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## MAJOR INCIDENT RESPONSE AND RECOVERY PLAN

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| Date Last Updated:       |   |
| Plan Owner               | [Insert individual who will hold responsibility for this plan]    |
| Authorised for issue by: | [Insert individual or body responsible for sign off of this plan] |
| Issue Date:              |   |
| Review Date:             |   |

**IN AN EMERGENCY START AT SECTION 3**

## CHIEF EXECUTIVES FORWARD

A major incident may occur at any time of the day or night. It is vital that we are prepared and can respond at short notice, providing a co-ordinated range of emergency, mid-term and long-term services to those involved, including patients, relatives, and friends, and our own staff. As such, emergency planning is considered a priority within South Staffordshire Primary Care Trust (PCT).

This Major Incident Response and Recovery Plan describes South Staffordshire PCT's operational command and control structures required to manage the effects of a major incident or disaster within our area of responsibility. This plan framework has been produced to unite individual Trust's arrangements for; Anticipating, Assessing, Preventing, Preparing, Responding and Recovering from those potential hazards/ threats and their consequences as laid down in the Staffordshire Community Risk Register (Located on the Staffordshire Fire and Rescue website: [http://www.staffordshirefire.gov.uk/ccm/cms-service/stream/asset/?asset\\_id=1597004](http://www.staffordshirefire.gov.uk/ccm/cms-service/stream/asset/?asset_id=1597004)).

As the Chief Executive Officer of South Staffordshire PCT I assume responsibility for ensuring this organisation's Major Incident Response and Recovery Plan is built on the principle duties of the Civil Contingencies Act 2004 (CCA) and the revised NHS Emergency Planning Guidance 2005.

Stuart Poyner

|   |        |
|---|--------|
| <b>Chief Executive, South Staffordshire PCT</b> |        |
| Signed:   | Dated: |

**DOCUMENT VERSION CONTROL**

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**PLAN OWNER**

This plan is owned by **[Insert named individual]** **[Insert Designation]** who is responsible for ensuring that it remains up to date. The plan owner is also responsible for ensuring that the plan and the resources required are made available for testing.

To report changes or amendments to this document, contact the above named individual by Phone **[Insert Phone Number and Extension]** or email **[Insert Email address in full]**.

## ACKNOWLEDGEMENTS

This Major Incident Response and Recovery Plan has been prepared in accordance with the following guidance;

- BSi (2006) **BS 25999: Code of Practice for Business Continuity Management**. BSi
- Cabinet Office (2004) **Civil Contingencies Act 2004**
- Cabinet Office (2003) **Dealing with Disaster: Revised 3<sup>rd</sup> Edition**
- Department of Health (2000) **Deliberate Release of Biological and Chemical Agents: Guidance to help plan the Health Service Response**.
- Department of Health (2002) **Emergency Planning and Response to Major Incidents: Summary of Roles and Responsibilities**
- Department of Health (2002) **Priority Communication: Primary Care Trusts: Emergency Planning Function**
- Department of Health (2005) **The NHS Emergency Planning Guidance 2005: Emergency Preparedness Division**.
- HM Government (2005) **Emergency Preparedness: Guidance on Part 1 of the Civil Contingencies Act 2004**.
- HM Government (2005) **Emergency Response and Recovery: Non-statutory guidance to complement Emergency Preparedness**.
- National Audit Office (2002) **Facing the Challenge: NHS Emergency Planning in England**
- National Health Service Executive (1998) **Planning for Major Incidents: The NHS Guidance**
- National Health Service Executive (1999) **Clinical Guidance: In the new NHS**
- National Health Service Executive (1999) **Governance in the new NHS: Controls Assurance Statements 1999/2000: Risk Management and Organisational Controls**
- Staffordshire Integrated Emergency Planning (2004) **Major Incident Procedures**
- Standards Association of Australia (1999) **Risk Management AS/NZS 4360:1994**

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| 4                | Managing Director Provider Services                                | To be inserted |
| 5                | Communications Manager   | To be inserted |
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| 7                | HEPO   | To be inserted |
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# 1 POLICY

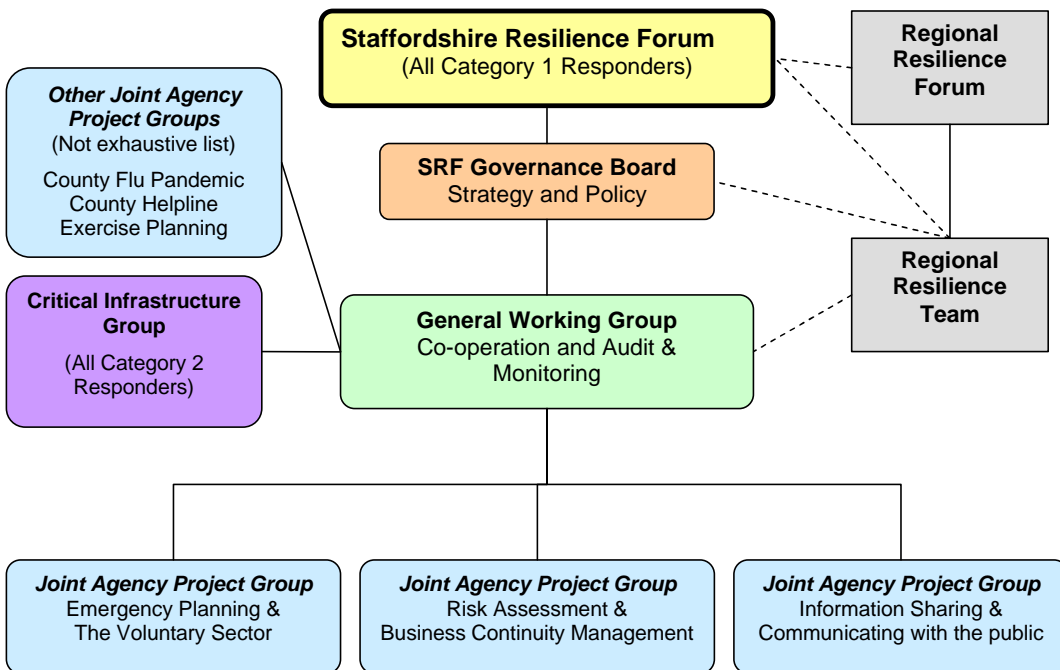
## 1.1 INTRODUCTION

1.1.1 This Trust as a Category 1 Responder has a number of statutory obligations, which have been set out by the Civil Contingencies Act 2004 (CCA) and its accompanying Contingency Planning Regulations 2005. Under the auspices of the CCA this Trust must undertake certain additional functions;

- o Undertake risk assessments relevant to the Trust’s geographical area of responsibility;
- o Maintain plans to ensure that, if an emergency occurs, the Trust can continue to perform its functions;
- o Arrange for the publication of all/ part of the plans developed; and
- o Maintain arrangements to warn the public and provide information and advice to the public if an emergency occurs.

1.1.2 To ensure that the Trust is able to fulfil these obligations, it is important that it is involved in the wider planning process with partner organisations. Within the NHS, this includes other NHS Trusts; North Staffordshire PCT, Acute Trusts, Staffordshire Ambulance and Health Protection Agency. In the broader community, detailed planning is undertaken with the Government Office, Local Authorities, Police, Civil Contingencies Unit and Fire and Rescue Service through the Staffordshire Civil Contingencies Structure (See Figure 1).

Figure 1: Civil Contingencies Structure in Staffordshire



- 1.1.3 To comply with the Health Care Commission requirements from National Standards, Local Action: Health and Social Care Standards and Planning Framework 2005/2006 – 2007/2008, the major incident response and recovery plan(s) of this trust will be assessed as part of the performance management framework.

The Public Health Core Standard C24 states:

**“Healthcare organisations protect the public by having a planned, prepared and, where possible, practised response to incidents and emergency situations which could affect the provision of normal services”.**

- 1.1.4 This plan is intended to be invoked, in whole, or in part to manage the range of consequences/impacts that may arise during a Major Incident.

## **1.2 PLAN PURPOSE**

- 1.2.1 The Major Incident Response and Recovery Plan;
- 1.2.2 Provides a framework to manage the disruption caused by a major incident, which has the potential to significantly impact upon the health of South Staffordshire’s local communities.
- 1.2.3 Establishes how health care will be co-ordinated during a; major, mass or catastrophic incident.

## **1.3 SCOPE**

- 1.3.1 This plan describes;
- The roles and responsibilities of staff within South Staffordshire PCT during a major, mass or catastrophic incident;
  - The mechanism for requesting mutual aide support;
  - The role of the Emergency Control Room Team;
  - The care and welfare of staff;
  - Returning the trust to a state of normality; and
  - The necessary reference information and policies to support response and recovery activities.

## **1.4 OBJECTIVES OF THE PLAN**

- 1.4.1 To ensure;
- The Emergency Control Room Team’s policy and procedures regarding major incidents are carried out;
  - A rapid response to major incidents that threaten the provision of health services to the community.
  - Efficient and effective communications with the various stakeholders involved in a major incident response or recovery effort;
  - Sufficient resources are made available;
  - Training and exercises capture the needs of the Trust;
  - The management of the major incident is reviewed after the event to identify lessons for improvement.

## 1.5 DEFINITION OF MAJOR INCIDENTS

1.5.1 With the implementation of the Civil Contingencies Act 2004 (CCA), the term “*emergency*” is becoming the buzz word for what NHS organisations call a “*major incident*”. NHS organisations may continue to use the term major incident, but need to be aware that the term emergency will become common parlance for many of their multi agency partners, and they may wish to consider its use.

