



Llywodraeth Cymru  
Welsh Government

## HEALTH EMERGENCY PLANNING ANNUAL REPORT FOR 2021

Name of NHS  
Organisation

Swansea Bay University Health Board

Date

13<sup>th</sup> January 2022

Signature of Chief  
Executive Officer

*Mark Turner*

### Planning and Preparation

1. Please provide the name and position of your nominated Executive level lead for civil contingency/emergency preparedness arrangements.

Siân Harrop-Griffiths  
Executive Director of Strategy

2. Please provide the name and position of your nominated Executive level business continuity lead if different from the above.

Executive Lead as noted in point 1.

3. Please provide the name and position of your officer(s) who has lead day to day responsibilities for your civil contingencies/emergency preparedness arrangements and, if different, the name and position of the officer with day to day responsibility for your business continuity arrangements.

Karen Jones, Head of EPRR  
Jocelyn Jones, EPRR Manager

4. Do you have an organisational chart showing how civil contingencies/emergency preparedness responsibilities are allocated in your organisation?

YES ☒ NO ☐



ORGANISATIONAL Strategy Structures  
STRUCTURE - showi 2 - EPRR.docx

If yes, please attach it

**5. Please provide the name and position of the officer in your organisation responsible for PREVENT activities (normally delivered as part of Safeguarding)**

**Executive responsibility for CONTEST, (Counter Terrorism Strategy), Prevent Stream:**

Director of Nursing, Gareth Howells

CONTEST Prevent devolved to Nicola Edwards, Head of Nursing, Safeguarding

**Executive responsibility for CONTEST; Prepare Stream:** Siân Harrop-Griffiths, Director of Strategy and Civil Contingencies lead

CONTEST Prepare, devolved to Karen Jones, Head of EPRR

**Executive responsibility for Protect Stream, (Security):** Darren Griffiths, Director of Finance and Performance

CONTEST Protect, (Security) devolved to Des Keighan, Assistant Director of Estates

**6. When was your business continuity arrangements for maintaining critical services last considered and adopted by your Executive Board?**

The Management Board received an update on EPRR and presentation of the Major Incident Plans: 12.01.22.

SBUHB has an EPRR Strategy Group which meets monthly, Chaired by the Head of EPRR. The group oversees all EPRR activity for the Health Board and has representation/leads from each Service Group, 'cross cutting services' and Corporate Services. The EPRR Strategy Group includes the arrangements in order to meet the six statutory duties as a Category 1 responder organisation as stated in the CCA 2004 and the work programme is based on this, which includes business continuity arrangements. These are also included as standard agenda items in order to prioritise and provide assurance in terms of meeting the 6 civil protection duties, mapped and arranged in accordance to the EPRR risk register.

The EPRR risk register, is monitored via this group and references the National and South Wales Local Resilience Forum risk registers. This is managed via the HB risk Datix system.

With specific reference to business continuity management the following is in place:

- SBUHB Business Continuity Framework in order that all services have a consistent approach to business continuity management
- Each Service Group, (Morriston, Singleton/NPT; Primary; Community Care and Therapies; and Mental Health and Learning Disabilities) has an Overarching Tactical Business Continuity Plan in place. This articulates the tactical command and control arrangements for a response to a declared business continuity incident, highlights the key risks affecting the Service Group, references the respective service plans and the 'cross cutting service plans' and includes some specific plans to mitigate high risks that may affect the Service Group as a whole, such as loss of telecommunications
- Services within each Service Group and 'cross cutting services', (such as Digital, Finance, Estates, IPC, Pathology, Pharmacy) have business continuity plans in place in accordance to the Framework
- SBUHB Overarching Business Continuity/Significant Incident Procedure is in place to manage the strategic response to a declared business continuity/significant incident across the whole Health Board, as well as articulating the HB business continuity management process.
- The HB has a rapid tele-communications system in place; F24 for activation of both declared major incident, respective Service Group business continuity incidents and a declared significant/business continuity incident that requires a gold command response. This system is managed via HB Support Services and there are separate and distinct groups for each for the purpose of clear activation processes.

