily) during winter/inclement weather only not for day-to-day use • 4 x 4x4 for backup to collect medical gases for Maternity Department & Security • 1 x Response car • 2 x on site daily – Removal of waste Good Hope • 2 x on site daily – Removal of waste Heartlands. • Delivery of linen services • 2 x on site daily – PTS vehicle use • 1 x mortuary vehicle • 3 x Procurement lorries • 1x catering lorry. • 2 x chemo therapy cross site vans • 2 x medical records Luton van • 5 x Renal Dialysis on call vehicles

	<ul style="list-style-type: none">• 1 x Renal Dialysis specimen collection• 6 x GP specimen collection• 2 x 4x4 vehicles• 1 x Satellite site specimen collection• 2 x Q-Park shuttle buses• Birmingham Ambulance Mobility Transport – Transportation of patients• 3 x Apogee cars (IT Support Services) – Cross site cover• 2 x Selection Services cars (IT Support Services) – QEHB only• Taxi Firms – Discharging of patients & Staff movement Castle Cars (GHH, QEHB & Sol) – 0121 472 2222 Five Star Cars (BHH) – 0121 685 1111
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Appendix 5 – Planning for a Fuel Supply Distribution Checklists

To be completed by Trust or Hospital Executive Team				
1. Assessing the impacts of a fuel shortage on your business				
Planning is essential for any organisation during a fuel shortage. The list below gives some guidance to basic steps that could make your organisation more resilient.				
Initial when complete				
Complete	In progress	Not started	Not applicable	
				Identify your organisation's critical services that must be maintained.
				Identify the critical services delivered by your organisation which would be affected by a fuel shortage.
				Which critical activities and resources (including employees) support your key products and services (e.g., medical materials, suppliers, sub-contractor services/products, security)?
				Consider how internal resources could be re-allocated to ensure the delivery of critical services is maintained. Are staff able to safely cover other roles to ensure that your critical services can be delivered? Will additional training be required?
				Discuss with your suppliers/sub-contractors whether they have robust Business Continuity Plans in place – your organisation's resilience is only as good as those on whom it depends. Ask your suppliers how they plan to respond to a crisis and what support they will give to your organisation. Consider whether future contracts should reflect concerns.
				Decide how a reduction in service could be achieved while still delivering critical services. How non-critical work would be stopped safely, smoothly and restarted again when possible to do so.
				How will the support functions of your organisation be affected by a fuel shortage? E.g., building maintenance, cleaning, food provisions for patients.
				Identify how you would learn of a fuel shortage and what criteria would need to be met for your organisation to implement business continuity measures. What actions would need to be taken and at which points?
				Assess the feasibility of increasing flexible working for staff (e.g., working from home).

To be completed by CDG Associate Directors of Operations or Heads of Services

2. Travelling to and from the place of work

Getting staff to their place of work can be difficult during a fuel supply disruption, but there are various options to consider in order to overcome this obstacle.

Initial when complete				
Complete	In progress	Not started	Not applicable	
				Document how staff usually travel to work and whether and what alternative forms of transport would be available if required. Reference Ward/Department/Service BCM plan
				Consider whether it is possible for staff to work from home and support this where feasible.
				Consider the use of other hospital sites or satellite offices as staff may live closer to these, therefore it may be easier for staff to get to those locations to work.
				Is car-sharing possible for some staff?
				Encourage staff to use alternative means of transport instead of private vehicles, this may take longer but may enable staff to get to the organisation's premises. This could take the form of offering flexibility in their working time or providing relevant facilities e.g., bike racks, showers etc.
				Is it possible to organise communal travel for some staff, for example by taxi or minibus.
				Are there local hotels or other facilities where staff could stay?

To be completed by Communications Team (In line with CEO/COO)

3. Communication

It is crucial to have clear and concise messages ready to give to your staff, patients and suppliers in the event of disruption to your organisation. It is important to ensure that the appropriate message is delivered to the correct people be they a staff member or patients.

