Northumberland, Tyne and Wear NHS Foundation Trust Board of Directors Meeting

Meeting Date: 25 May 2016

Title and Author of Paper: Director of Emergency Preparedness, Resilience and

Response Update

Andy Hindhaugh, Resilience Lead

Executive Lead: Gary O'Hare, Executive Director of Nursing & Operations

Paper for Debate, Decision or Information: Information

Key Points to Note:

- Incidents
- Junior Doctors Industrial Action
- Business Continuity
- Winter 2015/16
- Exercises
- Meetings
- Workplan 2016/17

Risks Highlighted to Board:

- Disruption to services from incidents occurring outside the Trust boundary.
- Potential disruption to service should the Junior Doctors industrial action be escalated.

Does this affect any Board Assurance Framework/Corporate Risks? No

Equal Opportunities, Legal and Other Implications: None

Outcome Required: For information

Link to Policies and Strategies: NTW(O) 08 - Emergency Preparedness, Resilience and Response Policy

Director of Emergency Preparedness, Resilience and Response Report

25 May 2016

1. Introduction

This report is an update to the Annual Emergency Preparedness, Resilience and Response Report (EPRR), providing information for the period October 2015 to April 2016.

2. Incidents

Two Business Continuity incidents were reported to Commissioners which met the criteria defined by the NHS England Serious Incidents Framework.

On 27 December 2015, calls to the Trust switchboard at St Nicholas Hospital were disrupted due to flooding at the Vodafone data centre in Leeds. Due to the time of year, the level of disruption was minimal and the main switchboard number was able to be diverted to an alternative number.

On 5 April 2016, a major network outage occurred at St Georges Park. This resulted in disruption to IT networks, including access to RiO, email and telephony. Services linked to St Georges Park were also affected by the incident. Investigations have identified the cause to be attempted cable theft. To prevent future unauthorised access to the cable ducts, additional security has been provided.

3. Junior Doctors Industrial Action

Five periods of industrial action by Junior Doctors have taken place since January 2016 in a national dispute over changes to contracts. An Emergency Care only model was provided on the first four occasions, with Junior Doctor on-call rota's maintained during periods of strike. A full withdrawal of labour by Junior Doctors took place between 8am and 5pm on 26 and 27 April 2016.

An incident management group has been in place to consider the impacts and management arrangements required. The Trust Incident Coordination Centre (ICC) was opened on the dates of industrial action to manage any impacts on services and provide NHS England with required reports. A physical health support team was also added to the ICC on 26 and 27 April to triage and respond to any issues that Junior Doctors would normally deal with.

Although negotiations between the BMA and Government are taking place, NHS Improvement and NHS England has requested that contingency plans for industrial action are reviewed. As a worst case scenario, a full withdrawal of labour for an indefinite period should be planned for.

The planning team met on 17 May to consider actions required should intensified and extended industrial action be announced. This would include:

- Reinstatement of the Command structure to coordinate the Trust response;
- Extension of the Physical Health support team to operate 24/7 if required;
- Other medical staff to cover all Junior Doctors on-call rota's, including out of hours;

- Cancellation of all Junior Doctors planned work and some consultants planned work to allow other medical staff to be released to provide on call cover;
- Liaise with Acute Trusts about closer working to prevent unnecessary admissions.

It is expected that a further letter will be sent to Trusts after 18 May, to provide an update on progress with negotiations and actions required going forward. A verbal update will be provided to the Board of Directors when this is received.

4. Business Continuity

Internal Audit undertook a review of the Trust's Business Continuity system in October 2015. The final report was issued in February 2016 and provided significant assurance but with some issues of note. A management response and action plan has been developed to address the findings of the report.

The Trust's Business Continuity system is in place to mitigate against a wide range of potential disruptions. In view of the forthcoming CQC inspection. services have been asked to review their plans. Of the 181 registered clinical services in the Trust, over 90% now have Business Continuity Plans in place. The remainder of plans are currently being developed and it is expected that all clinical services will have plans in place by the end of May.

5. Winter 2015/16

A Winter Debrief and Forward View event was held on 4 May, hosted by North of England Commissioning Support (NECS) on behalf of CCG's and NHS England. The event looked at learning lessons from pressures experienced during winter 2015/16 and identifying best practice and innovation in readiness for winter 2016/17.

6. Exercises

Communications exercises were undertaken in all inpatient areas in November 2015 and January 2016. These included checks whether Business Continuity plans are easily accessible.

A table top exercise to test the Trust response to a Pandemic Influenza scenario was held on 11 April 2016. Pandemic Influenza remains the highest risk on the national Emergency Preparedness Risk Register and all NHS Trusts have been asked by NHS England to ensure they have up to date tested plans. Actions from the exercise are being incorporated into the Trust Pandemic Influenza plan in readiness for a regional exercise in October 2016.

7. Meetings

Within the Trust, the Strategic Emergency Preparedness, Resilience and Response Group meet quarterly, chaired by the Executive Director of Nursing and Operations. The group met twice in the reporting period.

Externally, the Trust is a member of the Local Health Resilience Partnership and Health and Social Care Resilience Group. The Trust also attends the North East

NHS Business Continuity Forum and the regional Mental Health Emergency Planning Forum.

8. Workplan 2016-17

Priorities identified for the coming year include:

- Continued development of Business Continuity Plans
- Review of EPRR policy (NTW(O) 08)
- Implementation of actions from Internal Audit report
- Review of Director on-call booklet
- Self-assessment against NHS England EPRR Core Standards 2016/17

Andy Hindhaugh Resilience Lead May 2016