7. Does your organisation have written procedures that may be needed to respond to a change in threat level to critical?

YES ☒ NO ☐

SBUHB Critical Threat Level Response Protocol

8. When was your organisation's Lock Down arrangements last worked through or tested?

Dates	Details of what was undertaken
2019 for full hospital lockdown testing	The acute hospitals have undergone Counter Terrorism surveys in accordance with the assessment of the principles for crowded places. Morriston Hospital, pre-pandemic, was classed as a Tier 3 crowded place site and therefore specific actions were drawn up, based on recommendations for improvements in security on this site. The actions have now been completed and include glass reinforcement film for the main entrance windows, strengthening of some external bollards and improvements to CCTV. In addition, guidance was given in terms of improving security generally across the Health Board, as well as advice on lockdown processes and for the Corporate Security Plans such as Bomb threat and Firearms Procedures.
2021 for ED lockdown testing	<p>There is continued engagement with the Wales Extreme Counter Terrorism Unit, (WECTU) Security Advisors. Pre-pandemic there were a number of awareness training sessions delivered by the WECTU Security Advisors and we have recently worked collaboratively with them and the HB Digital Team to produce a video, to deliver this training virtually. The video link was forwarded during December 2021 to all HB staff via email and within one day 500+ staff had viewed it. There is a national e-learning package, (Actions Counter Terrorism), however, there have been issues downloading this for NHS staff to access. In addition, this will now be followed up with some specific and additional face to face training for staff working in admission areas and this is included within the EPRR training and exercising schedule for 2022.</p> <p>Included in the Health Board suite of security plans, is a HB wide lockdown procedure. In addition, there are also Service Group specific lockdown procedures and all of these have recently been updated, with a plan for testing during 2022. The Emergency Department at Morriston Hospital has a specific lockdown procedure and this has been tested during 2021 and also invoked due to some security incident alerts, including discovery of a suspicious vehicle and bomb threat. This worked very well and evidences the heightened security following the terrorist incident at Liverpool Womens Hospital and the consequent raise in the national threat level.</p>

**Major Incident/Emergency Plan(s)**

9. When was your Major Incident/Emergency Plan(s) last considered and formally adopted by your Executive Level Board?

December 2021 and adoption agreed in SBUHB Management Board; January 12<sup>th</sup> 2022. The plans will also be presented to Health Board, 27<sup>th</sup> January 2022.

10. When was your Major Incident/Emergency Plan(s) last updated to reflect any organisational changes and essential plan contacts updated?

The Major Incident Plans were updated and formally re-launched during December 2021 as noted in point 9.

There are a suite of emergency response plans and a schedule is in place for all to be reviewed, (where possible) during 2022. However, and dependent on national revisions following the

pandemic, the Pandemic Response Plans may be delayed for review until national arrangements are confirmed and this will also be based on the learning following full post pandemic debriefs.

Staff contacts are regularly updated and form part of the rapid communication system: F24 and major incident communication exercises are undertaken twice yearly to test this process. Staff contacts are deliberately retained separately to the Major Incident Plans. Following a review of the major incident plans, the F24 system is also cross checked to ensure all action card owners are captured.

**11. Do you have resilient activation systems, action cards and suitably trained and equipped staff to provide for a 24-hour emergency response?**

YES ☒ NO ☐

**If NO, what are the gaps and how are these being addressed?**

There are key themed elements to support the HB major incident response and consequently there are action cards for Switchboard, the Emergency Department, the various medical teams, tactical and strategic command and control and management, support services and relatives care.

As noted in point 10, communication exercises are undertaken twice yearly, in and out of hours and follow on from WAST major incident communication exercises. The rapid communication system: F24 includes 3 mechanisms of contact for action card holders; telephone, text and email with live updates noted as they respond. The system is updated frequently with regard to staff contact details and there are assigned leads from respective services and a process in place to do this. The system is also updated post testing and following submission of a report by Switchboard which is discussed in EPRR Strategy Group. There is also a dedicated Gold Major Incident WhatsApp Group in order that there is a quick alert mechanism for all Gold Team members if a major incident is declared.