1.5.2 For the purposes of clarity both the NHS Emergency Planning Guidance definition (*major incident*) and the Civil Contingencies Act 2004 guidance definition (*emergency*) is documented below;

1.5.2.1 The Civil Contingencies Act 2004 defines an emergency as;

*‘An event or situation which threatens serious damage to human welfare in a place in the UK, the environment of a place in the UK, or war or terrorism which threatens serious damage to the security of the UK’. It further states ‘The act, the regulations and the guidance consistently use the term emergency, but there is nothing in the legislation that prevents a Responder from using the term ‘Major Incident’ in its planning arrangements for its response’.*

1.5.2.2 For the purposes of this plan, South Staffordshire PCT will use the NHS definition of a major incident;

*‘Any occurrence that presents serious threat to the health of the community, disruption to the service or causes (or is likely to cause) such numbers or types of casualties as to require special arrangements to be implemented by hospitals, ambulance trusts or primary care organisations’.*

1.5.3 Major incidents requiring the activation of the *South Staffordshire PCT* emergency control room may arise in a variety of ways;

- **Big Bang** e.g. serious traffic accident.
- **Rising Tide** e.g. infectious disease epidemic.
- **Cloud on the Horizon** e.g. a serious threat such as a major chemical spill in a neighbouring county that requires preparatory action.
- **Headline News** e.g. public or media alarm about a personal threat.
- **Internal Incidents** e.g. loss of GP Surgery
- **Mass Casualties**
- **Pre-planned major events that require planning** e.g. demonstrations, sports fixtures.
- **Deliberate/ Accidental Chemical, Biological, Radiological, Nuclear materials**

## 1.6 RISK ASSESSMENTS

1.6.1 Community wide risks: Risk assessment is the basis for emergency planning; it ensures that plans made are relevant to the risk present and proportionate to its severity and likelihood of occurrence. Within the community, it is undertaken by a Joint Agency Project Group Chaired by Staffordshire Fire and Rescue Service. The Trust has the right to attend this group as a Category 1 Responder but at present is represented by the Civil Contingencies Unit. The main output from this group was the Community Risk Register, which the Trust makes due allowance for in the provision of its Risk Management Strategy.

1.6.2 Internal Trust Risks: [to be inserted]

## 1.7 EMERGENCY PLANNING STRUCTURE WITHIN THE TRUST

1.7.1 The Trust [insert – major incident planning group/emergency planning group??] has a responsibility to:

- Ensure that plans are in place to manage any incident, internal or external, which requires special provision to be made;
- Write and publicise plans to ensure Business Continuity for any disruptions impacting on Trust activity;
- Ensure all emergency plans are kept up to date;
- Ensure that the trust is compliant with all legislation relevant to Civil Contingencies.
- Ensure that plans are exercised appropriately;
- Ensure that all staff in the Trust are familiar with the plan for their particular work area and with the outline of the Trust plan as it effects the Trust; and
- Participate in multi-agency planning for emergencies as it affects the Trust.

1.7.2 Within the Trust, a [insert group e.g. Major Incident Planning Group] will be chaired by [insert designation and deputy] and include representatives of each department; Estates and Facilities, Risk Management, ICT, Communications, Public Health, Primary Care, Nursing and Operations and other members may be co-opted as appropriate.

## 1.8 COMMUNICATIONS

1.8.1 Communications are always difficult in Major Incidents. Trust Facilities include;

- [insert communications – fax/telephone/email/resilience communications]

## 1.9 THE MEDIA

1.9.1 There will be an immediate interest from the press. The Trust Communications Lead and assistants will be responsible for all press and media relations. They will arrange press conferences and other contacts between Trust staff and journalists.

1.9.2 Please note:

- **All press and media information must be channelled through the Trust Communications Lead or their deputy.**
- Spontaneous remarks/ comments and incautious statements can cause immense distress to other members of staff and relatives, as well as creating organisational difficulties for the PCT.

## **1.10 SUPPORT SERVICES**

1.10.1 **Key personnel in each department will be contacted by the switchboard** (during office hours) or via the Emergency Control Room (out of hours). Each department is responsible for calling in required staff on a cascade system. Their call-out list will be regularly updated and be available to all key personnel.

1.10.2 Any major difficulties encountered by any of the support departments should be communicated immediately to the Emergency Control Room.

## **1.11 ARRANGEMENTS FOR STAFF**

1.11.1 It is important that those managing departmental responses ensure staff availability throughout the incident. This will involve a phased call out after an assessment of the likely duration has been obtained from the Major Incident Team.

1.11.2 All staff should be aware that the emotional consequences of the incident will affect all staff whether they were directly involved or not. Individual staff will have access to formal counselling services through **[insert internal means]** or **[insert external means]**.

## **1.12 PLAN REVIEW**

1.12.1 It is the responsibility of individuals, units and departments to ensure that any changes to its procedures, staff, contact details etc which affect the contents of this document, are notified to their respective representative on the Trust's Major Incident Planning Group in order for amendments to be made.

1.12.2 This plan will be reviewed by the Trust's Major Incident Planning Group with the support of the Civil Contingencies Unit every 12 months or earlier if a change in circumstances takes place.

## **1.13 TRAINING AND EXERCISES**

1.13.1 It is the Trust's own responsibility to ensure that appropriate members of staff are aware of the contents of this document and their role in a Major Incident.

1.13.2 This Trust with support from the Civil Contingencies Unit will be responsible for the formulation and delivery of an annual training and exercise programme for this plan and it's supporting documents and procedures.

## **1.14 DEBRIEFING AND LESSONS TO BE IDENTIFIED**

1.14.1 It is the responsibility of the Emergency Control Room Team Chair to manage the immediate hot debrief, which should take place within 48 hours of the cessation of an incident. The debrief should contain representatives from all of the agencies involved

in the incident. The debrief would involve reviewing the response to the incident and the decisions made in order to ascertain where improvements can be made to current plans and procedures. Following the hot debrief a follow up structured debrief should take place within two weeks.

## **1.15 ACCESSIBILITY OF THE PLAN**

- 1.15.1 The Major Incident Response and Recovery Plan is available on the Trust's intranet. Copies will also be held by [insert designations] and 2 copies will remain in the Emergency Control Room.

## 2 MANAGEMENT AND CO-ORDINATION

### 2.1 OBJECTIVES OF A COMBINED RESPONSE

- 2.1.1 All agencies including the NHS that may become involved in major incident response and/or recovery at the local level all work to the following set of common objectives.
- Saving and protecting life;
  - Relieving suffering;
  - Containing the emergency – limiting its escalation or spread;
  - Providing the public with warnings, advice and information;
  - Protecting the health and safety of personnel;
  - Safeguarding the environment;
  - Protecting property;
  - Maintaining or restoring critical services;
  - Maintaining normal services at an appropriate level;
  - Promoting and facilitating self help in the community;
  - Facilitating investigations and inquiries;
  - Facilitating the physical, social, economic and psychological recovery of the community; and
  - Evaluating the response and recovery effort and identifying lessons to be learned.
- 2.1.2 The generic national framework for managing major incident response and recovery is applicable, irrespective of size, nature or cause of an emergency, but remains flexible enough to be adapted to the needs of particular circumstances.
- 2.1.3 This framework identifies the various tiers of management in major incident response and recovery, and defines the relationships between them. This framework will assist the Trust to develop its own response and recovery procedures.
- 2.1.3 Within the framework, the management of the major incident response and recovery effort is undertaken at one or more of three ascending levels, which are defined by their differing functions rather than by specific rank, grade or status:
- **Bronze** – operational level;
  - **Silver** – tactical level;
  - **Gold** – strategic level;
- 2.1.5 A characteristic of the management and co-ordination of a major incident occurs from the bottom-up. The operational level being activated first, with subsequent levels of management added in relation to how the incident escalates. There will be occurrences when all three tiers are activated together or the strategic tier is activated first depending on the type of incident.

### 2.2 BRONZE – THE OPERATIONAL LEVEL

- 2.2.1 Bronze is the level at which the management of immediate “hands-on” work is undertaken at the site(s) of the major incident or other affected areas.

**2.3 SILVER – THE TACTICAL LEVEL**

- 2.3.1 The purpose of the silver level is to ensure that the actions taken by bronze are co-ordinated, coherent and integrated in order to achieve maximum effectiveness and efficiency.
- 2.3.2 Silver usually comprises the most senior officers of each agency committed within the area of operations, and will assume tactical command of the event or situation. Silver commanders will:
  - o Determine priorities for allocating available resources;
  - o Plan and co-ordinate how and when tasks will be undertaken;
  - o Obtain additional resources if required;
  - o Assess significant risks and use this to inform tasking of bronze commanders; and
  - o Ensure the health and safety of the public and personnel.

**2.4 GOLD – THE STRATEGIC LEVEL**

- 2.4.1 If an incident is of sufficient scale a Strategic Co-ordinating Group (SCG) or Multi Agency Gold (MAG) may be convened. The purpose of the SCG/ MAG is to take overall responsibility for multi-agency management of the emergency and to establish the policy and strategic framework within which silver will work. The SCG/ MAG will:
  - o Determine and distribute a clear strategic aim and objectives and review them regularly;
  - o Establish a policy framework for the overall management of the event or situation;
  - o Prioritise the demands of silver and allocate personnel and resources to meet requirements;
  - o Formulate and implement media-handling and public communication plans; and
  - o Direct planning and operations beyond the immediate response in order to facilitate the recovery process.

**2.5 MANAGEMENT AND CO-ORDINATION FOR PCT's DURING MAJOR INCIDENTS**

| Command Level |          | PCT Response   |
|---------------|----------|--|
| <b>Gold</b>   | Function | Major Incident Team                                    |
|               | Location | South Staffordshire PCT Emergency Control Room         |
| <b>Silver</b> | Function | Departmental Teams (internal/ external incidents)      |
|               | Location | Various – Spread across South Staffordshire            |
| <b>Bronze</b> | Function | Operational Response (specialist requirements)         |
|               | Location | Located at major incident site and/or satellite sites. |

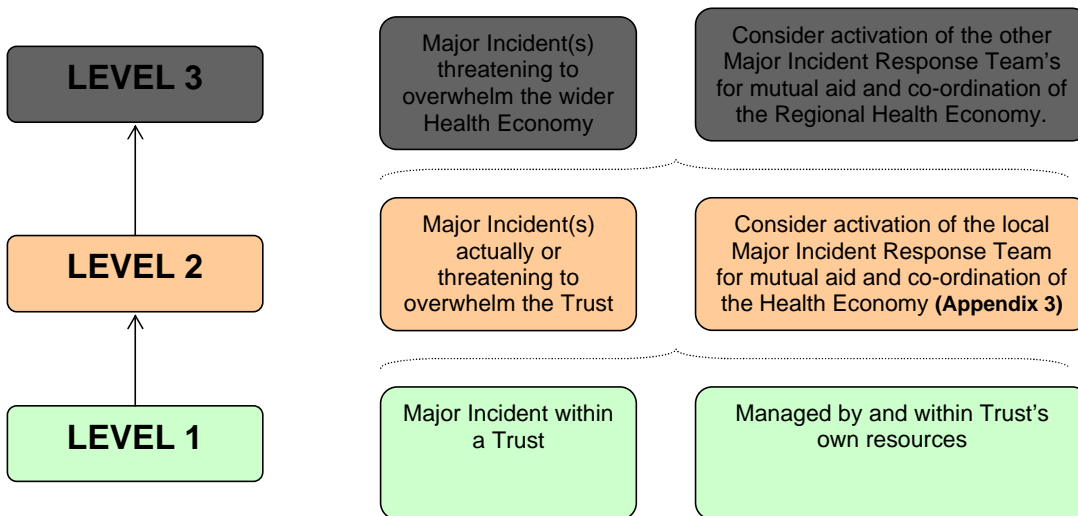
**2.6 MANAGEMENT AND CO-ORDINATION FOR NHS MAJOR INCIDENTS**

| Command Level |          | NHS Response                                     |
|---------------|----------|--|
| <b>Gold</b>   | Function | PCT/ Acute led Strategic Command                 |
|               | Location | Cannock Chase PCT – Major Incident Response Team |
| <b>Silver</b> | Function | Tactical PCT Response                            |
|               | Location | South Staffordshire PCT Emergency Control Room   |
| <b>Bronze</b> | Function | Operational Response (specialist requirements)   |
|               | Location | At actual/ satellite sites of major incident     |

