



**AGENDA ITEM**

2.2.5

**CTM BOARD**

**CIVIL CONTINGENCIES AND BUSINESS CONTINUITY REPORT FOR Q4 OF 2019/20 AND 2020-21**

<b>Date of meeting</b>	(25/03/2021)
<b>FOI Status</b>	Open/Public
<b>If closed please indicate reason</b>	Not Applicable - Public Report
<b>Prepared by</b>	Andrew Francis, Civil Contingencies and Business Continuity Manager
<b>Presented by</b>	Clare Williams Executive Director of Planning, Planning and Performance (Interim)
<b>Approving Executive Sponsor</b>	Executive Director of Planning & Performance
<b>Report purpose</b>	FOR NOTING

**Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)**

<b>Committee/Group/Individuals</b>	<b>Date</b>	<b>Outcome</b>
(Insert Name)	(DD/MM/YYYY)	Choose an item.

**ACRONYMS**

CCBCM	- Civil Contingencies and Business Continuity Manager
CTMUHB	- Cwm Taf Morgannwg University Health Board
ILG	- Integrated Locality Groups
IPC	- Infection Prevention & Control
PPE	- Personal Protective Equipment
WG	- Welsh Government
HB	- Health Board
MLOs	- Military Liaison Officers
MACA	- Military Aid for Civil Agencies
SWLRF	- South Wales Local Resilience Forum



SCG	- Strategic Co-ordination Group
TCG	- Tactical Co-ordination Group
SOP	- Standard Operating Procedure
WAST	- Welsh Ambulance Service Trust
RGH	- Royal Glamorgan Hospital
YMH	- Ynysmeurig House (CTMUHB Headquarters)
KHHP	- Kier Hardy Health Park
HIW	- Health Inspectorate Wales
Appendix A – Detailed information of the Activity of the Civil Contingency and Business Continuity Manager Role during 2020.	

## 1. SITUATION/BACKGROUND

1.1 Cwm Taf Morgannwg University Health Board (CTMUHB) is categorised as a Category 1 Responder under the Civil Contingencies Act 2004 and therefore has the following duties placed upon it under this act:

- Assess the risk of emergencies occurring and use this to inform contingency planning;
- Put in place emergency plans;
- Put in place Business Continuity Management arrangements;
- Put in place arrangements to make information available to the public about civil protection matters and maintain arrangements to warn, inform and advise the public in the event of an emergency;
- Share information with other local responders to enhance co-ordination;
- Co-operate with other local responders to enhance co-ordination and efficiency; and
- Provide advice and assistance to businesses and voluntary organisations about business continuity management (Local Authorities only).

1.2 As a CTMUHB Civil Contingencies and Business Continuity annual report was not presented for 2019/2020 although a document was submitted to Welsh Government, this report covers actions taken in early 2020 in addition to in 2020/2021.

1.3 Appendix A of this report details the work completed by the Civil Contingencies and Business Continuity Manager (CCBCM) to support the Organisation's duties as a Category 1 responder.

## 2. SPECIFIC MATTERS FOR NOTE BY THIS MEETING

2.1 The annual report provides an oversight of how CTMUHB is performing against its duties under the Civil Contingencies Act 2004. Specific areas of compliance to note are:

## **2.2 Assessing the risk of emergencies occurring and using this to inform contingency planning:**

2.2.1 CTMUHB has demonstrated compliance with the need to assess risks through its existing risk assessments and plans and the HB's response to new risks such as:

- a. The development of the Strategic and Tactical COVID19 risk assessments and information developed through analysis of information from the World Health Organisation (WHO), Welsh Government (WG), Public Health Wales (PHW) and CTMUHB's local data.
- b. The development of BREXIT and EU Transition risk assessments.
- c. Response to the notification of adverse weather events, and the subsequent risk assessed activation of HB severe Weather plans.

## **2.3 Putting in place emergency plans:**

2.3.1 CTMUHB has demonstrated its compliance with this requirement through publication of a number of plans ready to form the basis of a range of emergency responses. Existing plans have been reviewed and built upon to develop the following:

- a. Health Board Strategic, Tactical and Task/Operational plans COVID 19 Plans, including Hospital Patient Reception and Treatment Pathways, PPE distribution plans, Financial Plans and other supporting plans have been developed.
- b. Surge Capacity Planning and provision of additional temporary Hospital accommodation plans and Standard operating procedures (SOP's).
- c. A mass COVID 19 Test, Trace and Protect Plan.
- d. A mass immunisation plan and delivery programme.

