

Aberdeen City Health and Social Care Partnership (ACHSCP) EMERGENCY PLAN

November 2024

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Revisions/Amendment

Date	Revision/Amendment	Author

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THE CIVIL CONTINGENCIES ACT 2004

INTRODUCTION

The Integration Joint Board (IJB), represented by Aberdeen City Health & Social Care Partnership (ACHSCP), is a Category 1 Responder as defined under the Civil Contingencies Act 2004 (the Act).

The Act outlines the key organisations responsible for ensuring the effective management of emergencies in Scotland. These are:

Category 1 Responders:

- Local Authorities
- Chief Constable of the Police Service of Scotland
- Scottish Fire and Rescue Service
- Scottish Ambulance Service Board
- Integration Joint Boards
- Health Boards
- Scottish Environment Protection Agency
- Maritime and Coastguard Agency.

Category 2 Responders:

- Electricity Operators
- Gas Suppliers
- Scottish Water
- Communications Providers
- Railway Operators
- Airport Operators
- Harbour Authorities
- NHS National Services Scotland
- Health and Safety Executive.
- The Met Office
- The Coal Board

In addition to the above, other agencies can have an important role in the context of resilience. These include but are not confined to:

- The military
- The Crown Office and Procurator Fiscal Service (COPFS)
- Transport Scotland
- Commercial organisations
- The Scottish Government
- • The voluntary sector

Duties

The Act places a number of legal duties upon Category 1 responders. These are, in brief:

1. Duty to assess risk
2. Duty to maintain emergency plans
3. Duty to maintain business continuity plans
4. Duty to promote business continuity
5. Duty to communicate with the public
6. Duty to share information
7. Duty to co-operate.

For Category 2 responders the basic legislative principle is that they must co-operate with Category 1 responders in connection with the performance of their duties, including the proper sharing of information.

AIMS, OBJECTIVES, SCOPE

This document describes Aberdeen City Health and Social Care Partnership's team's planned response to any serious interruption to service delivery to assist staff to respond effectively and in an integrated manner with other Category 1 and 2 Responder agencies. The prime objectives are to save lives and reduce the health and social care impact whilst minimising disruption to critical services, business continuity and patient care.

Communicating with staff

In the event of a business continuity or major incident, it is important to keep all ACHSCP staff informed of what the service is doing, the progress of the incident and what they, as members of staff, might be required to do. ACHSCP Communications Officer with the support of NHS Grampian's and Aberdeen City Council's Corporate Communications teams will assist with the preparation and cascade of messages to staff with support from the Operational Team

Communicating with the Public

During a business continuity or major incident, there may be a desire from the public/relatives for information on the incident. In the event of an incident and activation of this plan, ACHSCP Communications Officer with the support of NHS Grampian's and Aberdeen City Council's Corporate Communications teams will assist with the activation of arrangements to help manage information demand from the public, if this is deemed necessary.

Control Room

The Control Room will depending on the circumstances, be virtual, or relocated temporarily to a physical office(s) that will be used in the event of a business continuity incident and the place where the Incident Management Team (IMT) will first gather to establish the strategy for dealing with the incident.

Details of contacts are on Teams, [BCR Contacts](#) and information on physical control rooms are contained in [Appendix B](#).

The Incident Control Room support staff provides support to the IMT. They will provide a single point of contact and coordination for the ACHSCP response, and the collation, management and dissemination of information in support of the response to the emergency: this includes information required by The Grampian Local Resilience Partnership (GLRP), NHSG Executive Director On Call (EDOC), Aberdeen City Council's (ACC) Duty Emergency Response Co-Ordinator (DERC), other agencies, media, Convention of Scottish Local Authorities (CoSLA) and the Scottish Government Health Department

Stand Down

The decision to stand down this plan will be taken by the ACHSCP Chief Officer/SMOC following an assessment of the status of the response, prevailing situation and the appropriateness of a transition from the ACHSCP emergency response and recovery to post incident 'business as usual'. Stand down includes the formal stand down of the Control Room.

AIMS, OBJECTIVES, SCOPE (contd)

Recovery

The maximum tolerable period of disruption (MTPOD) and recovery time objectives (RTO) will be defined within each 'critical' service's Business Impact Analysis (BIA) which are located in the Teams site - [BCPs](#). For the purposes of this plan, the ACHSCP response and recovery effort will aim to have 'critical' services restored to an acceptable level within the recovery time objectives - [ACHSCP BIA High Risk 2024.xlsx](#). It must be noted that this may be flexible depending on the nature of the disruption – e.g. loss of power or a flood will vary from a major disease outbreak.