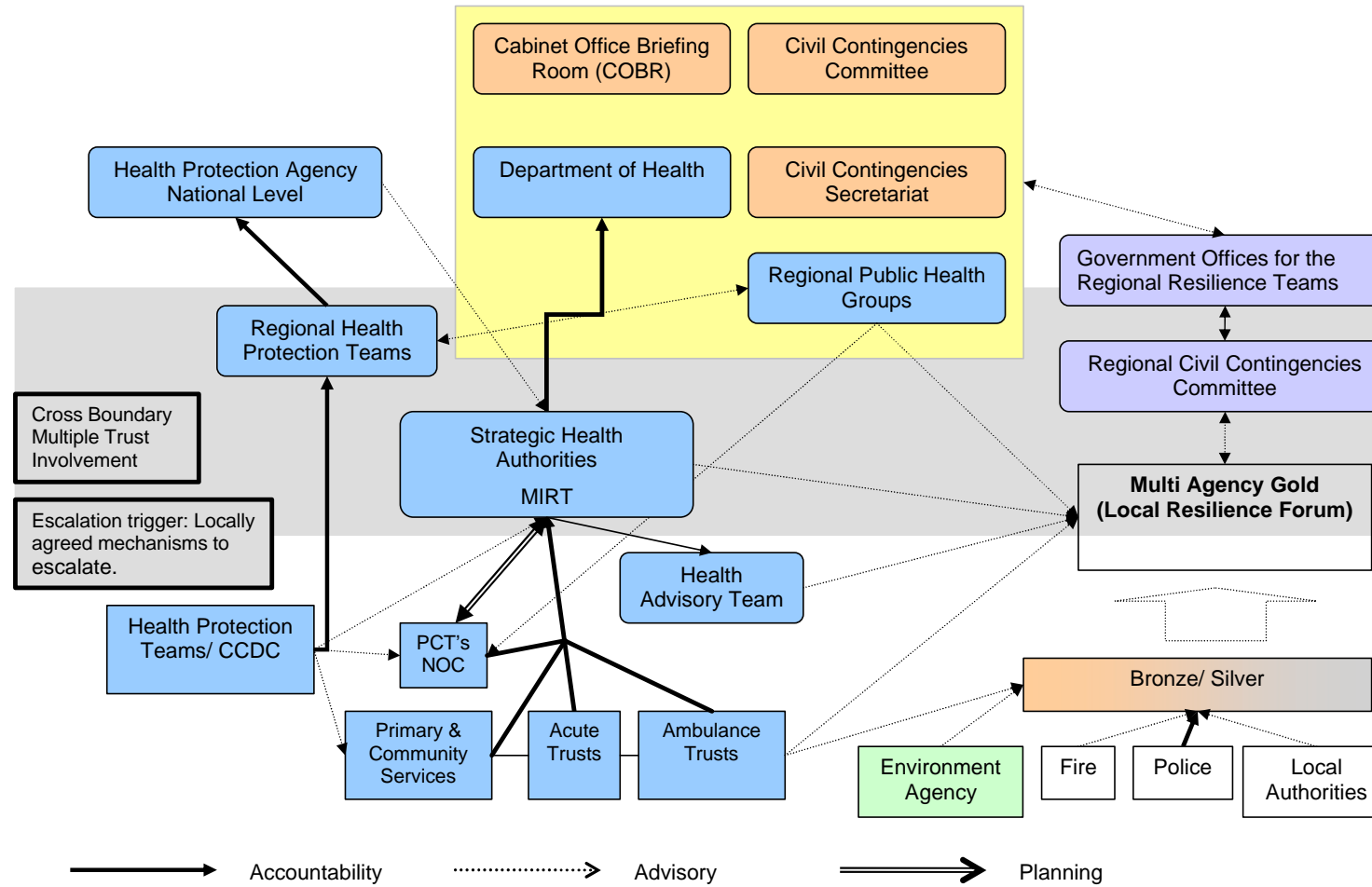
**2.7 MANAGEMENT AND CO-ORDINATION FOR MULTI-AGENCY RESPONSE**

| Command Level |          | Multi-Agency Response  |
|---------------|----------|--|
| <b>Gold</b>   | Function | Police led Multi-Agency Gold                                     |
|               | Location | Police Force HQ  |
| <b>Silver</b> | Function | Co-located Multi-Agency Silver Commands                          |
|               | Location | Depends on scale and number of incident sites                    |
| <b>Bronze</b> | Function | Undertake their roles as laid down in individual emergency plans |
|               | Location | Any location that is managing the impacts of an emergency.       |

