

EMERGENCY PLANNING

STANDARD

The organisation has planned and prepared an organised and practised response to all major incidents and emergency situations which affect the provision of normal services.

OVERVIEW

The HPSS organisations which must comply with Emergency Planning Controls Assurance Standards are HSS Boards, HSC Trusts, Central Services Agency (CSA) incorporating Regional Supplies Service, Northern Ireland Regional Medical Physics Agency (NIRMPA), Northern Ireland Guardian ad Litem Agency and Northern Ireland Blood Transfusion Service (NIBTS).

The purpose of planning for emergencies in the HSC is to ensure preparedness for an effective response to any major incident or emergency and to ensure that the organisation fully recovers to normal services as quickly as possible. The standard applies to the ability of the organisation to:

Respond to incidents which are outside the normal experience and which are of such a scale that special arrangements are necessary

Effectively contribute to the combined response of the Northern Ireland Ambulance Service (NIAS), Northern Ireland Fire Brigade (NIFB), the Police Service of Northern Ireland (PSNI), HM Coastguard, the Emergency Medical Assistance Rescue Team (EMART) and other agencies.

All HSS/HSC organisations should have detailed Emergency Plans/Major Incident Plans (MIP) which are tested and reviewed on an annual basis.

All HSS/HSC organisations should produce annual reports on emergency planning and completed major incident templates returns to the Department of Health, Social Services and Public Safety (DHSSPS). DHSSPS holds annual emergency planning monitoring meetings with Boards, Trusts, and Agencies. DHSSPS produces a report on the state of preparedness in the HSS/HSC following the monitoring meetings

All HSS/HSC organisations must comply with the Emergency Planning Functions Directions

The Emergency Planning Controls Assurance Standards mirrors the key requirements of DHSSPS and Central Emergency Planning Unit (CEPU) Office of the First Minister and Deputy First Minister (OFMDFM) emergency planning guidance.

The overall aim of emergency planning/major incident planning is to achieve an effective response to an incident regardless of its cause. Plans should be realistic, robust and sufficiently flexible to deal with a range of situations that are likely to increase in significance, duration and complexity and which may affect more than one commissioning authority, provider or service.

The planning process should ensure that the HSS/HSC has:

Identified local hazards and assessed the risk. (The Emergency Planning Functions Directions require HSS Boards to ensure annual update of risk assessment of potential high risk emergencies within its area.)

Taken a population and geographical location based approach to situations which may affect and impact upon other commissioners, health and social care providers and emergency services including mass casualty incidents.

Identified internal and external dependencies and stakeholders.

Collaborated within the HPSS and other key stakeholders.

Communication strategies and procedures in place to deal with any incident within the scope of major incident and service continuity planning.

Effective training and testing programmes in place.

Effective review, audit and monitoring procedures in place.

Effective emergency plan/MIP documents and distribution control systems in place.

Responsibilities of the Chief Executive and the nominated Emergency Planning Officer clearly delineated.

The major incident plan should ensure that the organisation can:

Place organisations on alert status.

Implement the emergency plan/MIP.

Alert Board/Trust/Agency control team and assemble to manage the incident.

Escalate and maintain incident response and provide and receive mutual aid.

Deal with enquiries from the public, members of staff and the media.

Evaluate continuation of other essential care business during the response to the emergency.

Communicate and work with other stakeholders throughout the incident or emergency situation.

Decant and/or receive patients, clients or services to or from other organisations as part of an agreed emergency response.

Provide essential supplies with documented procedures for procuring additional/alternative supplies.

Provide staff who are trained, understand their roles and responsibilities and have appropriate equipment, clothing including Personal Protective Equipment (PPE) and trained in use of the equipment.

Emergency plans/Major Incident Plans should be prepared within the framework of Integrated Emergency Management (IEM) the underlying aim of which is that flexible plans should be developed which would enable an organisation to deal effectively with a major or minor emergency whether foreseen or unforeseen.

Major Incident Plans should include coordination arrangements which will deliver a comprehensive and seamless service to those involved in the emergency.

The emergency plan/MIP should be integrated into the organisation's normal working practices and structures.

Presentations on IEM, MIP should be included in staff induction training.

The emergency plan/MIP should include planning for a mass casualty and or catastrophic incident in line with DHSSPS and DH guidance.