Recording and retention of information

Emergencies may be subject to a range of investigations and lead to inquiries of many types. Following a business continuity or major incident, the ACHSCP may be required to provide evidence to a Fatal Accident Public Enquiry or similar. In these cases, evidence will be released to the Procurator Fiscal, Health and Safety Executive or claimant's representatives, and individuals may be called as witnesses.

All Category 1 Responders agencies **must** keep contemporaneous records and logs of their response to a business continuity or major incident, detailing any key actions and decisions taken, to support investigations and inquiries at a later date.

Any documents relating to an incident and response **must** be preserved. Under no circumstances should any document that relates to the incident be destroyed, amended, held back or mislaid. For these purposes "documents" means paper (including flip charts), photographs, audio and video (if used), and information held on word processor or other computer, text, and on MS Teams chat. It also includes internal electronic mail.

Exercising and Review

The plan will be exercised annually, and may include relevant partners. This plan will be reviewed on an annual basis.

Debriefing

Prior to closure of a major situation and standing down of the incident team(s), a debriefing of all participants should be conducted. A debriefing will ensure that:

- lessons learned are clearly identified and incorporated into a knowledge database for future plan development and incident management
- deficiencies in the current processes are clearly identified in ways that projects can be established to rectify them or mitigate them
- A report should be produced covering the above mentioned aspects. This should be contained in a central knowledge register with lessons learned incorporated into new plans. A summary of the incident and lessons learned will form part of the Annual Report on the IJB performance as a Category 1 Responder. Debrief reports will be stored in Microsoft Teams [Debriefs](#)

POWERS DELEGATED TO SMOC

An emergency is defined under the Civil Contingencies Act 2004 as:

An event or situation which threatens serious damage to human welfare or the environment in a place in the United Kingdom, or war, or terrorism, which threatens serious damage to the security of the United Kingdom and which requires special arrangements to be implemented by one or more Category 1 Responder

An event or situation threatens damage to human welfare only if it involves, causes or may cause:

- Loss of human life
- Human illness or injury
- Homelessness
- Damage to property
- Disruption of a supply of money, food, water, energy or fuel
- Disruption of a system of communication
- Disruption of facilities for transport, or
- Disruption of services relating to health.

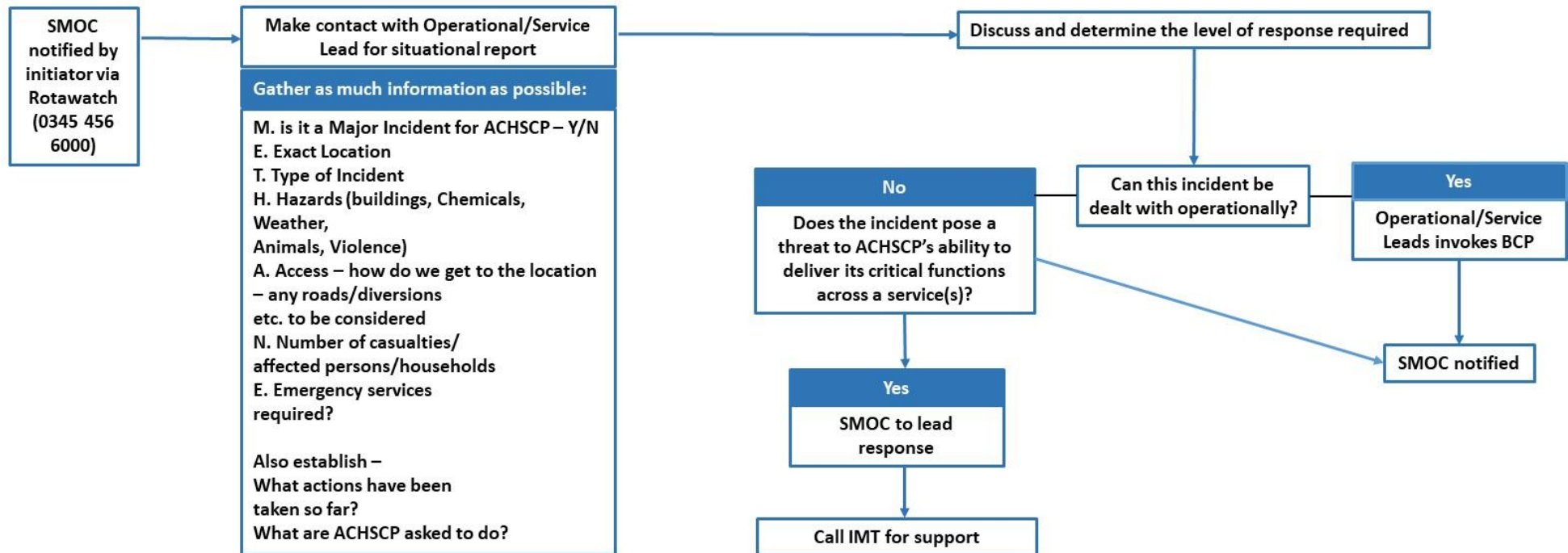
When acting as Senior Manager on Call (SMOC) you are authorised*:

- To take, or arrange for the taking of, any action on behalf of IJB/ACHSCP which s/he considers necessary in the event of:
 - An emergency (as “emergency” is defined in the Civil Contingencies Act 2004); or
 - Any incident that requires the implementation of special arrangements in order to:
 - Maintain statutory services at an appropriate level;
 - Support the emergency services and other organisations involved in the immediate response;
 - Provide support services for the community and others affected by the incident;
 - Enable the community to recover and return to normality as quickly as possible;
 - Provide mutual aid to other local authorities, with any such action being reported to the IJB? or relevant committee or subcommittee as an item on the agenda; and
 - To implement, or arrange for the implementation of, the provisions of the Civil Contingencies Act 2004 and the Civil Contingencies Act 2004 (Contingency Planning) (Scotland) Regulations 2005.

*subject to work on delegations/sub-delegations.

SMOC INITIAL ACTIONS FLOWCHART

**INCIDENT RESPONSE AIM:
PROTECT HUMAN LIFE, PROPERTY & ENVIRONMENT**



SMOC ROLE AND RESPONSIBILITIES

The SMOC will provide Strategic response to an emergency by:

- Activating the ACHSCP response;
- Considering the emergency in its wider context;
- Act on behalf of the Chief Officer and the IJB to execute necessary decisions;
- Deciding whether to activate an Incident Management Team and chair IMT;
- Co-ordinate the response to an emergency on behalf of the ACHSCP, liaising with Aberdeen City Council's Incident Management Team (IMT) or NHSG equivalent, if established for the incident;
- Determining whether to activate the Grampian Local Resilience Partnership (GLRP) should the response to an emergency be outwith the capability of ACHSCP;
- Representing ACHSCP at meetings of the GLRP, if established for the incident;
- Determine long term and wider impacts and risk with Strategic implications;
- Define and communicate the overarching strategy and objectives for the emergency response;
- Establish the parameters for Operational Leads to operate in the management of an emergency;
- Monitor risks, impacts and progress towards defined objectives;
- Prioritise the requirements and allocate personnel and resources to manage the incident accordingly;
- Provision of advice and assistance as necessary to meet the particular needs of vulnerable people affected by an emergency (checking of vulnerable people in D365).
- Formulate and implement media handling and public communication plans, potentially delegating this to Communications Business Partner or to the Public Comms Group (PCG) if appropriate;
- Assess the need to adjust normal business priorities in the light of competing resource demand created by the incident;
- Direct planning and operations beyond the immediate response in order to facilitate the recovery process before the incident stands down;
- Ensure the Chief Officer and the Senior Leadership Team (SLT) are informed, and regularly updated as appropriate;
- Operate with the powers of the Chief Officer under the Powers Delegated to Officers, including the authorising of spend (subject to approval of recommendations in the report to Risk, Audit and Performance Cttee in Dec 2024 and subsequent delegations/sub-delegations).

Governance

- Provision of Civil Contingencies advice to Incident Management Teams depending on incident (eg ACC or NHSG);
 - Provision of advice on all aspects of any emergency particularly with a view to ensure ACHSCP response can withstand legal scrutiny in any subsequent inquiry or liability claims, eg maintaining log books, using loggist, notes of meetings;
 - Monitor Health and Safety procedures at all levels of the emergency response.
-

SMOC AIDE MEMOIRE

STAGE 1 : GATHER INFORMATION		DONE
M	Is it a Major Incident for ACHSCP? – Y/N	
E	Exact Location	
T	Type of Incident	
H	Hazards (buildings, Chemicals, Weather, Animals, Violence)	
A	Access – how do we get to the location – any roads/diversions etc to be Considered?	
N	Number of casualties/affected persons/households	
E	Emergency services required?	
	Also establish: <ul style="list-style-type: none"> - What actions have been taken so far? - What are ACHSCP being asked to do? 	