**2.8 ESCALATION LEVELS**



2.9 NATIONAL RESPONSE

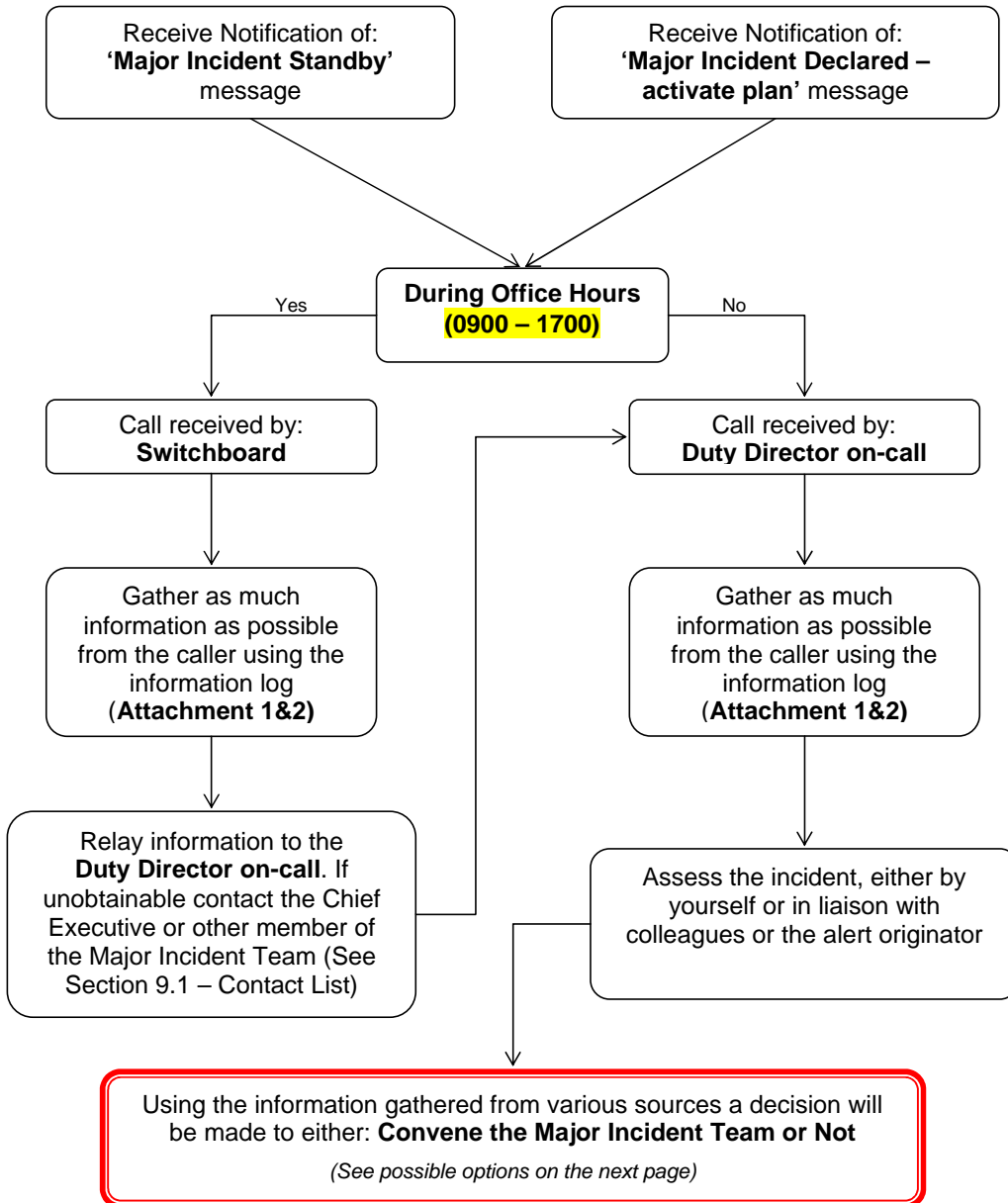


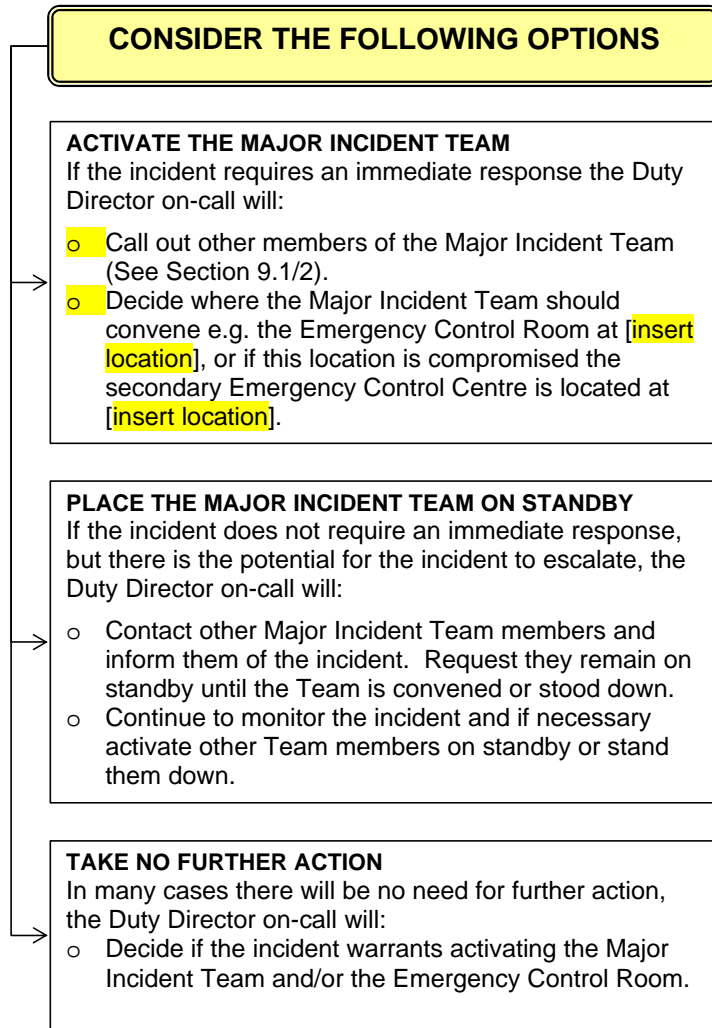
### 3 PLAN ACTIVATION/ IMPLEMENTATION

#### 3.1 ACTIVATION OF THE PLAN

- 3.1.1 The decision to activate the Plan will be made by [insert individual/ designation] (see 3.2), there are a number of standardised statements that may be used by the Emergency Services if an incident has occurred;
- **'Major Incident Standby'**: indicates that a Major Incident may need to be declared by one of the Emergency Services. The Trust at this stage should make preparatory arrangements appropriate to the scale of the incident.
  - **'Major Incident Declared – activate plan'**: indicates that one of the Emergency Services has activated their plan. This warns the Trust that it may need to put the Plan into operation. The decision to activate the plan remains with the Trust.
  - **'Major Incident Cancelled'**: indicates that the above two messages have been cancelled.
  - **'Major Incident Stand Down'**: indicates that the Emergency Services have issued a message stating their Major Incident Plan has been stood down. This may or may not be relevant to the Trust. It is up to individual trusts to assess whether or not they should stand down from major incident status.
- 3.1.2 The Trust's Major Incident Team is likely to be established as a direct result from one of the neighbouring Trusts within Staffordshire's Health Economy, or a neighbouring Health Economy area requesting mutual aid from the Trust.
- 3.1.3 The following list of incidents is not exhaustive but provides a benchmark for triggering the Major Incident Team;
- A major incident falling under the categories described in paragraph 1.5.3; Big Band, Rising Tide, Cloud on the Horizon etc.
  - The Team could be triggered to support the actions or a particular Trust in responding to a major incident on its own premises.
  - An event that has occurred which is not immediately identifiable as a major incident (cloud on the horizon).
  - The Team could also be triggered in some circumstances where there is unusual and higher than normal escalation in activity (e.g. extreme weather).
- 3.1.4 The on-call rota for the Trust is administered and maintained by [insert individual]. A copy of the on-call rota is held by Mid Staffordshire General Hospitals (MSGH) switchboard. Out of hours the on-call director can be contacted via MSGH switchboard using the following number **01785 257731**.
- 3.1.5 On receiving an alert to activate the Major Incident Team the Duty Director on call will make an assessment of the situation and decide whether or not to proceed with the activation of the Major Incident Team procedures (see Para 3.2).

**3.2 PLAN ACTIVATION PROCEDURE**





**3.3 STANDING DOWN THE MAJOR INCIDENT TEAM AFTER A ‘STANDBY’ ALERT**

3.3.1 If the Major Incident Team has been put on standby and subsequently not been activated, the Duty Director on-call must either contact Team members on standby to inform them that they can stand down or nominate another member of the team to do so.

## 4 ESTABLISHING THE MAJOR INCIDENT TEAM

**THE ON-CALL DUTY DIRECTOR ON RECEIPT OF A MAJOR INCIDENT TEAM ACTIVATION REQUEST HAS X HOURS TO ENSURE IT IS FULLY OPERATIONAL.**

### 4.1 CORE MEMBERSHIP

- 4.1.1 The Major Incident Team will consist of the following (see Action Cards – Section 6)
- o Chief Executive / Director on-call
  - o Director of Public Health
  - o Director of Quality & Performance
  - o Managing Director Provider Services
  - o Communications Manager
  - o Office Manager
  - o Health Emergency Planning Officer (according to requirements)

**Once the Team has been established and the details of the incident discussed the members will decide whether other specialists will be required and co-opted onto the group.** (e.g. Civil Contingencies Unit, Blue Light Services, Local Authorities, HPA etc)

### 4.2 SUPPORT PERSONNEL

- 4.2.1 If the Team is to operate effectively it will need administrative support for call taking/ making, minute and log keeping, and other general administrative duties. This should be mobilised as soon as it is likely the Team will be convened.

### 4.3 SUSTAINABILITY

- 4.3.1 In the early stages, the Chair of the Team will determine, in liaison with his/her colleagues, whether there is a need to sustain the Team over a prolonged period of time. If it is thought that this may be the case, then arrangements should be put in place to call and put on standby other 'core team members' and other specialist support personnel.
- 4.3.2 Shift patterns and handover arrangements should be discussed at this stage.
- 4.3.3 If the Team is to proceed for a greatly sustained period of time e.g. pandemic flu, which may last weeks, then decisions need to be made regarding information gathering and dissemination, regular meetings, command and control decision making, conference call arrangements and the need to populate the Emergency Control Room for meetings and out of hours decision making.

### 4.4 STANDING DOWN THE MAJOR INCIDENT TEAM

- 4.4.1 Once the Team is in session and the initial actions in support of the incident put in motion, it is the responsibility of the Chair of the Team, when circumstances permit to plan the strategy for its stand down. This may involve a phased process with the acknowledgement that certain activities may have to continue for some time e.g. media relations and long term welfare requirements to the public and staff.

#### 4.5 KEY ACTIONS OF THE MAJOR INCIDENT TEAM

| Serial | Action   |   |
|--------|--|---|
| 1      | Activate any incident specific plans (internal and/or external)  | Section 7   |
| 2      | Declare a Major Incident situation exists to relevant stakeholders (internal incident only e.g. Trust incident).   | Section 9.1/2 – Contact List                            |
| 3      | Seek clarification that a major incident exists by contacting other stakeholders (external incident).  | Section 9.4 – Contact List                              |
| 4      | Take executive responsibility for the Trust's response to the incident.  |   |
| 5      | Obtain and co-ordinate all information and data about the incident.  | Appendix 1&2 – Information Log and continuation sheets. |
| 6      | Make written factual records of events and decisions that take place, including the activities of co-opted members/ agencies of the group.   | Appendix 1&2 – Information Log and continuation sheets  |
| 7      | Be prepared to send a representative to Multi Agency Gold if requested.  |   |
| 8      | Assess the nature, extent and duration of any continuing hazard to public health.  | Section 9.4.2 – Health Protection Agency, CCDC, HPU     |
| 9      | Agree measures to protect the public, and; <ul style="list-style-type: none"> <li>o Co-ordinate and deploy resources to meet identified needs.</li> <li>o Commission additional services.</li> </ul> Work in liaison with other Health Trusts, Economies and agencies as required. |   |
| 10     | Provide advice, information and support to effected agencies.  |   |
| 11     | Provide advice and information to the Public   |   |
| 12     | Provide advice and briefings to the media.   |   |
| 13     | Internal Communications – provide regular updates to your staff and other parties with an invested interest in the Trust.  |   |
| 14     | External Communications – be prepared to brief agencies including; West Midlands SHA, Major Incident Response Team (if activated), HPA, DH, etc  |   |
| 15     | Monitor progress regularly   |   |
| 16     | Determine the actions, resources and facilities needed to resume normal operations.  |   |
| 17     | Declare <b>Stand down</b> – Collect all written logs and documents, hold a hot debrief.  | Para 4.4.1  |
| 18     | Review and implement the lessons identified from the incident.   | Para 1.8.1  |
| 19     | Ensure any amendments to the plan are actioned.  |   |

**4.6 ESTABLISHING THE EMERGENCY CONTROL ROOM (ECR)**

4.6.1 There is one primary and one standby location for the Major Incident Team to convene. These are shown below and have been designated as 'Primary' (see Appendix 4) and 'Standby' (see Appendix 5).

|                                |  |                            |
|--------------------------------|--|----------------------------|
| <b>Primary Location</b>        | <b>[insert full address and post code]</b>   |                            |
| Contact Number                 | Switchboard:<br>Director on call - <i>(through Mid Staffordshire General Hospitals)</i> 01785 257731<br>Emergency Control Room number <i>(only to be used when the room is operational)</i> : [insert number(s)] |                            |
| Fax Number                     | <b>[insert]</b>  |                            |
| Major Incident Email Address   | <b>[insert]</b>  |                            |
| Contact Number – Key Holder(s) | <b>[insert]</b>  |                            |
| Location Map 1: General        |  |                            |
| <b>[insert map]</b>            |  | <b>[insert directions]</b> |

|                          |  |
|--------------------------|--|
| Location Map 2: Detailed |  |
|                          |  |
| Access                   | [insert process of accessing the building and relevant rooms]          |
| Setting up the ECR       | Procedure located at [insert location] (see Appendix 4 – Floor layout) |

|                                |  |  |
|--------------------------------|--|--|
| <b>Standby Location</b>        | <b>[insert full address and post code]</b>   |  |
| Contact Number                 | Switchboard:<br>Director on call - <i>(through Mid Staffordshire General Hospitals)</i> 01785 257731<br>Emergency Control Room number <i>(only to be used when the room is operational)</i> : [insert number(s)] |  |
| Fax Number                     | <b>[insert]</b>  |  |
| Major Incident Email Address   | <b>[insert]</b>  |  |
| Contact Number – Key Holder(s) | <b>[insert]</b>  |  |
| Location Map 1: General        |  |  |
| <b>[insert map]</b>            | <b>[insert directions]</b>   |  |

|                          |  |
|--------------------------|--|
| Location Map 2: Detailed |  |
|                          |  |
| Access                   | [insert process of accessing the building and relevant rooms]          |
| Setting up the ECR       | Procedure located at [insert location] (see Appendix 5 – Floor layout) |

- 4.6.2 The standby ECR will be used in the event that [insert primary site location] is inaccessible or unusable.
- 4.6.3 The decision to convene at the standby ECR will be made by the Duty Director on-call, or the person acting in his/her stead and should be communicated to the Major Incident Team members at the call out stage.