During emergencies HSS/HSC and or emergency services staff will give advice and warnings to members of the general public affected by the emergency. Under Human Rights legislation the individual may ignore this advice ie refuse to leave home during an evacuation emergency. Our understanding is that an individual cannot be forced to comply with this advice. This is an evolving area and further advice will be offered to Boards and Trusts in due course.

In general emergencies are not discriminatory in terms of where and when they happen or who they affect. The contingency arrangements should be compliant with section 75 of the Northern Ireland Act 1998 including facilities in rest centres for disabled people, special foods compatible with religious beliefs and printing of advice leaflets in appropriate languages etc.. However in an emergency situation when time is limited and responses are stretched it may be necessary for the HPSS and the emergency services to prioritise

actions and resources which will provide the greatest benefit for the greatest number of people.

Assessment Guidance

HSS/HSC organisations vary significantly in size and in the nature of the services they deliver. It follows that that not all controls assurance standards will apply to each organisation. This is implicit in the current Departmental guidance, eg. *The Reference Table on Applicability and Expected Levels of Compliance* which should be referred to before commencing the self-assessment exercise.

Even where a standard is generally applicable to the work of an organisation it is quite possible that not all of the criteria will be materially applicable. Before self-assessing against a standard, therefore, an organisation should consider the relevance of each criterion to its own business and conduct its assessment accordingly. Thus, where a criterion is clearly relevant to an organisation, the score should be based on the **totality of the action taken to address the requirement**. Where there is little or no relevance, the criterion should be considered “not applicable” and ignored for scoring purposes as explained in the guidance on *Reporting Compliance* issued by the Department.

This approach will ensure that the assessment has no unfairly detrimental effect on the organisation’s overall score but reflects a proper evaluation of the key areas of risks identified and the actual levels of controls put in place to manage those risks.

Likewise, the *Examples of Verification* set out in the standard are just that – examples, for guidance only. Once again, it is the nature of each organisation’s business that determines the type of evidence needed to prove that appropriate controls are in place. In effect, this may mean that only some of the examples listed are relevant to a particular HSS/HSC organisation or, indeed, that there are other more relevant examples which can be adduced as evidence of compliance. It is also the case that some evidence can be deployed to demonstrate compliance with more than one criterion or standard.

KEY GUIDANCE DOCUMENTS

Emergency Planning Functions Directions 28 May 2004

Circular HSS(MD) 5/2003 - Emergency Planning - 10 February 2003

Letter from CMO - Emergency Medical Assistance Rescue Teams (EMART) - 20 March 2003

Letter from DHSSPS - Emergency Planning Audit of Major Incident Plans and Audit Template Attachments - 9 June 2003

Letter from CMO - Chemical Incident Manual - 7 November 2002

Chemical Incident Action Manual for A&E Departments - Health Protection Branch DHSSPS NI - November 2002

Draft DHSSPS Emergency Plan December 2004

Circular PSU 1/2001 - Integrated Emergency Planning for Health and Personal Social Services in Northern Ireland - 17 January 2001

SUPPLEMENTARY GUIDANCE DOCUMENTS

Circular HSS(MD) 38/2001 - Emergency Planning - 18 December 2001

Circular HSS(MD) 34/2002 - Emergency Planning Counter Measures - 18 November 2002

Draft Northern Ireland Civil Contingencies Framework CEPM/OFMDFM February 2005.

Northern Ireland Standards in Civil Protection - CEPU OFMDFM - April 2001. Available on <http://cepu.nics.gov.uk/pubs.htm>

Guide to Emergency Planning in Northern Ireland - CEPU OFMDFM – July 2004. Available on <http://cepu.nics.gov.uk/pubs.htm>

A Guide to Plan Preparation - CEPU OFMDFM - May 2002. Available on <http://cepu.nics.gov.uk/pubs.htm>

A Guide to Evacuation in Northern Ireland - CEPU OFMDFM - April 2002. Available on <http://cepu.nics.gov.uk/pubs.htm>

How Resilient is your Business to Disaster - Home Office - 2000

Dealing with Disasters Revised Third Edition - Cabinet Office - August 2003

Guidance on dealing with Civil Emergencies - Ambulance Service Association
- 1998

Planning for Major Incidents - NHS Guidance, Department of Health – 1998
(under revision).