Initial when complete				
Complete	In progress	Not started	Not applicable	
				Have an agreed practice on how to communicate plans to staff and what might trigger the business continuity plan being implemented.
				Have clear and concise messages ready, and a means of communicating to your staff that you are implementing some business continuity measures and how this will affect them.
				Ensure that you have a named contact that people within the organisation are aware of and emergency contact details of staff.
				Have clear and concise messages ready, and a means of communicating them to your staff, to let them know that business is returning to normal and that business continuity measures are no longer in effect.
				Consider the messages you might need to give to your patients and the process for doing so. In some circumstances it may be useful to discuss possible impacts in advance. This dialogue will help inform planning on both sides and will be particularly important if your products are likely to be delayed.
				Consider how your suppliers are going to be affected by a fuel shortage. Ensure there are clear lines of communications between you both and a process of keeping supplier and organisation informed of progress. Discuss with your suppliers how they intend to respond to a fuel shortage.

To be completed by Trust or Hospital Executive Team				
4. Other considerations				
There are other considerations you may wish to take into account				
Initial when complete				
Complete	In progress	Not started	Not applicable	
				During a fuel shortage there may be other demands on staff (e.g., children may not be able to attend school, staff sickness). Consideration should be given to the impacts of these situations.
				Consider reducing the number of meetings that involve travel, and instead consider teleconferencing or re-scheduling.
				Can mutual aid – sharing expertise or resources, physically or at a distance – with other Hospital Trusts/organisations help in delivering your critical services?
				Do weather or seasonal work patterns affect your plans, for example in terms of travel options, or demand for your services?
				Consider having a variety of vehicles in your fleet running on different fuels, for example petrol, diesel and hybrid vehicles, to provide greater flexibility and resilience.
				How will your customers or service recipients be affected by the fuel shortage? This could lead to reduced demand for your services, or increased demand and both will have implications for your business continuity plans.
				Consider keeping a supply of critical parts / commodities to ensure you can continue some, if not all, service. Your supplier may not be able to complete their deliveries.
				Keep details of alternative suppliers should your primary supplier fail.

Reference: Department of Energy & Climate Change, Business Continuity Management for Fuel Shortages, downloaded 15th January 2024 from [Business Continuity Management for Fuel Shortages \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/114222/business_continuity_management_for_fuel_shortages.pdf)

Appendix 6 – Commonly used Acronyms

BEIS	Department for Business, Energy & Industrial Strategy
BCC	Birmingham Chest Clinic
BCM	Business Continuity Management
BCP	Business Continuity Plan
BHH	Heartlands Hospital
BSol ICB	Birmingham & Solihull Integrated Care Board
CBRN	Chemical Biological Radiological Nuclear
CCA	Civil Contingencies Act
CD	Controlled Document
CEO	Chief Executive Officer
CDG	Clinical Decision Group
COBR	Cabinet Office Briefing Rooms
COMAH	Control of Major Accident Hazards
COO	Chief Operating Officer
DECC	Department of Energy & Climate Change
DFS	Designated Filling Stations
DHSE	Department of Health & Social Care
DPH	Director of Public Health
ED	Emergency Department
EPO	Emergency Planning Officer
EPRR	Emergency Preparedness, Resilience and Response
ESS	Emergency Services Scheme
FSM	Forecourt Supply management
GHH	Good Hope Hospital
HOD(s)	Hospital Operational Director(s)
ICB	Integrated Care Board (Locally Birmingham & Solihull)
IMT	Incident Management Team
IRP	Incident Response Plan
JESIP	Joint Emergency Services Interoperability Principles
LGD	Lead Government Department
LHRP	Local Health Resilience Partnership
LRF	Local Resilience Forum (Locally West Midlands Conurbation)
NEP-F	National Emergency Plan for Fuel
NHS	National Health Service
NHSE	NHS England (locally NHSE Midlands)
MPS	Maximum Purchase Scheme
PTS	Patient Transport Services
QEH/QE	Queen Elizabeth Hospital Birmingham
RED	Regional Emergency Division
SAGE	Scientific Advice to Government in Emergencies

SCG	Strategic Coordinating Group (Multiagency Command)
SOL/SH	Solihull Hospital
SITREP	Situation Report
STAC	Scientific and Technical Advice Cell
TCG	Tactical Coordinating Group
TLS	Temporary Logo Scheme
UHB	University Hospitals Birmingham (Trust)
UKHSA	UK Health Security Agency
WMAS	West Midlands Ambulance Service
WMFS	West Midlands Fire & Rescue Service
WMP	West Midlands Police