## 5 ROLES AND RESPONSIBILITIES

### 5.1 KEY NHS RESPONSIBILITIES

- 5.1.1 In the event of a major incident the Responders in Table 1 below, whether individually or as a whole will be expected to carry out their respective roles and responsibilities as laid down in the Department of Health: NHS Emergency Planning Guidance (2005) and the HM Government: Emergency Response and Recovery Guidance (2005).

Table 1: Category 1 and 2 Responders

| Category   | Responder                  | Contact Information          |
|------------|----------------------------|------------------------------|
| Category 1 | Ambulance Service          | Section 9.3.6 – Contact List |
| Category 1 | Primary Care Trusts        | Section 9.3.2 – Contact List |
| Category 1 | Acute Trusts               | Section 9.3.2 – Contact List |
| Category 1 | Health Protection Agency   | Section 9.3.2 – Contact List |
| Category 2 | Strategic Health Authority | Section 9.3.2 – Contact List |

- 5.1.2 Table 2 below gives a brief description of those agencies/ bodies that may be mobilised in support of Category 1&2 Responders or formed to provide specialist advice on specific incidents e.g. Chemical, Biological, Radiological, Nuclear.

Table 2: Specialist Health Responders

| Agency                     | Role   |
|----------------------------|--|
| Health Advisory Team (HAT) | Provide health advice to Police Gold Control through the designated Public Health Adviser. The MIRT may be required to link into the HAT if one is required. |
| First Response             | First Response is a 24/7 Service providing the first point of contact for alerting the MIRT. (See Section 9.3.2 - Contact List)                              |
| Capacity Management Team   | Operates a 24/7 on call rota, which ensures there is a manager available at all times to assist with emergency capacity problems and enquiries.              |
| NHS Direct                 | NHS Direct Staffordshire and Shropshire provide a 24/7 telephone advice and information service to members of the public.                                    |

### 5.2 OTHER KEY RESPONDERS RESPONSIBILITIES

- 5.2.1 A major incident is likely to involve a variety of Category 1 and 2 Responders and a variety of specialist agencies/ committees as required; see table 3 below.

Table 3: Key Responders

| Agency                                 | Role   |
|--|--|
| Police                                 | As described in; <b><i>Emergency Response and Recovery.</i></b><br>(Civil Contingencies Act 2004 non-statutory guidance. |
| Fire and Rescue Service                | As described in; <b><i>Emergency Response and Recovery.</i></b><br>(Civil Contingencies Act 2004 non statutory guidance  |
| Local Authority                        | As described in; <b><i>Emergency Response and Recovery.</i></b><br>(Civil Contingencies Act 2004 non statutory guidance  |
| Regional Civil Contingencies Committee | As described in; <b><i>Emergency Response and Recovery.</i></b><br>(Civil Contingencies Act 2004 non statutory guidance  |
| HM Coroner                             | As described in; <b><i>Emergency Response and Recovery.</i></b><br>(Civil Contingencies Act 2004 non statutory guidance  |
| Armed Forces                           | As described in; <b><i>Emergency Response and Recovery.</i></b><br>(Civil Contingencies Act 2004 non statutory guidance  |
| Voluntary sector                       | As described in; <b><i>Emergency Response and Recovery.</i></b><br>(Civil Contingencies Act 2004 non statutory guidance  |

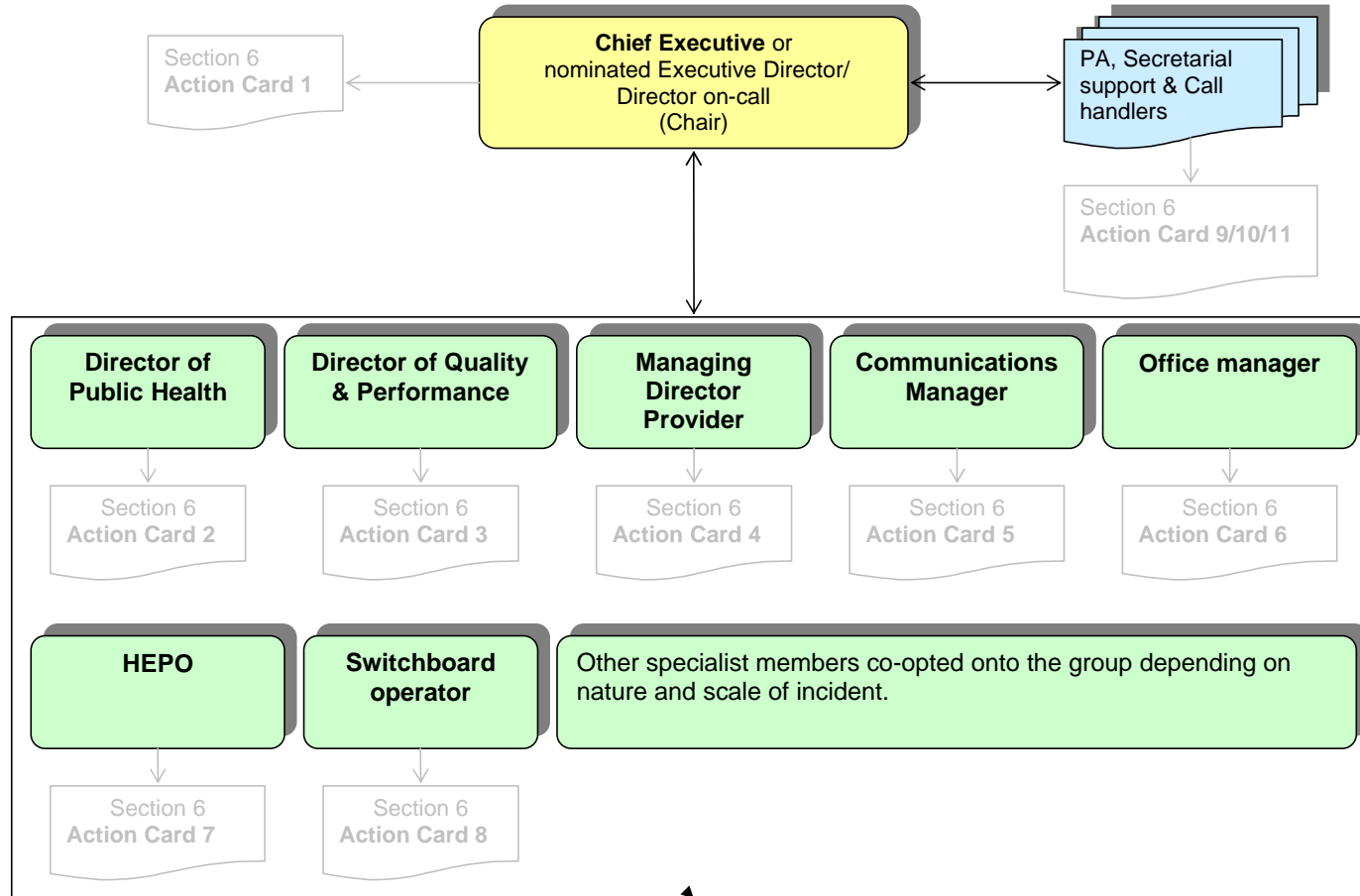
### 5.3 ROLE OF THE PCT

- 5.3.1 As described in Section 2, during a major incident the Trust may need to invoke one or more of its command tiers (Bronze, Silver or Gold) depending on the scale of the incident. Each tier will have its designated role and responsibilities and a group accountable for carrying out those roles and responsibilities, whether responding to a major incident within Staffordshire (or across borders) or an internal business continuity disruption (see Appendix 7).
- 5.3.2 The Trust as part of a wider NHS response would co-ordinate primary and community care services including; general practitioners, community nurses, health visitors, mental health services and pharmacists whom would need to also be heavily involved in the recovery phase of the major incident.
- 5.3.3 In the early stages, following an incident, the focus would be on the follow-up to injuries at the incident, e.g. the continuing recovery of patients, physiotherapy, chest clinics, orthopaedic clinics and post traumatic stress caused by the event. Depending on the nature of the emergency, there may be a requirement for more long-term health monitoring/ surveillance.

### 5.4 ROLES OF EXECUTIVES AND MEMBERS OF THE EMERGENCY CONTROL ROOM

- 5.4.1 The key actions of the Major Incident Team have been set out in Section 4 para 4.5. The Chief Executive/nominated Executive Director or the Duty Director on-call will take initial responsibility for chairing the Major Incident Team.
- 5.4.2 The Chair of the Major Incident Team is a facilitator's role and appropriate expertise should be assembled to support the tasks confronting it (see Figure 2 below).

Figure 2: Roles within the Emergency Control Room



## 6 ACTION CARDS

### 6.1 RATIONALE

6.1.1 The following action cards have been inserted to clarify the actions/ tasks that need to be carried out by those nominated individuals represented in the Major Incident Team.

6.1.2 The following designations have an action card and therefore a role during a major incident;

| No. | Role/ Designation  |
|-----|--|
| 1   | (Chair) Chief Executive/ nominated Director/ Duty Director on-call |
| 2   | Director of Public Health  |
| 3   | Director of Quality & Performance                                  |
| 4   | Managing Director Provider Services                                |
| 5   | Communications Manager   |
| 6   | Office Manager   |
| 7   | HEPO   |
| 8   | Switchboard operator   |
| 9   | Personal Assistant   |
| 10  | Secretarial Support  |
| 11  | Call takers/ makers  |

6.1.3 All staff within the Trust has a responsibility to report any discrepancies with the information contained within this document and the action cards in this section to the plan owner(s) (see page 2 of the preface for contact information).