DAO(DFP) 5/2001 – Corporate Governance: Statement of Internal Control

HSS(PPM) 3/2002 – Corporate Governance: Statement of Internal Control

HSS(PPM) 4/2005 – AS/NZ 4360:2004 – Risk Management

Standards Australia (2004) Risk Management AS/NZS 4360:2004

DAO (DFP) 25/2003 – Statement of Internal Control

HSS (PPM) 8/2002 – Risk Management in the HPSS

HSS (PPM) 10/02 Governance in the HPSS – Clinical and Social Care
Governance: Guidelines for Implementation

HSS (PPM) 13/2002 - Governance in the HPSS – Risk Management

HSS (PPM) 5/2003 - Governance in the HPSS – Risk Management and
Controls Assurance.

HSS (PPM) 8/04 Governance in the HPSS: Controls Assurance Standards –
Update

CRITERION 1

Board level responsibility for emergency planning is clearly defined and there are clear lines of accountability throughout the organisation leading to the Board and the Chief Executive. The Chief Executive has overall responsibility for emergency planning and has given authority to a Senior Officer to work on emergency planning and liaise with the emergency services and all appropriate organisations.

INFORMATION

Key Guidance

Source

1. Emergency Planning Functions Directions 28 May 2004
2. Circular HSS(MD) 5/2003 – Emergency Planning – 10 February 2003
3. Letter from DHSSPS - Emergency Planning Audit of Major Incident Plans and Audit Template Attachments - 9 June 2003

Supplementary Guidance

Draft Northern Ireland Civil Contingencies Framework – CEPU/OFMDFM February 2005

HSS(PPM) 3/2002 – Corporate Governance: Statement of Internal Control

HSS(PPM) 4/2005 – AS/NZ 4360:2004 – Risk Management

DAO(DFP) 5/2001 – Corporate Governance: Statement of Internal Control

DAO (DFP) 25/2003 – Statement of Internal Control

Guidance

The key requirements are that the organisation should demonstrate that:

The Chief Executive Officer accepts overall responsibility for seeing that HSS Boards, HSC Trusts, NIRMPA, NIBTSA, CSA (Incorporating RSS) and NIGALA have reviewed their state of preparedness and taken forward improvements in major incident planning Circular HSS (MD) 5/2003 issued 10 February 2003

Emergency Planning roles and responsibilities of HSS Boards, Trusts, Agencies and the Department are defined in Circular PSU 1/2001 issued 17 January 2001

Questions 1, 2 and 3 of the Emergency Planning Audit of Major

Incident Plans template issued 9 June 2003 state:

Are the responsibilities of the Chief Executive Officer set out?
Is the plan endorsed by the Board?
Does the plan identify a person responsible for ensuring the plan is updated, reviewed and distributed on a regular basis?

The criteria to be used in determining whether or not a Board, Trust, Agency is 'prepared' are essentially those described at Annex F of the recent NAO Report Facing the Challenge: NHS Emergency Planning in England". The 8 "Cs" – clarity, coherence, contingency, collaboration, credibility, capability, communications and commitment are detailed in Circular HSS(MD) 5/2003.

Templates for audit of major incident plan questions.

Does the plan identify the organisation's key roles and responsibilities?

Does the plan identify the key staff who are trained to deliver their responsibilities?

Does the plan contain action cards/lists to support key staff in meeting their responsibilities?

Examples of Verification

Annual emergency planning reports

Notes of DHSSPS annual monitoring meetings

Exercise debrief reports

Completed major incident audit templates

Key roles and responsibilities are written with emergency planning documents, service agreements and Memorandums of Understanding MOU.

Notes of Boards, Trusts and other Emergency Planning Group meetings.

Emergency Planning job descriptions.

Links with other standards

All standards (generic criterion).

CRITERION 2

There is a major incident plan for the organisation to respond to both internal and external emergency situations and inter service inter agency cooperation during the response.

INFORMATION**Source****Key Guidance Documents**

Emergency Planning Functions Directions 28 May 2004

Circular HSS(MD) 5/2003 – Emergency Planning - 10 February 2003

Letter from CMO – Emergency Medical Assistance Rescue Teams (EMART) - 20 March 2003

Letter from DHSSPS – Emergency Planning Audit of Major Incident Plans and Audit Template Attachments - 9 June 2003

Letter from CMO - Chemical Incident Manual - 7 November 2002

Chemical Incident Action Manual for A&E Departments - Health Protection Branch –DHSSPS - November 2002

Draft DHSSPS Emergency Plan December 2004

Circular PSU 1/2001 – Integrated Emergency Planning for Health and Personal Social Services in Northern Ireland - issued 17 January 2001

