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To: Health Overview and Scrutiny Committee

Subject: NHS Emergency Resilience and Olympics Planning: Background Note.

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## 1. Introduction

- (a) An 'emergency' is defined by the Civil Contingencies Act 2004 as:
- An event or a situation which threatens serious damage to human welfare in a place in the UK, the environment of a place in the UK, or war or terrorism which threatens serious damage to the security of the UK<sup>1</sup>.
- (b) Within the NHS the term 'major incident' is in general use, defined as:
- Any occurrence that present serious threat to the health of the community, disruption to the service or causes (or is likely to cause) such numbers or types of casualties as to require special arrangements to be implemented by hospitals, ambulance trusts or primary care organisations<sup>2</sup>.
- (c) 'Beyond a Major Incident' refers to incidents threatening severe disruption to health and social care that exceed the collective local capacity of the NHS.
- (d) Three levels of major incident are categorised<sup>3</sup>:
- Level 1/Major – More patients need to be dealt with, faster and with fewer resources than usual. E.g. multi-vehicle crashes.
  - Level 2/Mass – Affects hundreds of people or persistent disruption over many days. E.g. closure of a major facility through fire or contamination.
  - Level 3/Catastrophic – Severe disruption to health and social care along with other functions such as water and power exceeding local collective NHS capabilities.

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<sup>1</sup> Department of Health, *The NHS Emergency Planning Guidance* 2005, 12 October 2005, p.11, [http://www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/@dh/@en/documents/digitalasset/dh\\_4121236.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4121236.pdf)

<sup>2</sup> Ibid., pp.12-13.

<sup>3</sup> Ibid. p.14; NHS South East Coast, *Major Incident Plan*, June 2009, p.10, <http://www.southeastcoast.nhs.uk/Downloads/Emergency%20planning/Major%20Incident%20Plan.pdf>

- In addition, pre-planned major events such as sporting fixtures may require planning and a response.

## 2. Emergency Preparedness in the NHS

(a) The service-wide objective for emergency preparedness in the NHS is:

- To ensure that the NHS is capable of responding to major incidents of any scale in a way that delivers optimum care and assistance to the victims, that minimises the consequential disruption to healthcare services and that brings about a speedy return to normal levels of functioning; it will do this by enhancing its capability to work as part of a multi-agency response across organisational boundaries<sup>4</sup>.

(b) Local Resilience Forums (LRFs), based on police force areas, are the main mechanism for multi-agency co-operation at the local level, between category 1 responders. The LRF is a statutory process rather than a statutory body<sup>5</sup>. The difference between a Category 1 and Category 2 responder is as follows<sup>6</sup>:

- Category 1 responder. A person or body listed in Part 1 of Schedule 1 to the Civil Contingencies Act. These bodies are likely to be at the core of the response to most emergencies. As such, they are subject to the full range of civil protection duties in the Act. Includes: the NHS, local authorities, police forces, and the fire and rescue authorities, amongst others.
- Category 2 responder. A person or body listed in Part 3 of Schedule 1 to the Civil Contingencies Act. These are co-operating responders who are less likely to be involved in the heart of multi-agency planning work, but will be heavily involved in preparing for incidents affecting their sectors. The Act requires them to co-operate and share information with other Category 1 and 2 responders. Includes: utilities, railway operators and ports, amongst others.

(c) The NHS is a Category 1 responder. Among NHS Trusts, the ambulance services “have a distinct place within the multi-agency civil protection effort. As one of the emergency services, they are at the vanguard of emergency response.”<sup>7</sup> The Cabinet Office guidelines

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<sup>4</sup> Department of Health, *The NHS Emergency Planning Guidance* 2005, 12 October 2005, p.18, [http://www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/@dh/@en/documents/digitalassets/dh\\_4121236.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalassets/dh_4121236.pdf)

<sup>5</sup> Cabinet Office, *Emergency Preparedness. Guidance on Part 1 of the Civil Contingencies Act 2004, its associated Regulations and non-statutory arrangements*, p.10, <http://www.cabinetoffice.gov.uk/sites/default/files/resources/emergprepfinal.pdf>

<sup>6</sup> Ibid., pp.19-23, 216.

<sup>7</sup> Ibid., p.20.

state that the local NHS should look to having a single representative in the LRF process in addition to the ambulance service<sup>8</sup>.

### **3. 2012 Olympic and Paralympic Games**

- (a) A number of events are being hosted in the region – Olympic Road Cycling Race and Olympic Cycling Time Trial Race in Surrey and Paralympic road cycling at and around Brands Hatch<sup>9</sup>. As well as a residential training camp for visiting Olympic teams, there will be an athletes' village at the Royal Holloway College in Egham<sup>10</sup>. There will also be a number of related events occurring across the region.
- (b) The 2012 Olympic Torch will stop off at Dover and Maidstone<sup>11</sup>.

### **4. NHS Operating Framework**

- (a) *The Operating Framework for the NHS in England 2012/13* contained the following paragraph about "Emergency preparedness."<sup>12</sup>
- "Emergency preparedness, resilience and response across the NHS continues to be a core function of the NHS, required in line with the Civil Contingencies Act 2004. Accountability arrangements should be clear at all times throughout the transition and organisations must continue to test and review their arrangements. All NHS organisations are required to maintain a good standard of preparedness to respond safely and effectively to a full spectrum of threats, hazards and disruptive events, such as pandemic flu, mass casualty, potential terrorist incidents, severe weather, chemical, biological, radiological and nuclear incidents, fuel and supplies disruption, public health incidents and the 2012 Olympic and Paralympic Games. PCT commissioners must also ensure that they maintain the current capability and capacity of existing Hazardous Area Response Teams (HARTs) in ambulance trusts."

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<sup>8</sup> Ibid., p.20.

<sup>9</sup> Go Surrey, <http://www.gosurrey.info/about-us/news/>

<sup>10</sup> NHS South East Coast, *NHS 2012 Olympic and Paralympic Planning and Preparation – update and SEC Planning Pack*, 28 September 2011, <http://www.southeastcoast.nhs.uk/Downloads/Board%20Papers/28%20September%202011/75-11%20-%20NHS%202012%20Olympic%20and%20Paralympic%20Planning.pdf>

<sup>11</sup> Kent County Council, [http://www.kent.gov.uk/news\\_and\\_events/news\\_archive/2011/may\\_2011/olympic\\_torch\\_comes\\_to\\_kent.aspx](http://www.kent.gov.uk/news_and_events/news_archive/2011/may_2011/olympic_torch_comes_to_kent.aspx)

<sup>12</sup> Department of Health, *The Operating Framework for the NHS in England 2012/13*, 24 November 2011, p.21, [http://www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/documents/digitalasset/dh\\_131428.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_131428.pdf)