2.3.2 Work continues to ensure that all plans within CTMUHB align with the new ILG structure.

## **2.4 Put in place Business Continuity Management arrangements:**

2.4.1 Notable actions during 2020 have revolved around two main issues, COVID19 and BREXIT.

2.4.2 CTMUHB has demonstrated compliance through the Integrated Locality Groups (ILG) and individual corporate services plans developed in response to COVID 19. Examples include:

- a. Patient treatment pathways
- b. Surge Capacity Plans

- c. Elective and Emergency surgery plans
- d. Staffing plans

2.4.3 In relation to BREXIT, CTMUHB has been an active participant in a number of planning groups to ensure that effective plans are in place to mitigate the impact of potential risks from leaving the European Union.

2.4.4 Participation on such groups has resulted in the ability of CTMUHB to adopt and take assurance from National plans, such as the National Supply Disruption Plan that is managed by the NHS Wales Shared Services Partnership (NWSSP), future National Health Surveillance plans and processes through Public Health England/PHW and to mitigate effects on workforce planning and overseas reciprocal health arrangements.

2.4.5 Further work is to be undertaken to develop a system of quality audit, support and monitoring of Directorate Business Continuity Plans.

### **3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE**

3.1 There is a need to ensure that the Health Board reviews and updates all plans and ensures that they are aligned to the relevant standards, ISO 22301 and statutory guidance from Welsh Government and NHS Wales. This will require significant engagement with internal and external stakeholders, alongside changes in the way the Health Board responds to internal and external incidents.

3.2 The last 12 months has highlighted a need to review the overall resourcing for Emergency Preparedness, Resilience and Response and Business Continuity due to a single point of failure by having one FTE responsible for covering all areas.

3.3 There is a need to review the level of training currently being delivered and to ensure that all training meets the required standards under the National Occupational Standards and other statutory guidance from Welsh Government and NHS Wales.

3.4 There is a need to review the structure and roles and responsibilities for attending multi-agency meetings, both during the planning phase and during the activation and response phases of any incident. This will ensure appropriate representation at all meetings with the appropriate levels of delegated authority.



#### 4. IMPACT ASSESSMENT

<b>Quality/Safety/Patient Experience implications</b>	There are no specific quality and safety implications related to the activity outlined in this report.
	The activity in the report demonstrates how risks relating to quality, safety and patient experience are being mitigated by the role of the Civil Contingencies Business Continuity post.
<b>Related Health and Care standard(s)</b>	Governance, Leadership and Accountability
	If more than one Healthcare Standard applies please list below:
<b>Equality impact assessment completed</b>	No (Include further detail below)
<b>Legal implications / impact</b>	Yes (Include further detail below)
	The Civil Contingencies Act 2004 places legal requirements on Organisations. These powers have been conferred on the Welsh Government who now have the power to inspect and examine and Organisation's emergency preparedness.
<b>Resource (Capital/Revenue £/Workforce) implications / Impact</b>	There is no direct impact on resources as a result of the activity outlined in this report.
	This report references that assurance of full compliance with the Civil Contingencies Act requires enhanced levels of audit and support to the Integrated Locality Groups and their Clinical Service Groups. There is also evidence of the need to provide more detailed business continuity planning on a more local level. In line with our neighbouring HBs, this would require additional resources.
<b>Link to Strategic Well-being Objectives</b>	Work with communities and partners to reduce inequality, promote well-being and prevent ill-health

#### 5. RECOMMENDATION

5.1 To **NOTE** the Civil Contingencies and Business Continuity annual report.

## **Appendix A: Civil Contingencies and Business Continuity Annual Report**

### **Major incident and business continuity plans activated in 2020**

Commencing in January 2020 the CCBCM set up COVID19 Monitoring meetings with the Head of Infection Prevention & Control (IPC) to ensure that the organisation was able to prepare a timely response to the emerging global issue of COVID19 and to make arrangements to activate its Command and Control structure if required. The Silver/Tactical and subsequent Bronze Co-ordination planning group structure were activated on the 3 February 2020. This action was initiated in response to the escalation of risk due to the COVID19. This action centred on the existing CTMUHB Pandemic Framework and the CTMUHB Tactical Pandemic Plans as an initial response.

The CCBCM activated the organisation's response to a Major flooding incident as a result of Storm Dennis on the 15 February 2020. The CCBCM worked with the Executive on Call to initiate the Command and Control Structure within the Health Board and accompanied the On Call Executive to the Strategic Co-ordination Group (SCG) which is the Multi-Agency Strategic Level Group who set objectives for the Tactical Level Managers within agencies to achieve during the incident.