Supplementary Guidance Documents

Draft Northern Ireland Civil Contingencies Framework CEPU/OFMDFM February 2005

A Guide to Evacuation in Northern Ireland - CEPU OFMDFM - April 2002

Guide to Emergency Planning in Northern Ireland - CEPU OFMDFM – July 2004

Northern Ireland Standards in Civil Protection - CEPU OFMDFM - April 2001

A Guide to Plan Preparation - CEPU OFMDFM - May 2002

Dealing with Disaster Revised Third Edition - Cabinet Office - August 2003

Planning for Major Incidents - NHS Guidance, Department of Health - 1998

Guidance

The organisation should demonstrate that there is a written plan in place to respond to both internal and external emergency situations.

The key requirements are:

Circular PSU 1/2001

Each HSS Board should ensure that

- i. contracts with providers specify the requirement to develop and maintain emergency planning and integrated emergency management;
- ii. contracts with providers specify effective liaison and cooperation with other providers, the emergency services and other agencies to ensure an integrated response to major incidents;
- iii. contracts with providers specify that effective business continuity management and recovery strategies are in place;
- iv. Board and provider emergency plans are regularly reviewed, validated and tested;
- v. out of hours contact arrangements are maintained;
- vi. an effective response is provided to chemical contamination or other pollution incidents, which would impact upon the health of the population; and
- vii. risk assessment is carried out for potential hazards within or adjoining the Board area;

Each Board should also:

- i. when necessary provide the strategic management of a major incident involving a range of agencies and provide a Board Command Centre;
- ii. take the lead in co-ordinating major incident planning in primary care;
- iii. ensure that Board staff are familiar with plans and receive appropriate training;
- iv. make available adequate resources to ensure that the Board and contract to providers are able to fulfil their contingency planning and response roles;
- v. designate a nominated officer to act as a main point of contact with the Department, providers and other agencies on emergency planning and IEM issues; and
- vi. provide an annual report on emergency planning activities to the Department.

Each Trust and Agency should comply with contractual arrangements, DHSSPS emergency planning and integrated emergency management guidance and Emergency Planning Functions Directions; to ensure that:

- i. comprehensive, robust and flexible plans are developed within a IEM framework to address emergency situations arising out of failure of utilities, systems and adverse weather;
- ii. emergency plans and IEM arrangements build upon existing services and expertise and comply with Northern Ireland Standards Civil Protection;
- iii. effective business continuity management arrangements and recovery strategies are in place;
- iv. emergency plans are regularly reviewed, tested and validated;
- v. hazard analysis and risk assessment is carried out;
- vi. adequate resources are provided to deliver an emergency response and staff are familiar with the plans, receive appropriate training and have access to appropriate equipment;
- vii. out of hours contact arrangements are maintained.

Trusts and Agencies should also:

- i. liaise and cooperate with other key HPSS staff (agencies including district councils), designated voluntary organisations and the emergency services to ensure an integrated response to major incidents and follow-up support and if required long term counselling;
- ii. designated a nominated officer to act as a main contact point with the Department, Boards, other providers, the emergency services, district councils and voluntary organisations on emergency planning issues;
- iii. provide situation reports, when required, to the Board Command Centre and the RHCC in the agreed format within the timescale requested;
- iv. provide an annual emergency planning report to the relevant Board and the Department.”

Circular HSS(MD) 5/2003

The 8 Cs criteria to be used in determining whether or not a Board, Trust, Agency is ‘prepared’

“**Clarity** – are roles and responsibilities within and between organisations clear and defined? Who is in charge?

Coherence – are the respective functions of all relevant players known and understood by each of them? Do they fit together?

Contingencies – are different operational possibilities and threats accounted for? Are the plans and underpinning arrangements flexible without being vague?

Collaboration – a basic principle is that of mutual aid and support with neighbouring and partner organisations; this must be spelt out in specific

terms as well as well as principles;

Credibility – plans and processes, to be credible, must have been put to the test within a valid time period;

Capability – are the right skills and expertise available to meet the likely scale of threat? The training and testing of staff, equipment and procedures must be demonstrated against an appropriate schedule as being up to date;

Communications – do the plans make plain how communicating with staff, patients, clients and the public will be achieved effectively?

Commitment – there must be evidence of commitment to the plan and supporting arrangements, and their updating, by Chief Executives.”

Questions 5 and 6 Major Incident Audit Templates

Does the plan define what constitutes a major incident for the organisation?

