

UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST
BOARD OF DIRECTORS
THURSDAY 28 JANUARY 2016

Title:	UPDATE ON EMERGENCY PREPAREDNESS
Responsible Director:	Kevin Bolger, Executive Director of Strategic Operations
Contact:	Lynn Hyatt, Head of Emergency Preparedness and Resilience

Purpose:	To present assurance of University Hospitals Birmingham readiness for a Major Incident in light of events in Paris on 13 November 2015.
Confidentiality Level & Reason:	
Medium Term Plan Ref:	Aim 1: Always put the needs and care of patients first.
Key Issues Summary:	As a category 1 responder, University Hospitals Birmingham (UHB) has a statutory duty to ensure that it can respond to emergency situations and continue to provide essential services at times of operational pressure or in the event of an internal emergency. This paper provides assurance that the Trust meets its statutory duties as a category 1 responder
Recommendations:	The Board of Directors is asked to accept the assurance provided in this report.

Approved By	Kevin Bolger	Date:	15 January 2016
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UPDATE ON EMERGENCY PREPAREDNESS

PRESENTED BY THE EXECUTIVE DIRECTOR OF STRATEGIC OPERATIONS

1. Introduction

In view of the recent incidents in Paris, this paper is present to provide assurance of University Hospitals Birmingham readiness for a Major Incident in light of events in Paris on 13 November 2015.

2. NHS preparedness for a major incident statement of preparedness

This paper provides details of UHB's readiness for a Major Incident in light of events in Paris on 13th November 2015.

Following on from the Paris attacks the threat level for the UK remains unchanged since August 2014 at SEVERE, the definition for this level is that an attack is highly likely. SEVERE is the second highest level with CRITICAL being the highest, the definition for CRITICAL is that an attack is imminent.

On 9th December 2015 Dame Barbara Hakin, National Director, Commissioning and operations NHS England wrote to all Trusts advising them that following the terrorist attacks in Paris, NHS England and the Department of Health and other national agencies are reviewing and learning from the incidents that occurred and will ensure that this is then reflected fully in the NHS England established Emergency Preparedness Resilience and Response (EPRR) procedures.

The letter asked that all Trusts review the following and provide assurance that:

1. You have reviewed and tested your cascade systems to ensure that they can activate support from all staff groups, including Doctors in training posts, in a timely manner including in the event of a loss of the primary communication system.
2. You have arrangements in place to ensure that staff can still gain access to sites in circumstances where there may be disruption to the transport infrastructure, including public transport where appropriate, in an emergency.

3. Plans are in place to significantly increase critical care capacity and capability over a protracted period of time in response to an incident including where patients may need to be supported for a period of time prior to transfer to definitive care.
4. You have given due consideration as to how the Trust can gain specialist advice in relation to the management of a significant number of patients with traumatic blast and ballistic injuries.

3. **University Hospitals Birmingham assurance against the above identified areas**

1. The trust has an automated call out system in place which has been in place for 3 years. The system is able to call out up to 600 members of Trust staff who have been identified as playing a significant role in the event of a Major incident. The system is activated every 3 – 4 months calling out different groups of staff and a report of the response is taken to the Emergency preparedness steering group. The Trust is also part of the HF radio net which includes all Trusts in the West Midlands conurbation and also including NHS England and CCG's in the West Midlands.

This radio is set up in the Command and Control room but also has two hand held devices which are kept in the secondary Command and Control and the Emergency planners office. This is checked on a monthly basis. The Trusts communication team also have a plan which includes liaising with the local radio and media to get messages to staff in the event of an incident.

2. Dependant on the scale and nature of the transport disruption, the Trust would ensure that any available non patient transport owned by the Trust would be utilised. There is currently a mutual aid group working across the conurbation and one of the issues to be addressed is transport and looking at the possibility of rendezvous points for staff to be picked up from.
3. The Trusts Mass Casualty plan identifies the capacity that Critical care can increase to if required. This includes utilising unfunded spaces and recovery areas in theatres.
4. As the Royal Centre for Defence Medicine is based in the Trust, the Trust is used to dealing with patients returning from war zones with traumatic blast and ballistic injuries. In the event of a Paris style attack The Trust would be called upon to provide the specialist advice.

4. Assurance statement

Having reviewed and taken in to account the current plans following the tragic events in Paris, it is felt that University Hospitals Birmingham can provide assurance that it is ready, to the best of its ability, to respond in the event of a major incident of the scale of which happened in Paris. A table top exercise followed by a live exercise will be carried out in the forthcoming months to test these assurances using the Paris event as a basis for the exercises. The results of these exercises will be reported in the 6 monthly board reports.

5. Recommendations

The Board of Directors is asked to accept the assurance provided in this report.

Kevin Bolger
Director of Strategic Operations