STAGE 2 : IDENTIFY ISSUES AND RISKS		DONE
1	What is the level of response required - Strategic/Operational?	
2	If NHSG call major incident, may stand up ECRs across the system.	
3	What actions have ACHSCP been allocated?	
4	Do you need more information in order to implement these actions?	
5	What are the likely risks for ACHSCP: <ul style="list-style-type: none"> - Financial - Reputational - Legal 	
6	Does the incident have the potential to escalate? If so, what are the potential ramifications?	
7	What are your priorities?	
8	Do you need to activate the GLRP?	
9	Provide (M)ETHANE update to Police Emergency Procedures Adviser (EPA) if the GLRP is activated	

STAGE 3 : LOCATE PLANS AND PROCEDURES		DONE
1	Is there an ACHSCP plan for this situation?	
2	Is there a GLRP plan for this situation?	
3	Are there any legal requirements?	
4	Are there any specific requirements that need specific support: <ul style="list-style-type: none"> - Vulnerable People – checking of D365 	
5	What are the impacts of your decisions?	
6	What are all of your options - including do nothing at this time?	

SMOC AIDE MEMOIRE (Continued)

STAGE 4 : CONSIDER OPTIONS AND CONTINGENCIES		DONE
1	How much time do you have to implement actions?	
2	What are the limits of the information available to you?	
3	What resources are available to you?	
4	How will I access resources if the situation escalates?	

STAGE 5 : CONDUCT CONSTANT RISK ASSESSMENT		DONE
1	Record your decisions and the rationale for making it using your log book.	
2	Is your response strategy working?	
3	What effects is it having?	
4	Do you need to notify anyone of your actions?	
5	Is your response strategy still working?	

STAGE 6 : POST INCIDENT		DONE
1	Host 'hot' de-brief within 24 hours of the incident concluding, and attend similar de-briefs at NHSG/ACC/GLRP levels	
2	Review response	
3	What worked well?	
4	What could have been improved?	
5	Identify lessons	
6	Make recommendations for improvement and allocate actions	
7	Share learnings	

OPERATIONAL LEAD ROLE AND RESPONSIBILITIES

Operational Lead Role and Responsibilities:

- Dependent on the incident will consist of members from the OLT and/or their direct reports. Suggested attendees (but not exhaustive): representatives from Social Work, Nursing, Primary Care, AHP's and Business Support.
- Liaising with SMOC (Strategic Lead), and with Operational staff;
- Working with IMT;
- Managing the initial rotation of operational staff if incident could be protracted;
- Coordinating services;
- Mitigate risks to the Health & Safety of the public and personnel;
- Providing point of contact for emergency services and other local agencies;
- Ensure all operational staff are aware of stand down;
- Return to normal.

Operational Lead supported by Incident Management Team will respond to an emergency by:

- Determining the extent of the emergency;
- Deem if there is an existing emergency response plan appropriate for the handling of the incident and advice implementing;
- Ensure a continuous flow of information between the SMOC, Operational teams and multi-agency partners;
- Ensure actions taken at the operational level are co-ordinated, coherent and integrated in order to maximise effectiveness and efficiency;
- Plan and co-ordinate how and when tasks will be undertaken in partnership with the SMOC and the GLRP ;
- Determine priorities for allocating available resources in partnership with the SMOC and the GLRP ;
- Obtain additional resources if required with approval from the SMOC and in partnership with the GLRP , community groups and suppliers;
- Assess significant risks and use this to inform tasking of operational responders;
- Mitigate risks to the Health and Safety of the public and personnel;
- Activate incident specific plan, scaling up or down to fit with the scale of the incident;
- Advise on SMOC strategy and implement;
- Initiate response, agreeing local actions and monitor response in partnership with the Business, Communications and Contingencies Lead;
- Prepare to take over the emergency response co-ordination role after the on-scene responders have concluded their part in the incident response;
- Provide regular briefings to SMOC;
- Co-ordinate administrative support to SMOC and Incident Management Teams.
- Record all costs associated to the incident response.