Does the plan appreciate the range of major incidents to which the organisation may have to respond?

Does it identify local hazards and assess the risk?

Command and control and alerting arrangements in major incidents audit template questions

Does the plan explain the command and control and reporting arrangements during a major incident?

Does the plan contain alerting and callout procedures on a 24 hour basis?

Does the plan detail the arrangements for establishing a control team, including its location and facilities?

Collaboration and liaison questions in Major Incident audit templates

Has the plan been developed in collaboration with other stakeholders?

Is the organisation’s role integrated with that of other stakeholders?

Are supporting policies and plans referenced?

Does the plan contain arrangements for accessing mutual aid?

Does the plan contain arrangements for operating at a CBRN incident including MOU with NIFB, NIMPA and EMART and accessing stocks of antidotes/vaccines / Pods?

Does the plan contain arrangements for accessing military resources and

expert advice through PSNI?

Does the plan contain arrangements for the immediate notification of and or confirmation with NIAS, PSNI and NIFB controls including the identification of specific hazards?

Are the arrangements for Trust liaison with the police documentation team effective?

Are the arrangements for the transfer of patients or services to other hospitals explained?

Does the plan include arrangements for alerting the NIBTS?

Communication questions in Major Incident Audit templates

Does the plan detail the arrangements for communications including the use of radios during a major incident?

Does the plan detail the communications arrangements within the incident site, and between sites for HPSS, NIAS, NIFB, PSNI and EMART staff involved?

Does the plan identify back up arrangements in the event of a major systems failure at NIAS/ NIFB controls?

Examples of Verification

Organisation's plans

Correspondence concerning review and update of plan

Annual emergency planning reports

Completed audit templates

Links with other standards

Risk Management

CRITERION 3

All feasible/realistic types of emergency situations are addressed in the service continuity plan(s)

INFORMATION

Source

Key Guidance Documents

Emergency Planning Functions Directions 28 May 2004

Draft DHSSPS Emergency Plan December 2004

Supplementary Guidance

Circular PSU 1/2001 – Integrated Emergency Planning for Health and Personal Social Services in Northern Ireland - 17 January 2001

Draft Northern Ireland Civil Contingencies Framework CEPU/OFMDFM February 2005

Guidance

Major Incident Audit Templates.

Does the plan appreciate the range of major incidents to which the organisation may have to respond?

Does it identify local hazards and assess the risk?

Does it make reference to associated standard operating procedures?

Para 3 of Emergency Planning (Functions of Health and Social Services Boards) (NO. 1) Direction (Northern Ireland) 2004.

Each Health and Social Services Board shall work with other Boards, HSC Trusts, Northern Ireland Central Services Agency, Special Agencies and all appropriate organisations to ensure annual update of risk assessment of potential high risk emergencies within its area.

Examples of Verification

Annual emergency planning reports

Notes of monitoring meetings

Business continuity documents

Links with other standards

Risk Management

CRITERION 4

Appropriate internal and external stakeholders in the major incident plan are consulted and collaborated with concerning their roles and responsibilities. Stakeholders comprise the HSS/HSC, the emergency services, Primary Care, voluntary organisations and district councils and organisations providing agency staff for HSS/HSC deployment.

INFORMATION**Source****Key Guidance Documents**

Emergency Planning Functions Directions 28 May 2004

Circular HSS(MD) 5/2003 – Emergency Planning - 10 February 2003

Letter from DHSSPS – Emergency Planning Audit of Major Incident Plans and Audit Template Attachments - 9 June 2003

Draft DHSSPS Emergency Plan December 2004

Supplementary Guidance

Circular PSU 1/2001 – Integrated Emergency Planning for Health and Personal Social Services in Northern Ireland - 17 January 2001

Draft Northern Ireland Civil Contingency Framework – CEPU/OFMDFM February 2005

Guide to Emergency Planning in Northern Ireland - CEPU OFMDFM – July 2004

A Guide to Evacuation in Northern Ireland - CEPU OFMDFM - April 2002

Dealing with Disaster Revised Third Edition - Cabinet Office - August 2003

Planning for Major Incidents - NHS Guidance, Department of Health – 1998 (under revision)

Guidance

Very infrequently do emergency situations arise which affect health care organisations in isolation. Thus, in the planning process for major incidents, it is critical to consider and involve all potential internal and external stakeholders.

Major Incident Audit Template questions

Has the plan been developed in collaboration with other stakeholders?

Is the organisation's role integrated with that of other organisations?