There is an EPRR Training and Exercising Strategy and Programme and there is a robust schedule in place for 2022, to deliver training based on a priority of requirements/need and following identified lessons, in relation to training, from previous incidences, including interim debriefs from the C-19 pandemic. These include training for:

- Gold and Silver commanders
- Loggists
- Specific emergency response plan familiarisation/awareness and small, live simulation exercises
- Cyber security

In addition, the active training schedule is including a number of business continuity table top exercises. For each training session there is a self-assessed competency based component and these have been prepared for each and are mapped across to the Skills for Justice Occupational Standards and national EPRR competencies.

A record is retained for all staff that attend training delivered specifically by EPRR personnel and in the near future, it is planned to link with ESR leads to incorporate this to the ESR system.

Some training will be delivered via e-learning packages and we are now waiting for the all Wales major incident e-learning package to be launched, this will then be a pre-requisite for completion prior to any additional EPRR training. As an example, we have worked closely with Wales Counter Terrorism Unit and the HB Digital Team to collate a video in order that every HB email user has received a link to view the Counter Terrorism awareness video in their own time. This will be enhanced further to include a cyber-awareness video and this packaged is being progressed.

During the pandemic, we retained our emergency response arrangements as noted in our plans and consequently staff have had a lot of experience in attendance at Gold, Silver and Bronze meetings as part of the response and this is included as valuable learning experience. In addition, the HB has responded to a number of concurrent incidences during the pandemic response such

as declared major incident due Skewen flooding, Business continuity Incidences due extreme operational pressures, flooding and disruption in supplies of Roche Pathology, Baxter products and blood bottles.

We have also run some table top exercises to test plans as part of facilities established to aid the pandemic response such as mass vaccination, C-19 testing and the Field Hospital. During 2020, we also delivered a winter planning exercise to test plans prior to going into the 2<sup>nd</sup> wave of the pandemic.

As much as possible the HB has nominated representatives to participate in multi-agency training such as Wales Gold and Silver and Wales Extreme Counter Terrorism table top exercise and national paediatric table top exercise. There have been a number of opportunities to attend various seminars, such as legal services in preparing for an inquiry, leadership and some trauma response events. There is always a HB representative in such training opportunities and highlights are followed up in the EPRR Strategy Group.

**12. Do your emergency planning arrangements take account of any roles or responsibilities placed on your organisation as set out in the “Mass Casualty Incident Arrangements for NHS Wales” document, agreed by Chief Executives?**

YES ☐ ✓ NO ☐

**If NO, what are the gaps and how are these being addressed?**

The Wales Mass Casualty Arrangements are included in the HB Major Incident Plans and recently, the Head of EPRR facilitated a Wales wide workshop, as part of a very small sub group in order to review the Wales Mass Casualty Arrangements. Some of the key changes include a review of the current major incident dashboard as previously it was populated manually and is outdated before completion and we are now looking as to how this can be improved further using HB digital dashboards that have been developed as part of the pandemic response. In addition, reviewing the role of the current trauma desk provision, (part of the major trauma network) and how this can be incorporated as well as how Wales will respond to a large scale event now considering the Major Trauma Centre and Network for both South and North Wales.

Currently the strategic Oversight Group and Medical Directors teleconference call remain in place and there is an action card specifically for the Medical Director or their deputy for the purpose of joining the call and also accessing the dashboard.

**13. Does your organisation have robust arrangements for reviewing emergency plans that take account of lessons from incidents and exercises (including following the process set out in the NHS Wales Lessons Identified Register?)**

YES ☐ ✓ NO ☐

A dedicated HB Lessons identified registered is managed by EPRR and the learning for any incidences, exercises, debriefs etc. are included on the register as this also informs the work programme and training strategy. This includes lessons identified in the Wales register. The Lessons identified register was up to date pre-pandemic but requires a further revision following lessons identified from the various resources as noted above and during the pandemic.