The SCG provides access to specialist advice and assistance for the Tactical managers. The CCBCM and the CTM Executive influenced the SCG's decision to categorise the incident as a major incident and worked with the SCG members to formulate objectives and relay information to the Health Boards tactical managers.

### **Operational Support**

Throughout 2019 and in January 2020 the CCBCM supported the Winter Pressures Group and liaised with all departments to review and rewrite the Emergency Pressures Escalation procedure. The purpose of this Escalation procedure is to provide an operational approach to the effective management of capacity and escalation across all areas within CTMUHB. This includes all acute and community sites, mental health and CAMHS (Child and Adolescent Mental Health Services) and primary care including the GP out of hours service. The final procedure has been forwarded for adoption to the ILG Directors.

In February the CCBCM supported the urgent need to Face Fit Test staff who were called upon to deliver the COVID community testing response. This required the CCBCM to deliver 3 days of Face Fit Testing Sessions for Community Nurses and Paediatric staff. Further assistance was provided for the urgent Face Fit Testing of medical staff in Emergency Departments

and some respiratory wards. The CCBCM became involved in this due to the issue of available trained face fit testing staff.

The CCBCM liaised with IPC Leads on the Personal Protective Equipment (PPE) issues and guidance from WG and PH. Pathology staff co-ordinated the initial establishment of COVID supplies within CTMUHB. The CCBCM and the Directorate Manager of Pathology maintained liaison with the Procurement Leads to co-ordinate the PPE guidance emerging from PHW and WG to ensure that supplies were available and where issues arose that remedial actions were planned.

Military assistance was sent by the WG to all HBs in March 2020 and the CCBCM gave the initial HB briefing to the Military Liaison Officers (MLO's) assigned to CTMUHB and assisted them to embed in the organisation.

The CCBCM maintained liaison with the MLOs to enable situational awareness to be shared and requests for logistical support to be co-ordinated along with Military Aid to Civil Agencies (MACA) requests made by the Health Board for additional military assistance.

From March the WG and PHW required daily COVID Death Reports. The CCBCM manually collated and provided these reports to PHW on a daily basis until an automated reporting system was in place.

The CTMUHB Gold/Strategic COVID19 Command Group was stood up in March 2020. The CCBCM supported and liaised with the Strategic/Gold Planner for the CTM Strategic Co-Ordination Group and provided feedback from:

- The South Wales Local Resilience Forum (SWLRF) Strategic Co-ordination Group and the SWLRF Tactical Co-ordination Group meetings, which are the multi-agency meetings that co-ordinate emergency planning and response for all Category 1 responders detailed in the Civil Contingencies Act 2004.
- Provided information from the WG Health and Social Service's Group this group deals with the issues such as Global and UK health surveillance, virology and epidemiology.
- Relayed information from the Emergency Planning Officers meeting regarding the UK situation regarding specific supply chain, PPE advice, and general emergency planning co-ordination and good practice sharing of information to assist the Gold/Strategic Planner in their support of the CTMUHB Gold/Strategic Co-ordination Group.

In April the CCBCM assisted in the setting up of the Silver/Tactical Co-ordination Group Command room within the Health Board Headquarters at Ynysmeurig House (YMH). This was a dedicated room to provide sufficient workspace, ICT and communications resources to facilitate initial face to

face meetings and to connect via TEAM's and video conferencing to other Managerial Teams internally and external to the Health Board.

## **Mass Testing Centres**

In February 2020 the CCBCM worked collaboratively with the IPC leads to prepare and respond to the PHW/WG requirements for Mass Testing. The CCBCM assisted in the design and layout of the testing centres within CTMUHB and began the process of setting these up, procuring resources and assisting IPC and Corporate Nursing to establish the testing capability and Standard Operating Procedures (SOPs).

The CCBCM assumed the role of Operational Manager and was responsible for the provision of the accommodation and layout of the subsequent Testing Centres at the National Imaging Centre, Royal Glamorgan Hospital (RGH), YMH, Keir Hardie Health Park (KHHP) and at the Ysbyty'r Seren Hospital Site. This work continued until August when the new mass testing management team took over full responsibility.

## **Field Hospital Provision**

In April the CCBCM was called upon to assist with the operationalisation of the First Field Hospital at Hensol. This included liaison with Estates/Capital issues, Fire Safety, Mortuary Provision and co-ordinated equipment provision and assembly with the assistance of the organisation Rubicon, a voluntary group of ex-military veterans who provide support to organisations to respond to emergencies or urgent need for human resources.