## 7 SUPPORTING POLICIES, DOCUMENTS AND PROCEDURES

### 7.1 SOUTH STAFFORDSHIRE PCT

7.1.1 South Staffordshire PCT is responsible for ensuring the following documents are kept

| No. | Document Type | Title of Document                         | Document Owner           | Next Review date | Document status | Location                                |
|-----|---------------|---|--------------------------|------------------|-----------------|---|
| 1   | Response Plan | Major Incident Response and Recovery Plan | Trust                    | TBI              | Draft           | Directors/<br>Control Room/<br>intranet |
| 2   | Policy        | Bomb Threat Police                        | Trust                    |                  |                 | Post room/<br>switchboard/<br>intranet  |
| 3   | Response Plan | Major Incident Response Team Plan (MIRT)  | MIRT Group               |                  | Version 1.2     | Director on-call/<br>Control Room       |
| 4   | Response Plan | Heatwave Plan                             | (DH) – Trust             |                  |                 | Control Room/<br>intranet               |
| 5   | Response Plan | National Burns Plan                       | DH                       |                  |                 | Control Room/<br>Intranet               |
| 6   | Response Plan | Regional Smallpox Plan                    | Health Protection Agency |                  | Version 1.3     | Control Room/<br>Intranet               |
| 7   |               |   |                          |                  |                 |   |
| 8   |               |   |                          |                  |                 |   |
| 9   |               | <b>[INCOMPLETE]</b>                       |                          |                  |                 |   |
| 10  |               |   |                          |                  |                 |   |
| 11  |               |   |                          |                  |                 |   |
| 12  |               |   |                          |                  |                 |   |
| 13  |               |   |                          |                  |                 |   |

**8 APPENDICES****8.1 LIST OF APPENDICES**

| <b>Appendix</b> | <b>Description</b>                                   |
|-----------------|--|
| 1               | Information Log                                      |
| 2               | Continuation Sheets                                  |
| 3               | Major Incident Response Team – Call out procedure    |
| 4               | Floor Layout – Primary Emergency Control Room        |
| 5               | Floor Layout – Standby Emergency Control Room        |
| 6               | Glossary of Terms                                    |
| 7               | Types of Incident and Recommended “Level” Benchmarks |

**Appendix 1**

**1 MAJOR INCIDENT RESPONSE TEAM INFORMATION LOG**

|  |  |
|--|--|
| <b>Name of Caller:</b>   |  |
| <b>Originating Organisation:</b><br>e.g. Police, Fire, Ambulance |  |
| <b>Date and Time of Call:</b>                                    |  |
| <b>Contact Number:</b> (Mobile and Landline)                     |  |

|   |  |
|---|--|
| <b>Major Incident:</b>  | <b>DECLARED / STANDBY</b> <i>(Circle)</i>  |
| <b>Exact location of incident:</b>  |  |
| <b>Type of incident:</b><br>Brief Description: e.g. outbreak, CBRN, RTA         |  |
| <b>Hazards:</b><br>e.g. to rescuers, general population, A&E Dept's             |  |
| <b>Access/ Egress:</b><br>e.g. to site of incident, hospitals, general movement | <i>Emergency Control Room Availability: yes/no (Circle)</i><br><i>Standby site available: yes/no</i> |
| <b>Number of casualties involved or likely to be involved:</b>                  |  |
| <b>Number of persons displaced, evacuated or at risk:</b>                       |  |
| <b>Emergency Services activated and responding:</b>                             | ? Police ? Fire ? Ambulance  |

|                                  |   |
|----------------------------------|---|
| Trust affected or likely to be : | <i>Is more than one Trust effected: List those effected</i>                     |
| Expected duration:               |   |
| Infrastructure affected:         |   |
| MIRT to be declared:             | ? Yes<br>? No<br><i>If no, is a review necessary, if so, at what time?_____</i> |
| MIRT to be placed on standby:    | ? Yes<br>? No<br><i>If no, is a review necessary, if so, at what time?_____</i> |
|                                  |   |
| Actions to be carried out:       | First Response Agency informed at ____ hrs                                      |
| Review at:                       | Date:_____ Time:_____ hrs   |
| Review by:                       | [State who]   |

|                           |  |
|---------------------------|--|
| Completed by (Signature)  |  |
| Completed by (Print Name) |  |
| Completion Date:          |  |
| Completion Time:          |  |

**Please ensure that this information is entered on the METHANE screen, on the MAJOR INCIDENT component of the Escalation Management System on the NHS net at the following URL:**

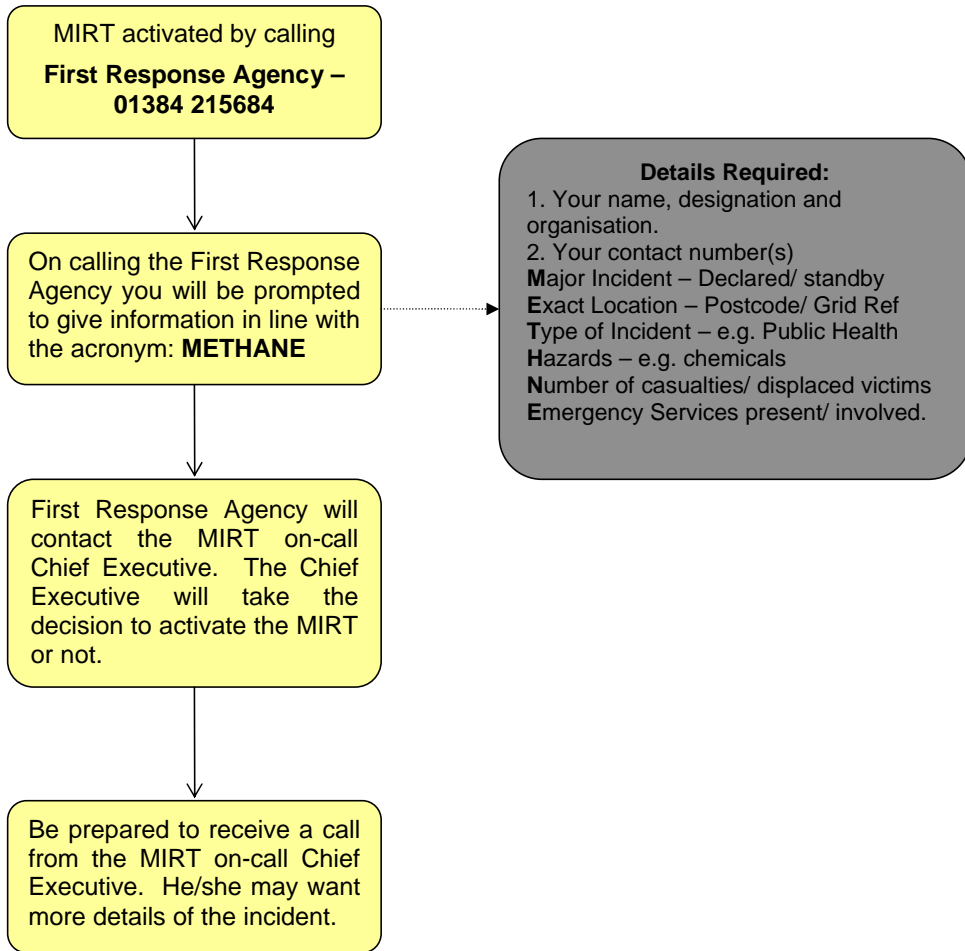
<http://nwwsouthstaffs-information.nhs.uk/escalation/>

**For Log-on details Contact Mark Curran: 01384 246473/ First Response 01384 215684**



**Appendix 3**

**MAJOR INCIDENT RESPONSE TEAM (MIRT) – CALL OUT PROCEDURE**



**Appendix 4**

**FLOOR LAYOUT – PRIMARY EMERGENCY CONTROL ROOM**

**[TO BE INSERTED]**

**Appendix 5**

**FLOOR LAYOUT – STANDBY EMERGENCY CONTROL ROOM**

**[TO BE INSERTED]**

**Appendix 6****GLOSSARY OF TERMS****ACCess OverLoad Control (ACCOLC)**

The ACCess OverLoad Control scheme gives call preference to registered essential users on the four main mobile networks in the UK if the scheme is invoked during an emergency.

**Ambulance Incident Officer (AIO)**

The officer of an ambulance service with overall responsibility for the work of the service at the scene of an emergency. Works in close liaison with the Medical Incident Officer (MIO) to ensure effective use of the medical and ambulance resources at the scene.

**Ambulance loading point**

An area, preferably hard standing, in close proximity to the casualty clearing station, where ambulances can be manoeuvred and patients placed in ambulances for transfer to hospital. Helicopter landing provision may also be needed.

**Ante mortem team**

Officers responsible for liaising with the next-of-kin on all matters relating to the identification of the deceased.

**Bellwin Scheme**

Discretionary scheme for providing central government financial assistance in exceptional circumstances to affected local authorities (e.g. councils, police authorities) in the event of an emergency.

**Body holding area**

An area close to the scene of an emergency where the dead can be held temporarily before transfer to the emergency mortuary or mortuary.

**Bronze**

The level at which the management of 'hands-on' work is undertaken at the incident site or impacted areas. This is sometimes referred to as the 'operational level'.

**Casualty**

A person killed or physically or mentally injured in war, accident or civil emergency. For Casualty Bureau purposes the term encompasses any person involved in an incident, including evacuees. In maritime emergencies, it is also used to refer to a vessel or person in distress.

**Casualty bureau**

The purpose of the casualty bureau is to provide the initial point of contact for the receiving and assessing of information relating to persons believed to be involved in the emergency. The primary objectives of a casualty bureau are: inform the investigation process relating to the incident; trace and identify people involved in the incident; and reconcile missing persons and collate accurate information in relation to the above for dissemination to appropriate parties.

**Casualty clearing station**

An area set up at the scene of an emergency by the ambulance service in liaison with the Medical Incident Officer to assess, triage and treat casualties and direct their evacuation.

### **Category 1 responder**

A person or body listed in Part 1 of Schedule 1 to the Civil Contingencies Act. These bodies are likely to be at the core of the response to most emergencies. As such, they are subject to the full range of civil protection duties in the Act.

### **Category 2 responder**

A person or body listed in Part 3 of Schedule 1 to the Civil Contingencies Act. These are co-operating responders who are less likely to be involved in the heart of multi-agency planning work, but will be heavily involved in preparing for incidents affecting their sectors. The Act requires them to co-operate and share information with other Category 1 and 2 responders.

### **Civil Contingencies Act**

The Civil Contingencies Act 2004 establishes a single framework for civil protection in the United Kingdom. Part 1 of the Act establishes a clear set of roles and responsibilities for local responders. Part 2 modernises the emergency powers framework in the United Kingdom.

### **Civil Contingencies Reaction Forces (CCRFs)**

Drawn from existing reserve forces, CCRFs are military forces capable of being mobilised to assist in dealing with civil emergencies in support of the civil authorities and regular forces.

### **Civil Contingencies Secretariat**

The Cabinet Office secretariat which provides the central focus for the cross-departmental and cross-agency commitment, co-ordination and co-operation that will enable the UK to deal effectively with disruptive challenges and crises.

### **Civil protection**

Preparedness to deal with a wide range of emergencies from localised flooding to terrorist attack.

### **Control centre**

Operations centre from which the management and co-ordination of the response to an emergency is carried out.