**Training, Testing & Implementing Arrangements**



14. Please provide the dates when your organisation tested its emergency plans, as required, through:

a. Carrying out a communications/activation test every six months. Please provide details below

Dates	Details of communications/activation test undertaken
September 2021	As noted in points 10 and 11, the tests are routinely undertaken following the WAST major incident communication exercises twice yearly, unless activated as part of a response and this process includes an out of hours testing provision. The system has been used to live activate during the pandemic

b. Carrying out a table top training exercise within the last year. Please provide details below

Dates	Details of table top training exercise
During 2020 and 2021	As noted in point 10. There have been a number of table top exercises undertaken during the pandemic. In addition, the HB has been in response mode since January 2020 and has well established command and control arrangements in order to respond to the pandemic and other incidences, (major incident and business continuity) as cited.

c. Carrying out a major live or simulated exercise within the last three years. Please provide details below

Dates	Details of major live or simulated exercises undertaken
During 2020 and 2021	As noted in points B and 10 above, the HB, whilst responding to the pandemic emergency has dealt with a number of concurrencies and separate strategic, tactical and operational response arrangements have been required to manage these various emergencies. In addition, a number of simulations have been run to test plans developed as part of the pandemic response, such as the Field Hospital business continuity plans.

15. Apart from COVID-19, have you implemented any of your emergency plans in response to any other incident in 2021?

YES ☒ NO ☐

a. If YES, what was the nature of the incident?

Noted above in points 10, 11 and 14. There was declared major incident for the Skewen flooding and there have been a number of declared business continuity incidences.

b. Were post-event reports produced for these incidents? YES ☒ NO ☐

c. If post incidents reports were produced, have these been shared with the health emergency planning network and any lessons identified uploaded on the Wales NHS Lessons Identified Register?

Yes, the reports have been shared. The Head of EPRR frequently shares learning etc. with other EPRR colleagues and this is regular occurrence to share information. Some have been forwarded for inclusion on NHS Lessons Identified register, however, there have not been the usual opportunities to do this fully as regular meetings have been cancelled due to the pandemic response.

In addition, the HB COVID pathways were shared with all Wales colleagues during the outset of the pandemic, recognised within WG and PHW as evidence of good practice. In addition, and following the successful appointment of a qualified Archivist, there has been a recommendation for all health organisations to follow and consequently the Job Description and Person Specification has been

shared and a number of HB's have now also successfully appointed and the HB Archivist has established a contact group so that all can share information.

- 16. Have you undertaken an assessment of staff training needs in relation to your emergency plans?**

YES ☐ ☒ NO ☐

**If YES, please provide further information**

This was undertaken in order to complete the current EPRR Training and Exercising Strategy, Programme and Schedule and this is discussed via the EPRR strategy Group.

- 17. Do you have a staff training programme to support your emergency plans?**

YES ☐ ☒ NO ☐

**If YES, please provide further details e.g. number of staff trained in Gold, Silver and Bronze roles; emergency planning on line training package.**

This is noted in point 11. EPRR is not a mandatory training requirement. Records are retained for Gold, Silver and loggist training and specific and dedicated training delivered by EPRR personnel. In addition, each service is requested to maintain training records at an operational level. The ESR system does not currently include capture of non-mandatory training, but prior to the pandemic, EPRR were liaising with the HB Training and Development leads to ascertain how ESR can be used to capture EPRR training. In addition, currently, the Digital Team, in conjunction with Digital Health and Care Wales are working on new HB intranet web pages and EPRR has begun working with the HB Digital team for the purpose of building an EPRR dedicated web page. All documents/resources etc. will be centralised for EPRR and accessed via this site.

## **Communications**

- 18. Have relevant NHS organisations and partner agencies been consulted about any role they may have in your emergency plans?**

YES ☒ ☐ NO ☐

- 19. Is there a mechanism for discussing and co-ordinating health emergency planning arrangements internally within your organisation?**

YES ☒ ☐ NO ☐

- 20. If yes, please provide details of your internal mechanism for co-ordinating your emergency planning arrangements – for example: contingency/risk group structure, emergency preparedness strategy, EP work plan etc.**

There is an EPRR Strategy Group in place with assigned service leads in attendance and includes some external partners such as WAST, PHW. The Terms of Reference are currently being reviewed. There is an EPRR Strategy in place, work programme, specific EPRR risk register,

lessons identified register and Training and Exercising Strategy, Programme and Schedule. There is also a specific EPRR email address.