Are supporting policies and plans referenced?

Examples of Verification

HSS/HSC representation on multi agency planning groups

Internal emergency planning groups

Emergency planning annual reports

Completed template returns

Notes of monitoring meetings

Links with other standards

Risk Management

CRITERION 5

Emergency preparedness is validated through the exercising and testing of emergency plans.

INFORMATION**Source****Key Guidance**

Emergency Planning Functions Directions 28 May 2004

Circular HSS (MD) 5/2003 – Emergency Planning - 10 February 2003

Letter from DHSSPS – Emergency Planning Audit of Major Incident Plans and Audit Template Attachments -dated 9 June 2003

Question 8 of Major Incident Audit Templates. Is there a programme of training and frequency of exercising provided for within the plan?

Draft DHSSPS Emergency Plan December 2004

Supplementary Guidance

Circular PSU 1/2001 – Integrated Emergency Planning for Health and Personal Social Services in Northern Ireland - 17 January 2001

Draft Northern Civil Contingencies Framework – CEPU/OFMDFM February 2005

Guidance

Circular PSU 1/2001, paragraph 6 (IV)

Emergency Plans are regularly reviewed, tested and validated.

Major Incident Templates

Is there a program of training and frequency of exercises provided for within the plans?

Does the plan detail debrief arrangements?

Examples of Verification

Exercise debrief reports

Annual emergency planning reports

Notes of monitoring meetings

Completed major incident audit templates

Exercise log books

Links with other standards

None

CRITERION 6

The major incident plan is regularly reviewed.

INFORMATION**Source****Key Guidance Documents**

Emergency Planning Functions Directions 28 May 2004

Circular HSS(MD) 5/2003 – Emergency Planning - 10 February 2003

Letter from DHSSPS regarding 2004 monitoring arrangements –14 April 2004

Letter from DHSSPS – Emergency Planning Audit of Major Incident Plans and Audit Template Attachments - 9 June 2003

Planning Priorities and Actions for HPSS 2003/2004 – DHSSPS - February 2003

Draft DHSSPS Emergency Plan December 2004-

Supplementary Guidance

Circular PSU 1/2001 – Integrated Emergency Planning for Health and Personal Social Services in Northern Ireland - 17 January 2001

Circular HSS(MD) 38/2001 – Emergency Planning -18 December 2001

Draft Northern Ireland Civil Contingencies Framework – CEPU/OFMDMF February 2005

Guidance

The major incident plan should be fully reviewed on an annual basis or more frequently where service changes or improvement evidence from the activation of the plan indicates. This will ensure that the arrangements are still valid and that training for incidents and emergencies is still appropriate, and that there is full commitment to the plan.

The review process should address and validate all elements and organisations that form part of the plan.

Does the plan identify a person responsible for ensuring the plan is updated, reviewed and distributed on a regular basis?

Examples of Verification

Annual emergency planning reports

Notes of monitoring meetings

Completed audit templates

Independent audit of major incident plans

Links with other standards

None

CRITERION 7

The organisation provides funding and resources to ensure that emergency planning responsibilities are met and that it is able to respond effectively to a major incident.

INFORMATION**Source****Key Guidance**

Emergency Planning Functions Direction 28 May 2004

Circular HSS (MD) 5/2003 – Emergency Planning - 10 February 2003

Letter from CMO – Emergency Medical Assistance Rescue Teams (EMART) - 20 March 2003

Letter from DHSSPS – Emergency Planning Audit of Major Incident Plans and Audit Template Attachments - 9 June 2003

Supplementary Guidance

Circular PSU 1/2001 – Integrated Emergency Planning for Health and Personal Social Services in Northern Ireland - 17 January 2001

Circular HSS(MD) 38/2001 – Emergency Planning - 18 December 2001

Circular HSS(MD) 34/2002 – Emergency Planning Counter Measures - 18 November 2002

Draft Northern Ireland Civil Contingencies Framework February 2005

Guidance

DHSSPS has provided extensive funding on counter measures and EMART equipment, vehicles, communication systems, PPE, drugs, antidotes, vaccines and training

Boards, Trusts and Agencies should identify within budget allocations additional emergency planning costs.