The CCBCM developed the Business Continuity Plan for the site and liaised with the IPC team to develop an outbreak plan and the Head of Nursing and others with regard the Hospital SOP. The CCBCM also liaised with Fire Safety on the Fire Safety Strategy and the Welsh Ambulance Service Trust (WAST) for the operational matters and patient transfer plans.

May 2020 saw the commencement of the work at the second Field Hospital (Ysbyty'r Seren) in Bridgend and the CCBCM was called upon to assist with its operation whilst maintaining the support at the Hensol site.

Following the decision by CTMUHB to step down the Hensol Field Hospital site, the CCBCM collaborated with the nursing team to co-ordinate the provision of resources and the movement of equipment to Ysbyty'r Seren. Other responsibilities carried out by the CCBCM included the administration workforce planning and preparedness, liaison on Estates issues, Fire Safety, mortuary provision, equipment provision and assembly, new SOPs and renewed WAST SOP's. The CCBCM assumed the role of Operational Site Manager post until October 2020.

## **COVID Vaccination**

The CCBCM provided advice and assistance toward the formulation of an initial plan and utilised the Local Resilience Group and Local Emergency Planning network to activate a working group to establish suitable venues to accommodate mass vaccination centres.

This work continued until October 2020 when the responsibilities for venues was transferred to a Facilities department manager. Progress reports were collated and provided to the weekly WG meeting and the LRF along with other ad-hoc requests for information.

## **Training and Exercising**

Training this year has been severely curtailed due to the demands on staff in the response to COVID19.

### **Training Delivered and Co-ordinated by CCBCM:**

#### ***Gold/Strategic Major Incident Training***

- One Director – Provided with South Wales Local Resilience Forum Gold/Strategic Command and Control Training. Delivered by the CCBCM.
- One Director provided with initial South Wales Local Resilience Forum and Joint Emergency Services Protocol awareness. Delivered by the CCBCM.
- One member of the member of the Executive On-Call rota attended the SWLRF Gold/Strategic Co-ordination Group Training. This provided the candidate with the knowledge of how the Local Resilience Forum works at Strategic Level and co-ordinates the multi-agency response to incidents.
- One Director and one Assistant Director attended the Gold “Lite” course. This is a one day course that provides candidates with an initial introduction to the work of the Local Resilience forum and strategic management of multi-agency incidents.
- One Director attended the South Wales Local Resilience Forum “Chair’s” Course. This prepares candidates to take the position of Chair in Strategic level planning or response to incidents.

#### ***Exercises***

- In May 2020, the CCBCM worked with others and assisted in the facilitation of a table top exercise at the Ysbyty’r Seren. The exercise involved the members of the Ysbyty’r Seren leadership team and focused on SOPs and their operational effectiveness.

- The Executive Director of Public Health requested a multi-agency exercise to test the mass vaccination preparedness of CTM and its partners. During July the CCBCM tested and evaluated the capability of TEAM's to facilitate the required major multi-agency exercise. The CCBCM designed, co-ordinated and delivered a multi-agency mass immunisation exercise with a wide range of partners, PHW, WG, other HB's, Local Authorities, Police, Fire, Social Services and others. 47 people participated in the exercise.

The aims of the exercise were to explore the local agency response to an emerging cluster of COVID-19 cases in a university town and the multi-agency response to a request to put an urban setting, including the university town, in lockdown in response to COVID-19.

TEAM's utilised the ability to be develop a major group exercise with multiple breakout groups. Assistance in the facilitation of the exercise was provided by the HB's Corporate Nursing team, the MLO and administrative assistants to facilitate and manage the individual break out groups. This exercise gained much acclaim from PHW and WG staff.

- In August 2020 the CCBCM and two Directors participated in Exercise BAROD which examined the Communicable Disease Outbreak Plan for Wales and how this is utilised by Outbreak Control Teams and Strategic Coordinating Groups, in Wales, in response to COVID-19.
- In August 2020 a communications exercise was facilitated by the CCBCM at Ysbyty'r Seren to test the communications equipment at the site. This involved ICT and site users to establish the robustness of the systems installed and led to additional resources and contingencies being provided due to the site design and elements of structure.
- In November 2020 a Director participated in a South Wales Local Resilience Group exercise - SWLRF Exercise Draig Goch.

### ***Face Fit Testing***

Ten Train the Face Fit Tester courses were run between January-March 2020. These courses enable ward and departmental staff to be able to carry-out Face Fit Testing on their colleagues. There is now an agreed dedicated resource within the Nursing team for delivering training in this area and for the co-ordination of the Face Fit Testing across the Health Board.