**21 Is there a mechanism for discussing and co-ordinating your emergency planning arrangements externally with Wales NHS and with other organisations, including within the LRF area?**

YES ☒ NO ☐

**If YES, please provide further details on how this is done.**

There is always EPRR representation at the WG Health Emergency Planning Group and sub groups.

There is HB representation at the South Wales Local Resilience Executive and Training and Coordination Group and the various LRF sub groups

There is a NPT L/A resilience Risk group and Swansea L/A Protect and Prepare Group

There is also very close collaboration with other organisation resilience leads and this has proven invaluable over recent times to quick access contacts when establishing mass vaccination and testing centres during the pandemic

**21. If applicable, who represents your organisation at the Local Resilience Forum meetings?**

During the pandemic, the Director of Public Health and Executive Director of Strategy as well as the Head of EPRR have been in attendance to the SWLRF SCG/RCG, (following the 1<sup>st</sup> and 2<sup>nd</sup> waves). The EPRR Manager has been in attendance in the TCG.

The Head of EPRR and Executive Director of Strategy, (where possible) attend the SWLRF Executive Group and the Head of EPRR attends the SWLRF Training and Coordination Group. Highlight reports are collated and shared as appropriate for feedback as well as providing an update in EPRR Strategy group

## **Assessment**

**22. What more can be done to improve your organisation emergency preparedness arrangements?**

Emergency preparedness resilience, response and recovery is embedded within SBUHB. The principles are directed through an integrated management cycle of planning based on risk assessment, joint agency collaboration, consultation and planning and information sharing, training and exercising of plans and procedures. For resilience active HB wide engagement is required in the whole integrated emergency management approach:

Anticipation  
Assessment  
Prevention  
Preparation



**Response  
Recovery**

Recently the Management Board was updated on the key achievements of EPRR during recent times, however some challenges were highlighted and a proposed set of actions, largely around awareness, training and exercising. In order to manage all the elements of EPRR and to allow for a resilient organisation, some of the work programme is resource intensive and having an increased number of standardised training and exercising packages that are ready to be delivered will help considerably. Also, across Wales if EPRR training became a mandatory requirement, as well as more central in staff induction, it would assist with relaying key messages and aid the improvement of general preparedness.

**23. Are you satisfied that your organisation is fulfilling principles required by the Civil Contingencies Act 2004 as described below?**

	YES	NO	If no please say why
1) Assess risks to inform your contingency arrangements	√		Evidenced in points 6,8,13,20,21
2) Put in place Emergency Plans	√		Evidenced in points 6,7,8,9,10,12
3) Put in place Business Continuity Management arrangements	√		Evidenced in point 6
4) Share information with other organisations to enhance co-ordination and efficiency	√		Health Emergency Planners across Wales are extremely collaborative and often liaise for advice and work jointly in development of some plans and training and exercising packages, consequently, frequently, sharing information. Also, throughout the pandemic, if colleagues have attended a national meeting, highlight reports are shared amongst EPRR personnel.
5) Cooperate with other organisations to enhance co-ordination and efficiency	√		Evidenced in points 6,8,12,13, 21
6) Have appropriate arrangement to warn, inform and advise the public/others, including in an emergency	√		Evidenced in point 20. The Health Board Communications Team are members of the SWLRF Warning and Informing sub group and during the pandemic there has been a well-established and effective communications cell as part of the regional TTP. There is work on going to have ready prepared communications for common emergencies such as adverse weather, this work is being picked up at a regional level and will be included within the HB.

**24. Please include an electronic copy(ies) of your current Major Incident /Emergency Plan(s) when submitting this completed Report**

Major Incident Plans will be forwarded separately as appendices:

- SBUHB Overarching Major Incident Plan
- SBUHB Morriston Hospital Major Incident Plan
- SBUHB Morriston Hospital Addendum Major Incident Plan
- SBUHB Neath Port Talbot Major Incident Plan
- SBUHB Singleton Major Incident Plan
- SBUHB Burns Major Incident Plan

**Completed and signed Report forms with any attachments to be returned by 10<sup>th</sup> February 2022**

By email to: UCAI.HEPU@gov.wales

Copied to: Matthew.Evans027@gov.wales

A handwritten signature in black ink, consisting of a stylized 'L' shape followed by a horizontal line and a small upward tick at the end.