INCIDENT MANAGEMENT TEAM ROLES AND RESPONSIBILITIES

IMT Role and Responsibilities

- Ensure a continuous flow of information between the Operational teams and multi-agency partners;
- Ensure actions taken at the operational level are co-ordinated, coherent and integrated in order to maximise effectiveness and efficiency;
- Plan and co-ordinate how and when tasks will be undertaken in partnership with the Operational Lead and the GLRP;
- Determine priorities for allocating available resources in partnership with the SMOC and Local Resilience Partnership partners;
- Assess significant risks and use this to inform tasking of operational responders;
- Mitigate risks to the Health and Safety of the public and personnel;
- Advise SMOC and Operational Lead on strategy;
- Initiate response, agreeing local actions and monitor response in partnership with the SMOC/Operational Lead;
- Maintain log of events of the incident response (this will be the duty of an appointed Loggist).

Additional Health and Social Care Partnership Duties

- Participate in the delivery of the Care for People response in the event of an emergency;
- Provision of counselling and welfare advice at Rest Centres and other centres established in connection with an emergency;
- Provision of support and counselling in the short, medium and long term to victims, their relatives, staff or members of the public.

IMT ACTION LIST

INCIDENT RESPONSE AIM:

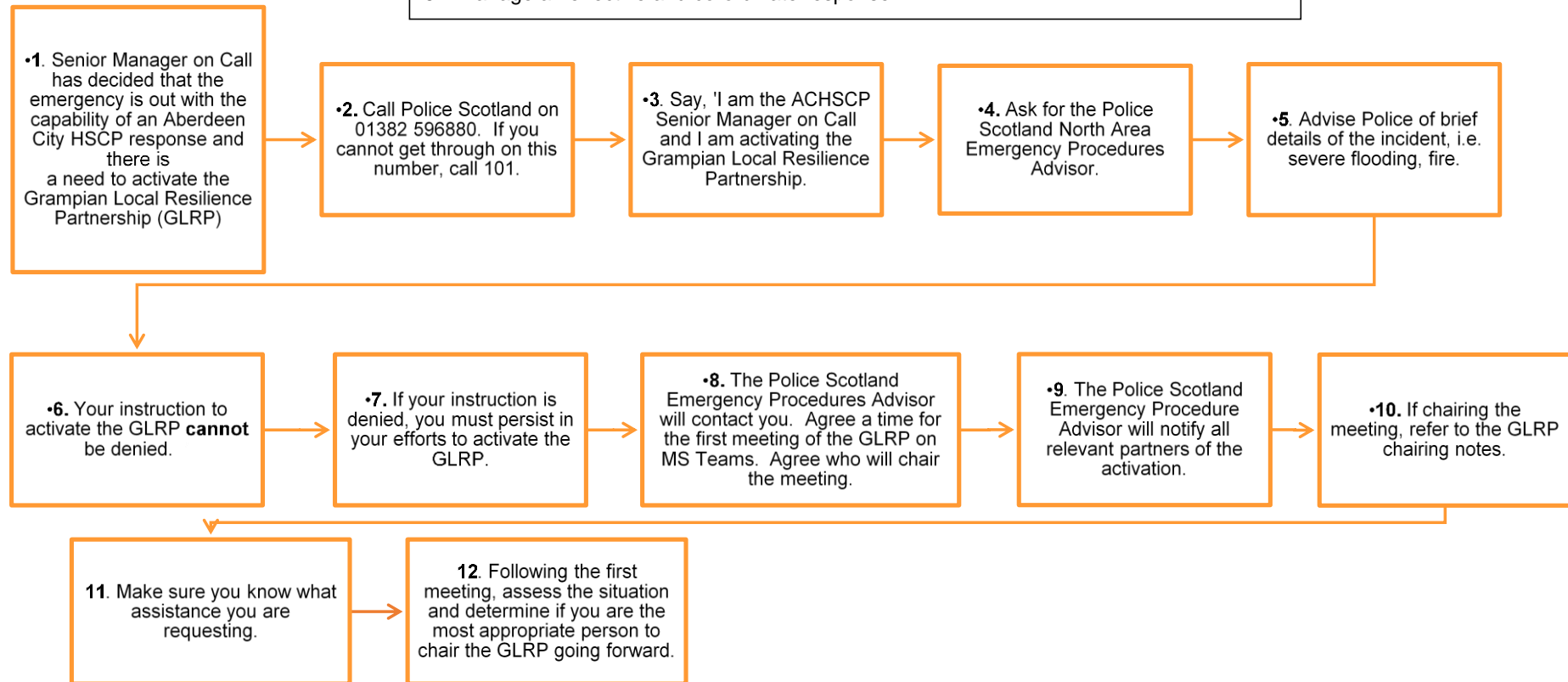
PROTECT HUMAN LIFE, PROPERTY AND ENVIRONMENT

