

Internal Emergency Plan

Ref PLAN-0001 v4.5

Status: Operational Document type: Plan

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1. Purpose

Following this plan will provide a framework for Tees, Esk and Wear Valleys NHS Foundation Trust to ensure they can provide an effective response to any internal emergencies that may occur.

The definition of an internal emergency is: A situation which imposes an immediate risk to health, life, property or environment or has a high probability of escalating to cause these situations and can include:

- Major fire or flood;
- Utility failure;
- Severe weather conditions;
- Security or health threat.

2. Related documents

This plan describes what you need to do to implement the Internal Emergency Plan section of the Business Continuity Plan, and should be read in conjunction with the Business Continuity Policy.

Other related documents are:-

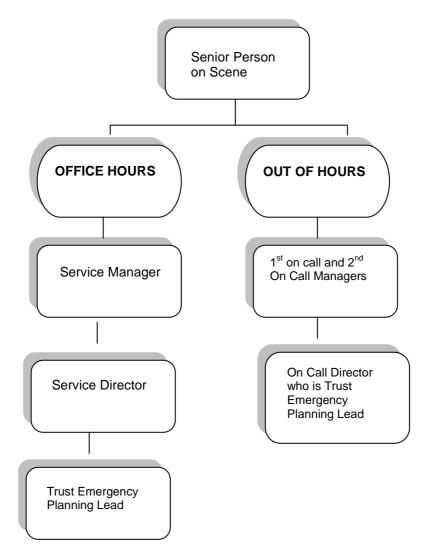
- External Major Incident Plan
- Pandemic Influenza Plan
- Security Policy which details what to do in the event of a bomb alert and how to implement emergency building lockdown

All documents can be found on the Trust Intranet

3. Procedure

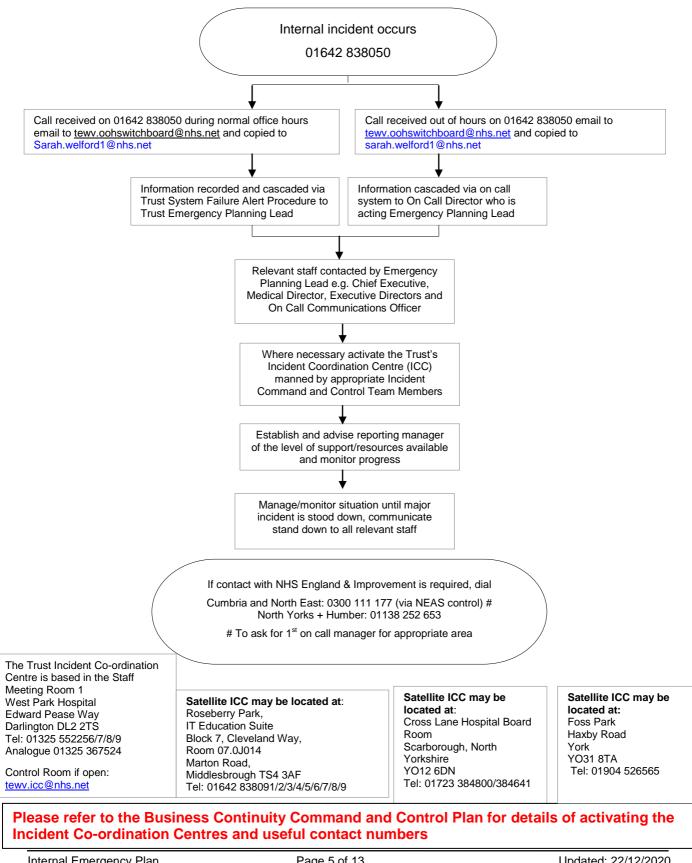
3.1. Internal Incident Contacts Flowchart

In the event of an internal emergency the most senior person at the scene will assume initial control and escalate the emergency within the Trust in line with the flow chart below:-



Details of who to alert and responsibilities are contained in the action cards in section 4.

3.2. Internal incident process flowchart



4. Action Cards

4.1. Senior person taking charge of the incident

ACTION CARD

SENIOR PERSON TAKING CHARGE OF THE INCIDENT AT THE SCENE

ALERT:

- Emergency services where necessary.
- Other nearby premises or patients, staff and any other persons that may be affected by the incident.
- Service Manager or Out of Hours 1st On-Call Manager when safe to do so.

RESPONSIBILITIES:

- 1. First and foremost ensuring the safety of patients, staff and any other persons who may be affected by the incident.
- 2. Request response from emergency services where necessary.
- 3. Cordon off any area as appropriate to ensure the safety of patients, staff and others and to preserve the scene where necessary.
- 4. Inform other services of potential impact where applicable.
- 5. Contact other services for support as required to assist in addressing the initial risks and make the situation safe.
- 6. Initiate any local business continuity plans applicable to the incident.
- 7. Contact the relevant Service Manager or On-Call Manager, when safe to do so who will decide on the level of escalation and response.
- 8. Continue to manage the situation and available staff until the arrival of the relevant senior manager and continue to provide support in coordinating a response to the incident.

4.2. Service manager/First On-Call Manager

ACTION CARD

SERVICE MANAGER / 1ST ON-CALL MANAGER

ALERT:

- Emergency services where necessary.
- Other nearby premises or patients, staff and any other persons that may be affected by the incident.
- Relevant Service Director or On-Call Director and 2nd On-Call Manager immediately where appropriate. If Service Director cannot be contacted contact Trust Emergency Planning Lead direct.

RESPONSIBILITIES:

1. On receipt of incident information from senior person at scene, contact 01642 838050:-

Office Hours – Relevant Service Director or Trust Emergency Planning Lead

Out of Hours – 2nd On-Call Manager and On-Call Director.