### **Control of Major Accident Hazards Regulations 1998 (COMAH)**

Regulations applying to the chemical industry and to some storage activities, explosives and nuclear sites where threshold quantities of dangerous substances, as identified in the Regulations, are kept or used.

### **Co-ordination**

The harmonious integration of the expertise of all the agencies involved with the object of effectively and efficiently bringing the incident to a successful conclusion.

### **Cordon – inner**

Surrounds and protects the immediate scene of an incident.

### **Cordon – outer**

Seals off a controlled area around an incident to which unauthorised persons are not allowed access.

### **Devolved administrations**

Scottish Executive, Welsh Assembly Government and Northern Ireland Executive.

## **Emergency**

An event or situation that threatens serious damage to human welfare in a place in the UK or the environment of a place in the UK, or war or terrorism which threatens serious damage to the security of the UK. To constitute an emergency an event or situation must additionally require the implementation of special arrangements by one or more Category 1 responder.

### **Emergency mortuary**

Demountable (temporary) structures or conversion of existing structures whose function is to provide an area where post-mortem and identification examinations of victims can take place and, where necessary, provide body holding capability prior to bodies being released for funeral arrangements to be made. Also known as a temporary mortuary.

### **Evacuation assembly point**

Building or area to which evacuees are directed for transfer/transportation to a reception centre or rest centre.

### **Exercise**

A simulation to validate an emergency plan or business continuity plan, rehearse key staff or test systems and procedures.

### **Family and Friends Reception Centre**

Secure area set aside for use and interview of friends and relatives arriving at the scene, (or location associated with an incident, such as an airport or port).

### **Family Assistance Centres**

A one-stop-shop for survivors, families, friends and all those impacted by the emergency, through which they can access support, care and advice.

### **(Police) Family Liaison Officer (FLO)**

Member of the ante mortem team allocated specific responsibility for one or more families of the deceased.

### **Forward control point**

Each service's command and control facility nearest the scene of the incident – responsible for immediate direction, deployment and security.

### **Gold**

Strategic decision makers at the local level. They establish the framework within which operational and tactical managers work in responding to and recovering from emergencies. Multi-agency co-operation at gold level is delivered through the Strategic Co-ordinating Group.

### **Identification Commission**

Group representing all aspects of the identification process, which is set up to consider and determine the identity of the deceased to the satisfaction of HM Coroner.

### **Incident control point**

The point from which an emergency service's tactical manager can control his/her service's response to a land-based incident. Together, the incident control points of all the services form the focal point for co-ordinating all activities on site. Also referred to as 'Silver control'. In London, incident control points are grouped together to form the Joint Emergency Services Control Centre.

### **Integrated Emergency Management (IEM)**

An approach to preventing and managing emergencies that entails six key activities – anticipation, assessment, prevention, preparation, response and recovery. IEM is geared to the idea of building greater overall resilience in the face of a broad range of disruptive challenges. It requires a coherent multi-agency effort.

### **Lead Government Department (LGD)**

Government department which, in the event of an emergency, co-ordinates central government activity. The department that will take the lead depends on the nature of the emergency (i.e. DTI in the event of a disruption in the fuel supply, Defra in relation to flooding). The Government regularly publishes a full list of LGDs.

### **Local Resilience Area**

The Civil Contingencies Act requires Category 1 and 2 responders to co-operate with other Category 1 and 2 responders in their Local Resilience Area. Each Local Resilience Area (with the exception of London) is based on a police area. The principal mechanism for multi-agency co-operation is the Local Resilience Forum.

### **Local Resilience Forum (LRF)**

A process for bringing together all the Category 1 and 2 responders within a local police area for the purpose of facilitating co-operation in fulfilment of their duties under the Civil Contingencies Act.

### **Local responder**

Organisation which responds to emergencies at the local level. These may include Category 1 and 2 responders under the Civil Contingencies Act and other organisations not covered by the Act.

### **Major incident**

This term is commonly used by emergency services personnel operationally to describe an emergency as defined in the Civil Contingencies Act.

### **Marine Response Centre**

A co-ordination centre established by the MCA in marine pollution cases requiring a national response.

### **Maritime Rescue Co-ordination Centre (MRCC)**

HM Coastguard regional centre responsible for promoting the efficient organisation of search and rescue services and for co-ordinating the conduct of search and rescue operations within a search and rescue region.

### **Maritime Rescue Sub-Centre (MRSC)**

HM Coastguard unit subordinate to a rescue co-ordination centre and established to complement the latter.

### **Marshalling area**

Area to which resources and personnel not immediately required at the scene or being held for further use can be directed to stand by.

### **Media centre**

Central location for media enquiries, providing communication, conference, monitoring, interview and briefing facilities and access to responding organisation personnel. Staffed by spokespersons from all the principal services/organisations responding.

**Media Liaison Officer**

Representative who has responsibility for liaising with the media on behalf of his/her organisation.

**Medical Incident Officer (MIO)**

Medical officer responsible for management of non ambulance medical resources at the scene of an emergency.

**Mutual aid**

An agreement between Category 1 and 2 responders and other organisations not covered by the Act, within the same sector or across sectors and across boundaries, to provide assistance with additional resource during an emergency, which may overwhelm the resources of an individual organisation.

**News Co-ordination Centre (NCC)**

The NCC works with the Lead Government Department to provide co-ordinated media and public communications support during an emergency.

**Primary Care Trust (PCT)**

Primary care is the care provided by those professionals the public normally see when they have a health problem (e.g. doctor, dentist, optician, pharmacist). These services are managed by PCTs.

**Radiation Emergency Preparedness and Public Information Regulations 2001 (REPPIR)**

Implemented in Great Britain, the articles on intervention in cases of radiation (radiological) emergency in Council Directive 96/29/Euratom, also known as the BS596 Directive. The Directive lays down the safety standards for the protection of the health of workers and the general public against the dangers arising from ionising radiation. The REPPIR also partly implement the Public Information Directive by subsuming the Public Information for Radiation Emergencies Regulations 1992 (PIRER) on informing the general public about health protection measures to be applied and steps to be taken in the event of an emergency.

**Receiving hospital**

Any hospital selected by the ambulance service from those designated by health authorities to receive casualties in the event of an emergency.

**Recovery**

The process of rebuilding, restoring and rehabilitating the community following an emergency.

**Regional Civil Contingencies Committee (RCCC)**

A committee that meets during an emergency when a regional response or other action at regional level is required.

**Regional Nominated Co-ordinator (RNC)**

Where emergency regulations are used, central government must appoint a Regional Nominated Co-ordinator (or Emergency Co-ordinator in the case of the devolved administrations) in each of the English regions to which the emergency regulations apply. The post-holder will be appointed to facilitate co-ordination of activities under the emergency regulations in line with the response strategy and objectives set by central government.

**Regional Resilience Forum (RRF)**

A forum established by a Government Office to discuss civil protection issues from the regional perspective and to create a stronger link between local and central government on resilience issues.

**Regional Resilience Team (RRT)**

Small team of civil servants within a Government Office for the Region working on civil protection issues, headed by a Regional Resilience Director.

**Rendezvous point**

Point to which all vehicles and resources arriving at the outer cordon are directed.

**Resilience**

The ability of the community, services or infrastructure to withstand the consequences of an incident.

**Rest centre**

Premises used for temporary accommodation of displaced persons and evacuees following an incident.

**Risk**

Risk measures the significance of a potential event or situation in terms of likelihood and impact.

**Risk assessment**

A structured and auditable process of identifying significant events, assessing their likelihood and impacts, and then combining these to provide an overall assessment of risk, as a basis for further decisions and action.

**Salvage Control Unit**

A unit established to support the Secretary of State's Representative in marine salvage incidents.

**Scene Access Control Point (SACP)**

Provides access through the outer cordon for essential non-emergency service personnel.

**Search and rescue (SAR)**

Operations for locating and retrieving persons in distress, providing for their immediate needs and delivering them to a place of safety.

**Search and Rescue Mission Co-ordinator**

The MCA officer assigned to co-ordinate the response to an actual or apparent maritime distress situation.

**Senior investigating officer (SIO)**

The senior detective officer appointed to assume responsibility for all aspects of the police investigation.

**Shoreline Response Centre**

A co-ordination centre established by the local authority most affected by a marine pollution incident.

**Silver**

Tactical level of management introduced to provide overall management of the response to an emergency. Silver managers determine priorities in allocating resources, obtain further resources as required, and plan and co-ordinate when tasks will be co-ordinated.

**Site Incident Officer (SIO)**

If an incident occurs within the perimeter of an industrial or commercial establishment, public venue, airport or harbour, a representative from the affected organisation will liaise with the emergency management structure.

**Statutory Services**

Those services whose responsibilities are laid down in law: for example, police, fire and ambulance services, HM Coastguard and local authorities.

**Strategic Co-ordinating Group**

Multi-agency group which sets the policy and strategic framework for emergency response and recovery work at the local level in England and Wales (see also Gold).

**Subsidiary**

The principle wherein decisions are made at the lowest appropriate level, and higher levels only become involved where necessary.

**Survivor Reception Centre**

Secure area where survivors not requiring acute hospital treatment can be taken for short-term shelter, first aid, interview and documentation.

**Temporary mortuary**

See Emergency mortuary.

**Triage**

Process of assessment of casualties and allocation of priorities by the medical or ambulance staff at the site or casualty clearing station prior to evacuation. Triage may be repeated at intervals and on arrival at a receiving hospital.

**Utilities**

Companies providing essential services, e.g. water, energy, telecommunications.