CHECKLIST		DONE
1	Set up an IMT. An IMT can be as small or large as the incident requires. Refer to Appendix A for agenda. The IMT/SLT should be Chaired by the SMOC and follow the Agenda. The Agenda includes a generic strategy which can be agreed by the IMT/SLT or amended to suit the nature of the emergency or incident.	
2	Determine IMT membership. Include communications for every incident. Suggested attendees, but not exhaustive are: SMOC, Business, Resilience and Communications Lead, Social Work Service Manager for Care Homes/Care Management, representatives from Primary Care, Nursing, AHPs, Communications Adviser and Loggist.	
3	Notify Chief Officer.	
4	<p>Chair IMT meeting, nominate loggist to takes notes of key actions. Record meeting on Teams.</p> <p>Consider:</p> <ul style="list-style-type: none"> - Whether to inform service leads. - Whether to activate the GLRP - refer to GLRP Activation Pack. - Whether to request Mutual Aid - refer to Mutual Aid Procedure. - If not already considered, is there a need for additional SMOC support to manage multiple requests (for instance, if new information is notified through IMT). 	

How to Activate the Grampian Local Resilience Partnership

Incident Response Aim:

1. Protect human life, property and environment
2. Prevent escalation of the incident
3. Maintain normal services at an appropriate level
4. Safeguard the civilians & relieve suffering
5. Manage an effective and co-ordinate response



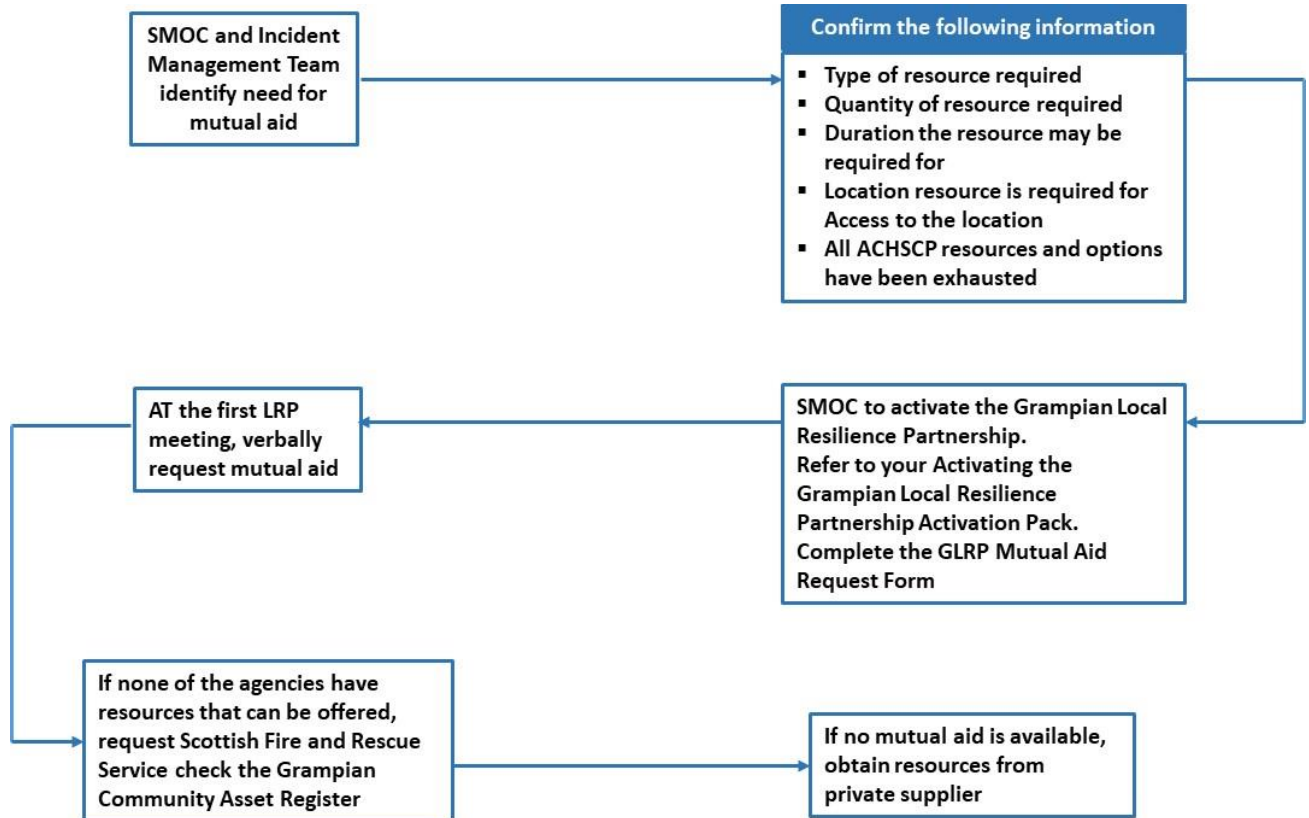
How to Activate the Grampian Local Resilience Partnership