Email the sitrep information to <u>tewv.oohswitchboard@nhs.net</u> and copied to Sarah.welford1@nhs.net or if the Incident Coordination Centre is open tewv.icc@nhs.net

- 2. Attend the incident location as soon as possible and allocate where appropriate a deputy to assist in coordinating responses / information back at base.
- 3. Ensure all initial appropriate action has been taken to ensure the safety of patients, staff and others.
- 4. Establish effective communication with all staff.
- 5. Inform other services of potential impact where applicable.
- 6. Liaise with emergency services at the scene where applicable and hand over control of the scene to the emergency services where applicable.
- 7. Establish and maintain a safe perimeter around the incident site and consider if partial or full lockdown of premises is required See Security Procedure
- 8. Request immediate response from other services as required to assist in making the scene safe maintaining the safety of patients, staff and others.
- 9. Ensure patients, carer, family members etc are kept up to date with events as necessary, dependent upon severity this may be passed to the PALS service or the Command and Control Team.

10. Initiate any local business continuity plans applicable to the incident.

11. Provide regular status reports to the Trust's Emergency Planning Lead or On-Call Director.

4.3. Service Director

ACTION CARD SERVICE DIRECTOR

ALERT:

• Trust Emergency Planning Lead if not alerted by Service Manager.

RESPONSIBILITIES:

- 1. Maintain communication with Trust Emergency Planning Lead and Service manager at scene.
- 2. Ensure the CEO is updated on a regular basis.
- 3. Ensure the COO is updated on a regular basis
- 4. Ensure NHS England & Improvement has been informed via on call phone arrangements at Section 3.2, if it affects them.
- 5. Keep a log of any actions taken

4.4. Trust Emergency Planning Lead/Command and Control Team

ACTION CARD

TRUST EMERGENCY PLANNING LEAD in

Incident Coordination Centre (ICC)

(DIRECTOR ON CALL OUT OF HOURS)

ALERT:

• ICC Team members where necessary.

RESPONSIBILITIES:

1. On receipt of incident information if considered necessary declare a Trust emergency.

2. Contact Command and Control Team members and ask them to meet at the Trust Main ICC or satellite room.

3. Bring into action the Trust Command and Control Business Continuity Plan.

- 4. Manage the incident and maintain communication with incident site, collate and review all information relating to the incident and invoke service Business Continuity Plans and Lockdown as necessary.
- 5. Maintain communication with all stakeholders.

6. Maintain an incident log.

7. Declare stand down when services have returned to normal.

- 8. Develop plans for a debriefing session for all key Trust staff and the emergency services.
- 9. Initiate a review process to identify lesson learned and areas of good practice.

5. Role of the Command and Control Team

The Command and Control Team will:

- monitor the incident response and recovery;
- provide direction to the incident site coordinator making strategic decisions and tactical decisions in response to the incident;
- ensure support from other services is provided as required;
- handle all press queries with regards to the incident and circulate communications update to other stakeholders.

6. Who announces the stand down of the emergency plan

The Trust Emergency Planning lead will announce the stand down of the emergency plan.

7. Psychological support to staff and service users

• Coordinate via Director of Therapies

The main source of support for TEWV staff will be the Professional Leads for Psychology in each locality. They will liaise with the Employee Psychology Service, IAPT etc. in the days following an incident. Staff who are providing therapeutic support to people involved in the incident should also be supported to access additional clinical supervision as needed.

Further resources about responses to trauma and advice for staff can be found here

8. Post Incident Review

- The Trust's Emergency Planning Lead is responsible for ensuring this occurs.
- They will involve all relevant persons with the purpose of reviewing effectiveness and identifying any improvements.

9. Definitions

Term	Definition
Internal emergency	 A situation which imposes an immediate risk to health, life, property or environment or has a high probability of escalating to cause these situations.
	Can include:
	- Major fire or flood;
	- Utility failure;
	- Severe weather conditions;
	- Security or health threat.

10. Document Control

Date of approval:	25/02/2021		
Next review date:			
This document replaces:	Internal Emergency Plan PLAN-0001 v4.4		
Lead:	Name	Title	
	Elizabeth Harvey	Emergency Planning and Business Continuity Manager	
Members of working party:	Name	Title	
	Emergency and Business Continuity Working Group		
This document has been	Name	Title	
agreed and accepted by: (Director)	Ruth Hill	Chief Operating Officer	
This document was approved	Name of committee/group	Date 25/02/2021	
by:	Emergency and Business Continuity Working Group	Virtual approval	
An equality analysis was completed on this document on:	29 February 2012		
Amendment details:	02/03/2017		
	18/03/2019: Reviewed and updated Director agreed and accepted by EPWG		
	Updated 14/10/2019 as a working document to go to the EPWG for information		
	Updated 22/7/2020: Responsible Director, ICC email, Foss park Control room		
	Updated 21/12/2020 and Jan / Feb 2021:		
	Removal of faxes from section 3.2 and from Appendix 1: Standard Systems Failure Alert proforma, NHSE/I contact details at 3.2, new link to intranet at section 7.		

Appendix 1 – Standard Systems Failure Alert Proforma

Standard Systems Failure Alert Proforma						
SYSTEM FAILURE ALERT PROFORMA						
То:	From:					
	Tel No:					
	Email:					
Date:	Time:					
Incident Date:	Incident Time:					
Description of Incident:						
Description of Failure:						
Locations / Services Impacted by Failure:						
Resources impacted by Failure:						
Telephone: 01642 838050 Email: <u>tewv.oohswitchboard@nhs.net</u>						

Control Room if open: <u>tewv.icc@nhs.net</u>

*if there is no telephone or email available, please contact at earliest opportunity