Examples of Verification

The availability of plans and action cards

The availability and serviceability of facilities, equipment and stores

Evidence of budgetary allocation

Links with other standards

Financial Management

CRITERION 8

The organisation has access to up to date guidance relating to emergency planning

INFORMATION**Source****Key Guidance**

Emergency Planning Functions Directions 28 May 2004

Circular HSS(MD) 5/2003 – Emergency Planning - 10 February 2003

Letter from CMO – Emergency Medical Assistance Rescue teams (EMART) - 20 March 2003

Letter from DHSSPS - Emergency Planning Audit of Major Incident Plans and Audit Template Attachments - 9 June 2003

Letter from CMO - Chemical Incident Manual - 7 November 2002

Chemical Incident Action Manual for A&E Departments Health Protection Branch DHSSPS NI - November 2002

Draft DHSSPS Emergency Plan December 2004

DHSSPS Contingency Planning Incidents Involving Radiation August 2004

Supplementary Guidance

Circular PSU 1/2001 – Integrated Emergency Planning for Health and Personal Social Services in Northern Ireland - 17 January 2001

Circular HSS(MD) 38/2001 - Emergency Planning - 18 December 2001

Circular HSS(MD) 34/2002 – Emergency Planning Counter Measures - 18 November 2002

Draft Northern Ireland Civil Contingencies Framework February 2005

Northern Ireland Standards in Civil Protection - CEPU OFMDFM - April 2001

Guide to Emergency Planning in Northern Ireland - CEPU OFMDFM – July 2004

A Guide to Plan Preparation - CEPU OFMDFM - May 2002

A Guide to Evacuation in Northern Ireland - CEPU OFMDFM - April 2002

Planning for Major Incidents - NHS Guidance, Department of Health – 1998
(under revision)

Dealing with Disasters Revised 3rd Edition - Cabinet Office - August 2003

Guidance

Access to relevant guidance is essential. As a minimum those involved in emergency planning should have access to the key references, in particular

Circular PSU 1/2001 – Integrated Emergency Planning for Health and Personal Social Services in Northern Ireland - 17 January 2001

DHSSPS website www.dhsspsni.gov.uk

HPA website <http://www.hpa.org.uk/>

CEPU website www.cepu.nics.gov.uk

DOH EPCU <http://www.doh.gov.uk/epcu/index/htm>

Emergency Planning College Easingwold website
<http://www.ukresilience.info/college/index.htm>

DHSSPS Governance website
<http://www.dhsspsni.gov.uk/governance/index.asp>

Examples of Verification

Demonstration of Internet access and Intranet

Availability of key references

Links with other standards

All standards (generic criterion)

CRITERION 9

All appropriate staff should receive emergency preparedness training that is commensurate with their role in the major incident plan

INFORMATION**Source****Key Guidance**

Emergency Planning Functions Directions 28 May 2004

Circular HSS(MD) 5/2003 – Emergency Planning – 10 February 2003

Letter from CMO – Emergency Medical Assistance Rescue Teams (EMART) - 20 March 2003

Letter from DHSSPS - Emergency Planning Audit of Major Incident Plans and Audit Template Attachments - 9 June 2003

Draft DHSSPS Emergency Plan December 2004

Circular PSU 1/2001 – Integrated Emergency Planning for Health and Personal Social Services in Northern Ireland - 17 January 2001

Letter from CMO-Chemical Incident Action Manual, November 2002.

Chemical Incident Action Manual for A&E Departments November 2002

Draft Northern Ireland Civil Contingencies Framework CEPU/OFMDFM February 2005

Guidance

Almost all staff could be involved in responding to a major incident. All staff should, therefore, have appropriate knowledge of the major incident plan commiserate with their roles and responsibilities. For those who are likely to have a key role in the response there must be regular training.

The following are key requirements:

Annual business plan to address individual and group training

Development of training programmes

Ensure that staff are familiar with use of specialist facilities and equipment and PPE

Cascade of EMART training within Trusts

Examples of Verification

Annual emergency planning reports

Major Incident Audit Templates

Is a programme of training and frequency of exercising provided for within the plan?

Personal training records

Induction training records

EMART training attendance register

Input and completed returns for DHSSPS Emergency Planning Training Needs Analysis

Links with other standards

Human Resources

CRITERION 10

Key indicators capable of showing improvements in emergency preparedness and/or providing early warnings of risk are used at all levels of the organisation, including the board, and the efficiency and usefulness of the indicators is reviewed regularly.