## Appendix 7

## TYPES OF INCIDENT AND RECOMMENDED "LEVEL" BENCHMARKS

| Type of incident  | Level 1 (Local)   | Level 2 (Minor)   | Level 3 (Major)   |
|---|---|---|---|
| <b>Natural Emergencies</b><br>causing building damage/<br>collapse                          | Minor structural damage.<br>No evacuation necessary   | Minor structural damage.<br>Evacuation and limited<br>relocation necessary                                  | Major structural damage.<br>Evacuation and relocation<br>necessary  |
| <b>Severe weather conditions</b> e.g. excessive rain, snow, wind, ice, extreme cold or heat | No building damage.<br>Some staff absence.<br>Minor disruption to normal services.                                  | Minor building damage/<br>serious disruption to normal services.<br>Significant staff absence.              | Serious building damage.<br>Serious disruption to critical services.<br>Significant staff absence.<br>Relocation necessary. |
| <b>Fires</b>  | Minor damage to rooms, no relocation necessary.<br>Little / no information loss.<br>Room(s) out of use temporarily. | Medium damage, loss of some accommodation – can reorganise to cover internally. Little loss of information. | Major damage to the Trust infrastructure. Significant information loss.<br>Relocation necessary.                            |
| <b>Flooding</b>   | Minor damage to rooms, No loss of equipment or documents.<br>Little or no disruption                                | Medium damage to rooms and equipment. Some damage to documents.<br>Remedial work and relocation necessary.  | Major damage to rooms, equipment and information sources.<br>Serious disruption to facilities.                              |
| <b>Civil Disorder</b>   | Disruption to normal Trust services.<br>Some staff absence.   | Serious disruption to normal services.<br>Significant staff absence/<br>inability to use facilities.        | Prolonged serious disruption to normal services and significant number of staff unable to use facilities.                   |
| <b>Water, Gas or Electricity Supply failure - &gt; 1 working day</b>                        | Affecting <5% Council Property.<br>Little or no disruption.   | Affecting 10-30% of Trust premises, but no sensitive Service areas/ sites.<br>Minor disruption.             | Affecting > 30% of the Trust premises and sensitive Service areas/ sites.<br>Serious disruption.                            |
| <b>Explosions</b>   | Small localised blast – Can be isolated.  | Small to medium blast, minor damage.<br>No release of toxic/ flammable substances.                          | Medium/ major blast<br>Major damage and disruption.   |
| <b>Gas Leaks</b>  | Minor leak in small/ large building.<br>Evacuation.   | Major leak in small/ large building.<br>Evacuation.   |   |
| <b>Bomb Threats</b>   | Suspicious parcels.<br>Isolate and inform Head of Service. Evacuation may be required                               | Following serious threats by known activists.<br>Isolate and evacuate.<br>Involves police.                  |   |
| <b>Medical Epidemics</b>  | Disruption to normal services.<br>Some staff absence.   | Serious disruption to normal services.<br>Significant staff absence.  | Legionnella, Pandemic Flu outbreaks.  |
| <b>Adverse public Interest</b>  | Interest by local press only.   | Significant local interest – Press and other media.   | Extensive Regional/ National interest – Press and other media.  |
| <b>Computer system failure Greater than one day</b>   | Affecting <5% of the Trust.   | Affecting 10-30% of the Trust but no sensitive Service/ sites affected.                                     | Affecting >30% Trust and sensitive Service/ sites.  |
| <b>Death of staff or multiple serious injuries.</b>   |   | 1 death/ several injured.<br>Local press interest,<br>Regulatory investigation,<br>Possible prosecution.    | Multiple deaths or injuries.<br>Regulatory investigation.<br>Significant adverse media interest.<br>Possible prosecution.   |

## 9 CONTACT LIST

| No. | Details  | Page No. |
|-----|--|----------|
| 9.1 | Directors  |          |
| 9.2 | Support Staff  |          |
| 9.3 | Other agencies<br>Civil Contingencies Unit<br>NHS bodies<br>Local Authority<br>Police<br>Fire<br>Ambulance |          |
| 9.4 | Media  |          |
| 9.5 | Utilities  |          |

9.1 **CONFIDENTIAL** – SOUTH STAFFORDSHIRE PCT DIRECTORS

| Name & Designation | Office Number and Extension | Mobile Number | Home Phone Number | Email | Fax No. |
|--------------------|-----------------------------|---------------|-------------------|-------|---------|
|                    |                             |               |                   |       |         |
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9.2 **CONFIDENTIAL** – SOUTH STAFFORDSHIRE PCT SUPPORT STAFF

| Name & Designation | Office Number and Extension | Mobile Number | Home Phone Number | Email | Fax No. |
|--------------------|-----------------------------|---------------|-------------------|-------|---------|
|                    |                             |               |                   |       |         |
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## 9.3 OTHER AGENCIES

| Organisation & Contact                    | Office Number and Extension | Out of Hours | Home Phone Number | Pager                              | Fax No.                      |
|---|-----------------------------|--------------|-------------------|------------------------------------|------------------------------|
| <b>9.3.1 Civil Contingencies Unit</b>     |                             |              |                   |                                    |                              |
| <b>Duty Officer</b>                       |                             |              |                   | <b>07699 784777 (plus message)</b> |                              |
| Civil Contingencies Unit Office           | 01785 898618                |              |                   |                                    | 01785 253054<br>01785 897515 |
| Leigh Clarke                              | 01785 898613                | 07976968023  |                   | 07699701817                        | As above                     |
| Bill Almond                               | 01785 898614                | 07980 890760 |                   | 07699 701820                       | As above                     |
| <b>9.3.2 NHS Bodies</b>                   |                             |              |                   |                                    |                              |
| North Staffordshire PCT                   |                             |              |                   |                                    |                              |
| South Staffordshire PCT                   |                             |              |                   |                                    |                              |
| Stoke Teaching PCT                        |                             |              |                   |                                    |                              |
| Derbyshire Dales and South Derbyshire PCT | 01283 731300                |              |                   |                                    | 01283 731301                 |
| North Birmingham PCT                      | 0121 332 1900               |              |                   |                                    | 0121 332 1901                |
| North Warwickshire PCT                    | 024 76642200                |              |                   |                                    |                              |
| Telford and Wrekin PCT                    | 01952 222322                |              |                   |                                    |                              |
| North Staffordshire NHS Trust             | 01782 715444                | 01782 715444 |                   |                                    |                              |

| Organisation & Contact   | Office Number and Extension | Out of Hours                                | Home Phone Number | Pager | Fax No.      |
|--|-----------------------------|---|-------------------|-------|--------------|
| <b>9.3.2 Health Trusts (Continued)</b>                           |                             |   |                   |       |              |
| North Staffordshire Combined Healthcare Trust: Bucknall          | 01782 273510                | 01782 273510                                |                   |       |              |
| Staffordshire General District Hospital                          | 01785 257730                | 01785 257731                                |                   |       |              |
| Queens Hospital Burton   | 01283 566333                | 01283 566333                                |                   |       |              |
| South Staffordshire Healthcare NHS Trust                         | 01785 257888                |   |                   |       | 01785 258969 |
| Good Hope Hospital – Sutton Coldfield                            | 0121 3782211                |   |                   |       |              |
| New Cross – Wolverhampton  | 01902 307999                |   |                   |       |              |
| <b>NHS Mass Casualty PODS Activation</b> via West Mids Ambulance | 01384 451665                | 01384 451665                                |                   |       |              |
| <b>Department of Health Radiation Incidents</b>                  | 020 79725122                | 07884 473336                                |                   |       |              |
| <b>Department of Health Medical Physics</b>                      | 01902 644940                | 01902 307999<br>(ask for on-call physicist) |                   |       |              |
| <b>Department of Health Emergency Planning Coordination Unit</b> | 020 79723786                |   |                   |       |              |

| Organisation & Contact                   | Office Number and Extension | Out of Hours  | Home Phone Number | Pager | Fax No.       |
|--|-----------------------------|---|-------------------|-------|---------------|
| West Midlands Strategic Health Authority | 0845 155 1022               |   |                   |       | 0121 695 2233 |
| Health Protection Agency                 | 0121 6348700                | <b>First Response</b><br>Paging<br>01384 215621<br>(Quote Staffs area and provide contact number) |                   |       |               |
| First Response Agency                    | 01384 215684                |   |                   |       |               |
| <b>9.3.3 Local Authorities</b>           |                             |   |                   |       |               |
| Cannock Chase DC                         | 01543 462621                | 01543 572001  |                   |       | 01543 462317  |
| City of Stoke-on-Trent Council           | 01782 234567                | 01782 202099  |                   |       | 01782 232603  |
| East Staffordshire BC                    | 01283 508000                | 01283 517111  |                   |       | 01283 535412  |
| Lichfield DC                             | 01543 308000                | 01543 254213  |                   |       | 01543 309899  |
| Stafford Borough Council                 | 01785 619000                | 01785 610170  |                   |       | 01785 619219  |
| Staffordshire County Council             | 01785 223121                | 01785 285222  |                   |       | 01785 215153  |
| Social Services                          | 01785 354030                | 01785 354031  |                   |       | 01785 354035  |
| South Staffordshire DC                   | 01902 696000                | 01384 215863  |                   |       | 01902 696800  |
| Tamworth BC                              | 01827 709709                | 01827 59825   |                   |       | 01827 709271  |
| Walsall MBC                              | 01922 650000                |   |                   |       | 01922 720885  |
| Wolverhampton City Council               | 01902 551155                |   |                   |       | 01922 551195  |

Issue Date

Section 9

| Organisation & Contact                             | Office Number and Extension | Out of Hours   | Home Phone Number | Pager | Fax No.      |
|--|-----------------------------|----------------|-------------------|-------|--------------|
| <b>9.3.4 Police</b>                                |                             |                |                   |       |              |
| Staffordshire Police                               | 08453 30 20 10              | 08453 30 20 10 |                   |       | 01785 232563 |
| <b>9.3.5 Staffordshire Fire and Rescue Service</b> |                             |                |                   |       |              |
| Switchboard  | 08451 22 11 55              | 08451 22 11 55 |                   |       |              |
| <b>9.3.6 Ambulance</b>                             |                             |                |                   |       |              |
| Staffordshire Ambulance                            | 01785 253521                |                |                   |       |              |
| West Midlands Ambulance                            | 01384 215555                | 01384 2155100  |                   |       |              |
| <b>9.4 Media</b>                                   |                             |                |                   |       |              |
| Cannock Express and Star                           | 01543 506311                |                |                   |       |              |
| Chase Post   | 01543 501763                |                |                   |       |              |
| Staffordshire Newsletter                           |                             |                |                   |       |              |
| Burntwood Chase Post                               | 01543 5700046               |                |                   |       |              |
| Signal Radio                                       | 01782 441303                |                |                   |       |              |
| Beacon Radio                                       | 01902 461261                |                |                   |       |              |
| Heart FM Radio                                     | 0121 6077227                |                |                   |       |              |
| BBC Midlands Today (TV)                            | 0121 5676147                |                |                   |       |              |
| Central TV   | 020 78438000                |                |                   |       |              |

| Organisation & Contact    | Office Number and Extension | Out of Hours | Home Phone Number | Pager | Fax No. |
|---------------------------|-----------------------------|--------------|-------------------|-------|---------|
| <b>9.5 Utilities</b>      |                             |              |                   |       |         |
| National Grid             | 0800 111999                 |              |                   |       |         |
| Central Networks          | 0845 353637                 |              |                   |       |         |
| Severn Trent Water PLC    | 0800 7834444                |              |                   |       |         |
| South Staffordshire Water | 01922 638282                |              |                   |       |         |