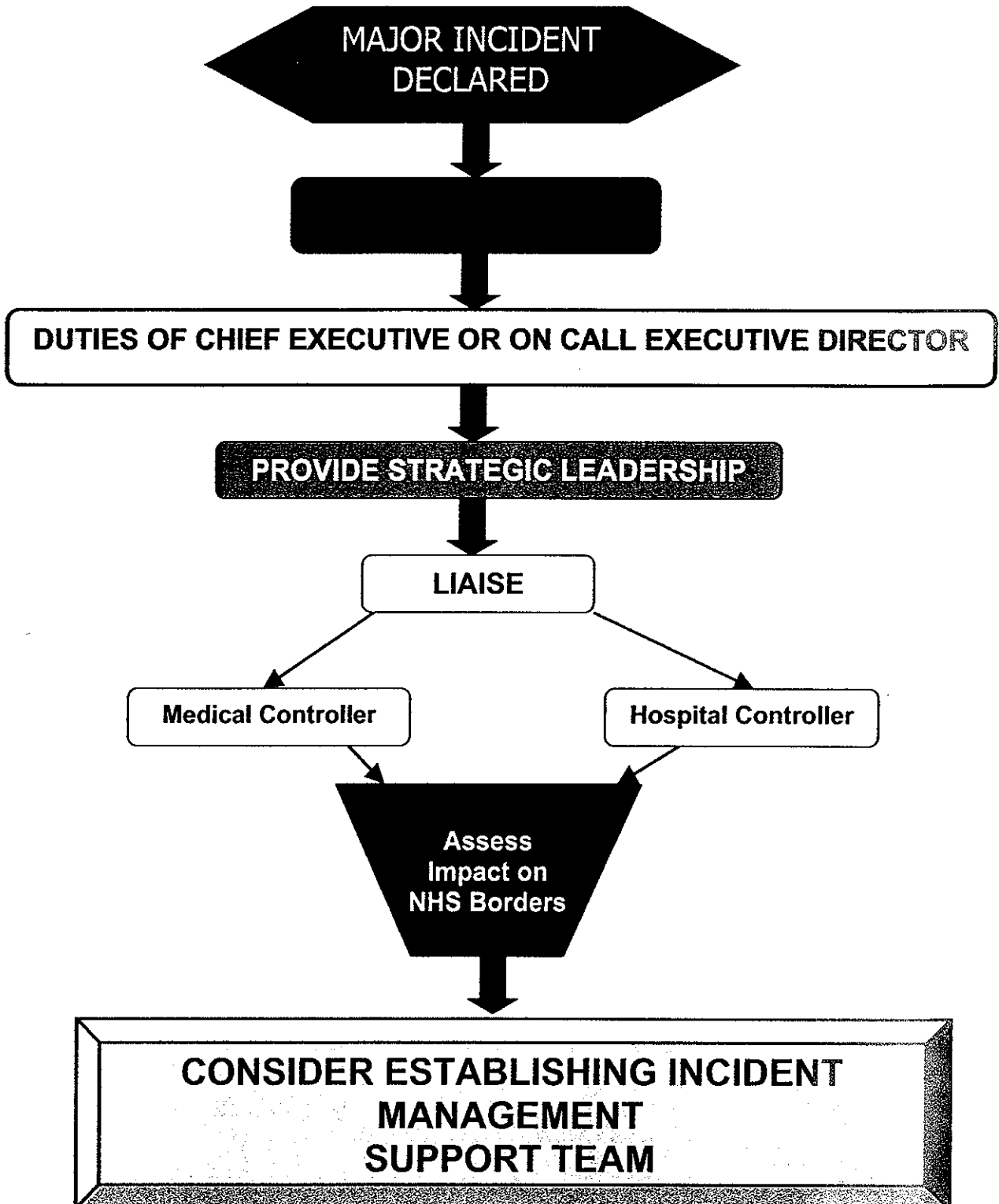


MAJOR EMERGENCY PROCEDURES

EMERGENCY PLANNING RESPONSIBILITIES



**NHS BORDERS
MAJOR EMERGENCY PROCEDURES**

SECTION 2

EMERGENCY PLANNING RESPONSIBILITIES

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**EMERGENCY PLANNING RESPONSIBILITIES OF
NHS BOARD CHIEF EXECUTIVES**

The Chief Executive, NHS Borders is responsible to the Chief Executive, NHS Scotland for ensuring that:

- (a) NHS Borders emergency plans are in place, which meet the health needs arising from the full range of potential emergency situations which might arise within the Scottish Borders area
- (b) Plans are developed in consultation with, and are compatible with, the emergency plans of emergency services and other authorities as may be appropriate.
- (c) Staff who will be required to carry out designated tasks in an emergency situation receive appropriate training and practice, and have access to appropriate equipment so that they may be fully prepared should an emergency arise.
- (d) Emergency plans are exercised regularly, and involve health service staff and all other relevant emergency services.
- (e) Following a major emergency and exercises, debriefing of all staff involved and a review of the health service response is followed by a report to the NHS Management Executive giving details of particular successes or difficulties experienced, consequential amendments to local NHS Borders plans and suggestions for amendment to the Departmental guidance.
- (f) A member of NHS Borders staff is designated as having responsibility for the co-ordination of NHS Borders emergency planning.
- (g) Copies of NHS Borders emergency plans are provided to the NHS Management Executive.

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DUTIES OF CHIEF EXECUTIVE OR ON-CALL EXECUTIVE DIRECTOR DURING A MAJOR EMERGENCY

1. Provide strategic leadership and supervision of the NHS Borders' response to the emergency, and co-ordination of its response with other agencies, including the assessment of health-care needs in relation to the emergency and arranging for these needs to be met.
2. In consultation with Medical Controller at Borders General Hospital, assess the impact the major emergency or incident is having on NHS Borders' staff, equipment, and capacity to cope.
3. Liaise with the Medical Controller and Hospital Controller at Borders General Hospital regarding the level of assistance required, if any, and liaise with neighbouring NHS Boards and keep them apprised of the situation.
4. Assess the scale of the incident. If the incident is likely to have a major impact on the service provision of NHS Borders, or is likely to attract widespread public or political attention etc. (this list is not exhaustive), establish an **Incident Management Support Team** (suggest a membership for this team and include DPH) at Borders General Hospital Management suite.
5. If, for some reason access to Borders General Hospital is not possible, e.g. weather conditions, incident at the Hospital etc., use NHS Borders HQ at Newstead as fall back site for Incident Management Support Team.
6. Identify any NHS Borders staff personally involved in the incident.
7. Until media facility at the BGH Education Centre is established, and arrival of Director of Corporate Management and Performance, take responsibility for media and communication issues.
8. Inform the NHS Management Executive of the major emergency and liaise with them regarding the provision of assistance.
9. Arrange for the redeployment or provision of any necessary resources, the postponement of less urgent work and the switching of tasks between Departments/Specialities to meet new or altered demands. Authorise any necessary adjustment to existing priorities for the use of NHS Borders resources.
10. Provide individual NHS organisations with a focal point for arranging whatever additional support and assistance they might require.
11. Collate information about the NHS response to the emergency, which will be required by other agencies, the media and by the NHS Management Executive. Keep log of all actions (see example log sheet at **Appendix 'A' to this Section**).

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12. Respond to requests for information from the media and public, in liaison with **Director of Corporate Management and Performance (Media Officer)**, Scottish Borders Council (if appropriate), and Police Media Relations Manager/Officer. Appoint NHS Borders Media Officer, if Director of Corporate Management and Performance is not available.
13. Ensure that Hospital Controller contacts Estates and Facilities Department re the provision of extra telephone lines if required.
14. In liaison with Lothian and Borders Police and the Chief Executive of Scottish Borders Council, co-ordinate arrangements for visits of members of the Royal family, Cabinet Ministers and other dignitaries.
15. At the conclusion of the incident, arrange for operational debriefing of NHS Borders staff involved.

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INCIDENT MANAGEMENT SUPPORT TEAM