A report has been submitted to the Executive Team via the Silver (Tactical) group regarding the need for Fit Testing dedicated resource and capability going forwards. This also includes the need to develop a Health Board wide Fit Testing strategy which is being led by Health and Safety and the Procurement team.

### **Fire Safety**

The CCBCM role holds responsibility for the Departmental Fire Safety Training for all personnel based in YMH and has delivered the following courses in 2020: Three Departmental Fire Training courses and three Ferno Rescue Chair Training sessions. This is the rescue chair that is situated at the head of each stair case within YMH that enables non- ambulant persons to be provided with assisted escape in the case of fire or other incident whereby the lifts cannot be used.

This role will need to be transferred to the Health and Safety Department as part of a review of the resourcing to cover Emergency Preparedness, Resilience and Response and Business Continuity.

As part of this transfer, further sessions will need to be implemented by the Health and Safety team.

### **Representation at NHS and Other Agency Groups**

As stated above the **CTMUHB Covid 19 Tactical Co-ordination Group** was activated on the 3 February 2020. The CCBCM activated this group, and continued to support it.

From February 2020 the CCBCM attended and dialled into **Health and Social Care Group** and provided the Executive Director of Public Health with feedback from this group.

The CCBCM initially attended the **Senior Responsible Officer BREXIT Group** meeting deputising for the Executive Director of Public Health and provided feedback. This later transferred to the Director of Planning and Performance.

The CCBCM has represented the Organisation on the **initial Pan Wales Coronavirus Meeting** and provided the Executive Director of Public Health with feedback from this group

The CCBCM initially represented the organisation on the **Local Resilience Forum at Strategic and Tactical Level meetings**. This is now covered by the Interim Head of EPRR or Assistant Director of Planning at a Tactical Level and the Director of Planning and Performance (Interim) or Deputy Director of Planning (Interim) at a Strategic Level.

The CCBCM attends the weekly **WG Emergency Planning Officer meeting**.

**Bronze/Operational Integrated Locality Group meetings** reporting into the Silver/Tactical Command and Control Co-ordination Group.

During June, due to a number of COVID19 incidents in local Food Factories and other venues, a **CTM COVID Tactical Group** led by PHW was activated in accordance with the Communicable Disease Plan (Wales). The CCBCM liaised with the CTM COVID Tactical Group regarding the incident/outbreaks and provided updates to the LRF Tactical Control Group and SCG.

CTMUHB have a pre hospital response capability – **MERIT (Medical Emergency Response Incident Team)**. This is a team of 55 nursing and medical staff who attend the scene of a major incident in conjunction with WAST. The CCBCM has attended meetings with the Welsh Regional MERIT Co-ordinator who is based in Aneurin Bevan University Health Board and overseen the preparedness of CTMUHB staff. Attendance at this meeting enables the CCBCM to be aware of operational issues that need to be addressed to ensure that the MERIT team is operationally ready.

Work is currently underway with the Interim Head of EPRR and Welsh Ambulance Service to review the use of MERIT Teams in a wider context relating to Mass Casualty Incidents. The current approach is no longer applicable with the latest guidance, and learning from previous major incidents – most notable of which was the recent terrorist attacks in Manchester and London.

### **Improvement Projects:**

The current system of recalling staff in the event of a major incident is by manual dialling from each department. This is time consuming and ties individuals up making multiple calls. Since January 2020 the CCBCM has worked collaboratively with the HB's Infrastructure Project Manager to agree the design requirements of a new cardiac alert system that is also capable of communicating with a range of devices such as mobile phones for the purpose of group or individual messaging outside the parameters of the UHB premises and able to work on the National Mobile Phone network. This will allow the manual method of recalling staff in the case of major incident to be automated.

The contract has now been awarded and the next phase of implementing the system will take place in 2021. Project timescales will be agreed with the Infrastructure Project Manager, ICT Department and the CCBCM will co-ordinate the implementation with the ILGs.

## **BREXIT Planning**

Much work was completed by CTMUHB in preparation for Brexit and plans were exercised in 2019. The plans and risk assessments were reviewed in October 2020 and deemed relevant to the current situation. The CCBCM has ensured that Workforce and Organisational Development Managers are sighted on potential changes to the Employment criteria of EEU workers.

Similarly changes in the reciprocal health care arrangements have been highlighted to the relevant Commissioning manager within CTMUHB and monitoring of any changes will be maintained.

In relation to the effect of BREXIT on supplies of consumables and medical equipment, NWSSP who supply the NHS in Wales have maintained contingency stocks of consumables and equipment. The NWSSP have worked with the National Supply Disruption Network to ensure that contingencies are in place for the transportation of supplies to Health Boards from within the UK and abroad.