INFORMATION**Source**

DFP: Corporate Governance Statement on Internal Control, DAO (DFP) 5/2001

Corporate Governance: Statement on Internal Control, HSS (PPM) 3/2002

DFP: Statement of Internal Control, DAO (DFP) 25/2003

Guidance

The Organisation should develop indicators that demonstrate the risks associated with resilience of the system in place for emergency preparedness. One indicator is degree of compliance with the standard. Ideally the indicators should be designed to demonstrate improvement in the performance of the system over time.

The number of indicators devised should be sufficient to monitor the system. It is not necessarily the case that all the indicators will be used by the Board. The Board should select those which are useful for ensuring that the internal controls are working satisfactorily and that the system in place is meeting its objectives.

Examples of Verification

Indicators

Evidence of usage at all levels

Links with other standards

All standards (generic criterion)

Audit of Emergency Planning Controls Assurance Standards

Links with other standards

All standards (generic criterion)

CRITERION 11

The system in place for emergency planning and preparedness is monitored and reviewed by management and the Board in order to make improvements to the system.

HSS Boards have a responsibility to monitor emergency planning preparedness of Trusts and Agencies.

DHSSPS is responsible for monitoring emergency planning preparedness of HSS Boards, Trusts, and Agencies.

INFORMATION**Source****Key Guidance**

Emergency Planning Functions Directions 28 May 2004

Circular HSS(MD) 5/2003 – Emergency Planning - 10 February 2003

Letter from DHSSPS - Emergency Planning Audit of Major Incident Plans and Audit Template Attachments - 9 June 2003

Letter from DHSSPS regarding 2004 monitoring arrangements-14 April 2004

Supplementary Guidance

Circular PSU 1/2001 – Integrated Emergency Planning for Health and Personal Social Services in Northern Ireland - 17 January 2001

Draft Northern Ireland Civil Contingencies Framework – CEPU/OFMDFM February 2005

HSS(PPM) 3/2002 – Corporate Governance: Statement of Internal Control

HSS(PPM) 4/2005 – AS/NZ 4360:2004 – Risk Management

Standards Australia Risk Management AS/NZS 4360:2004

DAO(DFP) 5/2001 – Corporate Governance: Statement of Internal Control

DAO (DFP) 25/2003 – Corporate Governance Statement of Internal Control

Guidance

It is the responsibility of the Chief Executive and the Board to monitor and review all aspects of the system for emergency planning, including:

Accountability arrangements

Processes, including risk management arrangements

Capability

Outcomes

Internal audit findings

An emergency planning committee or group may exist to carry out detailed reviews. The Risk Management Committee may play a significant role in monitoring and reviewing all aspects of the system as a basis for establishing significant information that should be presented to, and dealt with by the Board. The Audit Committee should review internal audit findings

Examples of Verification

Internal audit reports(s)

Audit Committee minutes

Emergency Planning Committee/Group minutes

Risk Management Committee minutes

Emergency Planning annual reports

Notes of emergency planning monitoring meetings

Completed major incident audit templates

Links with other standards

All standards (generic criterion)

CRITERION 12

The Board seeks independent assurance that an appropriate and effective system of managing emergency planning is in place and that the necessary levels of controls and monitoring are being implemented.

INFORMATION**Source****Key Guidance**

Emergency Planning Functions Directions 28 May 2004

Circular HSS(MD) 5/2003 – Emergency Planning – 10 February 2003

Letter from DHSSPS - Emergency Planning Audit of Major Incident Plans and Audit Template Attachments - 9 June 2003

Letter from DHSSPS regarding 2004 monitoring arrangements- 14 April 2004

Supplementary Guidance

Circular PSU 1/2001 – Integrated Emergency Planning for Health and Personal Social Services in Northern Ireland – 17 January 2001

Draft Northern Ireland Civil Contingencies Framework – CEPU/OFMDFM February 2005

HSS(PPM) 3/2002 – Corporate Governance: Statement of Internal Control

HSS(PPM) 4/2005 – AS/NZ 4360:2004 – Risk Management

Standards Australia Risk Management AS/NZS 4360:2004

HSS(PPM) 10/2002 – Clinical and Social Care Governance: Guidelines for Implementation

DAO(DFP) 5/2001 – Corporate Governance: Statement of Internal Control

DAO (DFP) 25/2003 – Statement of Internal Control

Guidance

Management should ensure that all emergency planning requirements of the Department are met.

Examples of Verification

Schedule of planned reviews

Copy of emergency planning reports

Notes of monitoring meetings

Action plans

Notes of follow-up action

Details of staff involved in the review

Links with other standards

All standards (generic criterion)