1. Where a situation develops into a large-scale incident with national interest, the Chief Executive or on call Executive Director should consider establishing an **Incident Management Support Team**.
2. The Incident Management Support Team will provide logistical, strategic and backup assistance to allow the **Hospital Control Team**, or in the case of public health incidents, to the **Incident Control Team**, to concentrate on the essential business of managing the immediate response to the incident.
3. Among the circumstances in which the Chief Executive or on call Executive Director may establish an Incident Management Support Team are **(the list is not exhaustive)**:
 - a) the incident is placing an increasing strain on the resources of NHS Borders
 - b) there is more than one incident site requiring the allocation of NHS resources
 - c) a considerable amount of mutual aid is required from neighbouring NHS Boards
 - d) a major emergency in a neighbouring NHS Board area requires the considerable deployment of NHS Borders personnel within, or outwith the Scottish Borders area
 - e) large volume of enquiries resulting from increasing media and political interest
3. The Incident Management Support Team may be drawn from the following, or their representatives:
 - a) Chief Executive, NHS Borders
 - b) Director of Integrated Care
 - c) Director of Public Health or on call Consultant in Public Health Medicine
 - d) Medical Director & Chair of Clinical Executive
 - e) Director of Nursing & Midwifery
 - f) Director of Corporate Management & Performance (Media Officer)
 - g) Director of Human Resources
 - h) Director of Organisational Change & Development
 - i) Director of Finance
4. The Incident Management Support Team's remit should remain flexible so it can be adapted as required. The remit functions may include: -
 - a) support the Hospital Control Team / Incident Control Team by providing an alternative locus to deal with certain aspects of the media enquiries
 - b) provide a focal point of contact with the Scottish Executive Health Department which has a responsibility to brief Ministers
 - c) deal with enquiries from local and national politicians
 - d) respond to requests from the Hospital Control Team / Incident Control Team leader where additional resources are required.

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5. Minutes of all meetings of the Incident Management Support Team should be kept, including a particular note of any key decisions that are made.

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SECTION 2/4

DIRECTOR OF PUBLIC HEALTH OR ON CALL CONSULTANT IN PUBLIC HEALTH MEDICINE (In the absence of any specific Public Health concerns or issues)

Responsibilities

- 1) The Director of Public Health (DPH) is responsible for the co-ordination of NHS Borders' major emergency procedures, with delegated responsibility to the on-call Consultant in Public Health Medicine.
- 2) The Director of Public Health and Consultants in Public Health Medicine (CsPHM) can be contacted during normal working hours via NHS Borders' Headquarters. At other times the on-call CPHM can be contacted via radio pager or mobile telephone via the Borders General Hospital switchboard.

Duties

- 3) Report to Borders General Hospital Control Room (**Occupational Therapy Treatment Room**), and speak to the Medical Controller, and Primary Care representative. Obtain situation report on the nature of the incident, the level of support required and whether there are any public health implications.
- 4) Confirm with Medical Controller that the Emergency Bed Bureau, NHS Lothian, has been informed that a '**major incident**' has been declared.
- 5) Provide support to Chief Executive, or on-call Executive Director, in providing strategic overview of the NHS Borders' response to the emergency, and co-ordination of its response with other agencies, including the assessment of health-care needs in relation to the emergency and arranging for these needs to be met.
- 6) Give advice to emergency services regarding matters of public health (if appropriate).
- 7) Liaise with Director of Corporate Management and Performance on initiating the NHS 24 helpline service (this can only be initiated by the Director of Public Health or CPHM).
- 8) If the incident is likely to have a major impact on the service provision of NHS Borders, or is likely to attract widespread public or political attention etc. (this list is not exhaustive), assist the Chief Executive or on-call Executive Director to establish an **Incident Management Support Team** at Borders General Hospital Management suite.
- 9) If, for some reason access to Borders General Hospital is not possible, e.g. weather conditions, incident at the Hospital etc., use NHS Borders HQ at Newstead as fall back site for Incident Management Support Team.
- 10) At the conclusion of the incident, assist Chief Executive, or on-call Executive Director with operational debriefing of NHS Borders staff involved.
- 11) Keep a log of all actions (see example log sheet at **Appendix 'A' to this Section**).

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DUTIES OF EMERGENCY PLANNING OFFICER

- 1) Report to the Chief Executive/ Director of Public Health/ Consultant in Public Health Medicine, as appropriate, and provide any assistance required.
- 2) Obtain as detailed an overview as possible of the NHS Borders response, and of the liaison between the Hospital Control Team and those at the scene of the incident.
- 3) Assist Chief Executive/ Director of Public Health/ Consultant in Public Health Medicine in operational debriefing of Health Service staff involved in the response, and with the organisation of a NHS Borders Operational Debrief.
- 4) Assist in the preparation of the Borders NHS Board report to the Scottish Executive Health Department Management Executive.
- 5) Keep a log of all actions (see example log sheet at **Appendix 'A' to this Section**).

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**SECTION 2
APPENDIX A**

DATE _____

LOG KEEPER(S) SERIAL No	TIME	TO	FROM	EVENT	ACTION/REMARKS	SIGNED