Check List*

Incident Response Aim:	
1.	Protect human life, property and environment
2.	Prevent escalation of the incident
3.	Maintain normal services at an appropriate level
4.	Safeguard the civilians & relieve suffering
5.	Manage an effective and co-ordinate response

Check List		Done
1	Senior Manager on Call has decided that the emergency is out with the capability of an Aberdeen City HSCP response and there is a need to activate the Grampian Local Resilience Partnership (GLRP)	
2	Call Police Scotland on 01382 596880. If you cannot get through on this number, call 101.	
3	Say: 'I am the Aberdeen City Health and Social Care Partnership Senior Manager on Call and I am activating the Grampian Local Resilience Partnership'	
4	Ask for the on-call Police Scotland Emergency Procedures Advisor.	
5	Explain the situation.	
6	Your instruction to activate the GLRP cannot be denied	
7	If your instruction is denied, you must persist in your efforts to activate the GLRP	
8	The Police Scotland Emergency Procedures Advisor will call you back to discuss the situation. Agree a time for the first GLRP meeting which will take place via MS Teams unless in person is required. Agree who will chair the meeting.	
9	The Police Scotland Emergency Procedures Advisor will notify all relevant partners of the activation.	
10	If chairing the meeting, refer to the GLRP chairing notes.	
11	Depending on the nature of the emergency, the SMOC may have to chair the first GLRP meeting, or it may be the Police.	
12	Make sure you know what assistance you are requesting	
13	Following the first meeting, assess the situation and determine if you are the most appropriate person to chair the GLRP going forward: <ul style="list-style-type: none"> • Do you have capacity to chair the GLRP? • Would the type of incident be better suited led by another responder? 	

HOW TO REQUEST MUTUAL AID FLOWCHART



HOW TO REQUEST MUTUAL AID PROCEDURE

CHECK LIST		DONE
1	Senior Manager on Call and Incident Management Team identify need for mutual aid and ensure that all internal service options have been exhausted first	
2	Complete the GLRP Mutual Aid Template . Senior Manager on Call to activate the Grampian Local Resilience Partnership.	
3	At the first LRP meeting, verbally request mutual aid and speak to the content of the request.	
4	If none of the agencies have resources that can be offered, request Scottish Fire and Rescue Service check the Grampian Community Asset Register	
5	If no mutual aid is available, obtain resources from private supplier. The Incident Management Team should be exploring sourcing resources from established suppliers. The following information should be made available to the SMOC: <ul style="list-style-type: none"> - Contractor - Cost - Lead Time 	

APPENDIX A

AGENDA

INCIDENT DETAILS:

ACHSCP Incident Management Team/Senior Leadership Team

Meeting No:	Time/Date:
Chair:	Loggist:
Location: MS Teams/Venue	

1	Welcome, Introduction and Apologies	Chair
2	Urgent Issues	ALL
3	Review of Actions	Chair
4	Review of Strategy <ul style="list-style-type: none"> - Protect human life, property & environment. - Prevent escalation of the incident - Minimise harmful effects of emergencies. - Safeguard the civilians & relieve suffering. - Maintain normal services at an appropriate level. - Manage an effective co-ordinated joint response. - Provide mutual support and co-operations between responders. - Support local community and its part in the recovery from an emergency. <p>Prompt: the above are just examples of possible strategies for the incident. IMT would agree on exact strategy. Once strategy is set then IMT should check that it is still relevant as incident progresses.</p>	Chair
5	Situation Update	Chair
6	Service/Team Updates	ALL
7	Vulnerable Service Users/PARD requirements	Social Work Representative
8	Care For People Requirements <p>Prompt: are there any care for people requirements resulting from the incident? If so can these requirements be managed internally in ACHSCP or is there a need to escalate to GLRP?</p>	Care For People Team Representative
9	Public Communications	ACHSCP Communications Business Advisor
10	Summary of New Actions <p>Prompt-any escalations to GLRP?</p>	Chair/Loggist
11	AOCB	ALL
12	Date of Next Meeting	Chair


APPENDIX B

WOODEND CONTROL ROOM

Subject	Information	Remarks
Location	Management Meeting Room First Floor Management Offices Woodend Hospital Aberdeen AB15 6XS	<ul style="list-style-type: none"> Room might be used for meetings. If incident occurs, the group will be asked to leave immediately.
Door Lock	Key	<ul style="list-style-type: none"> Unlkey is kept in admin office During out of hours available from porters
Communications	<ul style="list-style-type: none"> Telephone 56540 Red emergency phone 325875 Ports enlivened, phones activated and tested for functionality. Both incoming and outgoing calls. 	<ul style="list-style-type: none"> Videoconference equipment
Access/Egress	<ul style="list-style-type: none"> 24hr access. 	<ul style="list-style-type: none"> Access via main door beside porters office. Porters can give access to meeting room.
Equipment	<ul style="list-style-type: none"> Computer in room and linked to printer Laptop available if required Projector available, located in the cupboard in corridor, key available from admin office 	<ul style="list-style-type: none"> MFD (NHSG16819) Room 4 on same floor (includes fax and scanner).
Distance	<ul style="list-style-type: none"> 5 mins travel from Summerfield House 15 mins travel from Foresterhill Campus. 20-25mins from the City Centre. 	<ul style="list-style-type: none"> In very close proximity to main roads, local transportation. Parking available.
Real Life Support	<ul style="list-style-type: none"> Kettle and microwave available. Sink with hot water. Toilets located close by on same floor 	
Fixtures and Fittings	<ul style="list-style-type: none"> 1 big table 1 desk 10 chairs 7 whiteboards 	

E-mail	Gram.woodendcontrolroom@nhs.scot
Incoming calls	56540

MARISCHAL COLLEGE

 This image cannot currently be displayed.

RCH CONTROL ROOM

Subject	Information	Remarks
Location	Fulton Meeting Room Ground Floor, Fulton Building Management Corridor Royal Cornhill Hospital Cornhill Road Aberdeen AB25 2ZH	<ul style="list-style-type: none"> Room might be used for meetings. If incident occurs, the group will be asked to leave immediately.
Door Lock	Key	<ul style="list-style-type: none"> Kept locked always. Every staff on the corridor has a key. During out of hours, key and alarm code can be collected from hospital main reception.
Communications	<ul style="list-style-type: none"> Telephone - 57314 Ports enlivened, phones activated and tested for functionality. Both incoming and outgoing calls. 	<ul style="list-style-type: none"> Videoconference equipment
Access/Egress	<ul style="list-style-type: none"> Opens during office hours but 24hr access is available on request. 	<ul style="list-style-type: none"> Access via Fulton Building main door beside RCH main entrance. During out of hours, keys, door code and alarm code can be collected from hospital main reception.
Equipment	<ul style="list-style-type: none"> Laptop available on request Projector available on request 	<ul style="list-style-type: none"> Contact Support Service on 57883 to request equipment.
Distance	<ul style="list-style-type: none"> 10 mins travel from Summerfield House 12 mins travel from Woodend Hospital 5 mins travel from Foresterhill Campus. 5 – 10 mins from the City Centre. 	<ul style="list-style-type: none"> In very close proximity to main roads and local transportation. Parking available.
Real Life Support	<ul style="list-style-type: none"> Kettle and microwave available. Sink with hot water. Hot water dispenser Toilets located close by on same floor 	<ul style="list-style-type: none"> All items in the staff kitchen
Fixtures and Fittings	<ul style="list-style-type: none"> 1 big meeting room table 16 chairs 1 whiteboard 1 flip board 	

E-mail	Gram.rchcontrolroom@nhs.scot
Incoming calls	57314