



PWYLLGOR CYNLLUNIO POBL A SICRWYDD PERFFORMIAD
PEOPLE PLANNING AND PERFORMANCE ASSURANCE COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	24 June 2021
TEITL YR ADRODDIAD: TITLE OF REPORT:	Major Incident Plan
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Ros Jervis, Director of Public Health
SWYDDOG ADRODD: REPORTING OFFICER:	Sam Hussell, Head of Emergency Preparedness, Resilience & Response

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA
SBAR REPORT

Sefyllfa / Situation

To present to the People, Planning and Performance Assurance Committee (PPPAC), a set of addendums to the Major Incident Plan which detail changes to the front of house model to accommodate Green (Non-COVID-19) and red (COVID-19) pathways to ensure the safety of both staff and patients and also to maintain effective patient pathways.

Cefndir / Background

Hywel Dda University Health Board (HDdUHB) has a Major Incident Plan (MIP) which is reviewed via the Emergency Planning Groups and ratified by the Board on an annual basis. During the COVID-19 pandemic, it was agreed for the annual review of the MIP to be postponed and a series of addendums be produced to detail any changes to the MIP that were necessary to comply with COVID-19 measures.

Each of the acute sites expected to treat casualties during a major incident (Bronglais General Hospital, Withybush General Hospital & Glangwili General Hospital) have developed an addendum detailing changes within the Emergency Departments, which are attached to this report.

Asesiad / Assessment

The addendums developed provide HDdUHB with an interim solution to maintaining COVID-19 measures whilst responding to a major incident. A re-refresh of Emergency Planning, Resilience and Response measures in coming months will allow a more in-depth review of the major incident plan, taking into account lessons identified throughout the pandemic and also changes in pre-hospital care and as a result of the progression of the major trauma network, centre and sites since the latest MIP review. In addition, the reviewing and updating of the Mass Casualty Arrangements for Wales is being undertaken, which is expected to contribute to emergency planning at a local level.

Argymhelliad / Recommendation

The People, Planning and Performance Assurance Committee is requested to receive assurance on the arrangements in place to support a major incident response.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.12 Ensure that service/business continuity plans are in place for major incidents and emergency situations that affect the provision of normal services, that staff have been trained to enable them to manage a major incident or emergency, and that lessons learned are incorporated into future planning.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	2.1 Managing Risk and Promoting Health and Safety
Amcanion Strategol y BIP: UHB Strategic Objectives:	4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners.
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report	10. Not Applicable

Gwybodaeth Ychwanegol:

Further Information:

Ar sail tystiolaeth: Evidence Base:	<ul style="list-style-type: none">Civil Contingencies Act 2004NHS Wales Emergency Planning Guidance 2015
Rhestr Termiau: Glossary of Terms:	Contained within the body of the report
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Cynllunio Pobl a Sicrwydd Perfformiad: Parties / Committees consulted prior to People Planning and Performance Assurance Committee:	Not applicable

Effaith: (rhaid cwblhau)

Impact: (must be completed)

Ariannol / Gwerth am Arian:	No financial impact or capital requirements identified.
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Financial / Service:	
Ansawdd / Gofal Claf: Quality / Patient Care:	Major Incident Plan revised with relevant multi-professional input across the sites.
Gweithlu: Workforce:	No workforce impacts identified
Risg: Risk:	The whole Emergency Planning agenda is based on risk and taking every practical step to mitigate against the risk of an event occurring. Identification of the highest risks, and development of plans and procedures to address and respond to them places HDdUHB in a better state of preparedness.
Cyfreithiol: Legal:	The Major Incident Plan forms part of our response to the requirements of the Civil Contingencies Act and our duty as a Category One responder under the Act.
Enw Da: Reputational:	Not applicable
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	No negative impacts identified

Hywel Dda University Health Board

Addendum to Major Incident Plan

Bronglais General Hospital Site Only

In response to the COVID-19 pandemic, Bronglais General Hospital (BGH) has had to make changes to a number of its service delivery models.

In addition, the "The front door model" within the Emergency Department (ED) has had to be amended to accommodate Green (Non-COVID-19) and red (COVID-19) pathways to ensure the safety of both staff and patients and also to maintain effective patient pathways.

Emergency Department (ED) and flow diagram

The flow diagram (page 2) illustrates these revised pathways.

Whilst a total re-write of the major incident plan is unwarranted, this addendum has been produced to acknowledge the changes that have been made in response to the pandemic.

Hospital Co-ordination Centre (HCC)

The Major Incident will be coordinated from the HCC (Meeting Room, First Floor, Management Offices) which is located at the rear of the hospital campus.

Hospital Co-ordination Team (HCT)

This will be established in the Hospital Co-ordination Centre at BGH

The core membership may include:

- Hospital Nurse Manager
- Hospital General Manager
- Hospital Clinical Lead
- Site/Bed Manager
- Clinical Leads/on call consultant as appropriate.
- Other Service Leads as required
- WAST Hospital Ambulance Liaison Control Officer (HALCO) [activated by WAST]

Relatives of Casualties & Uninjured Survivors

During Covid no relatives should arrive at BGH. Contact numbers will be available to relatives to call, and if they are the NOK of a critically ill patient there will be an assessment of their covid risk with the relevant ward/dept to agree if they can visit.

Uninjured survivors that attend the hospital site are to have their personal details recorded by the Police, who will have a team on site, they will then directed home with appropriate access to support.

Existing Emergency Department Patients

Patients who are already in ED who cannot go home, should either be admitted to an available bed on a COVID19/non COVID19 ward dependant on their clinical requirement.

Non Major Incident Patients presenting with minor injuries, will be assessed and informed of appropriate alternative treatment options or, where necessary, fast tracked and discharged.

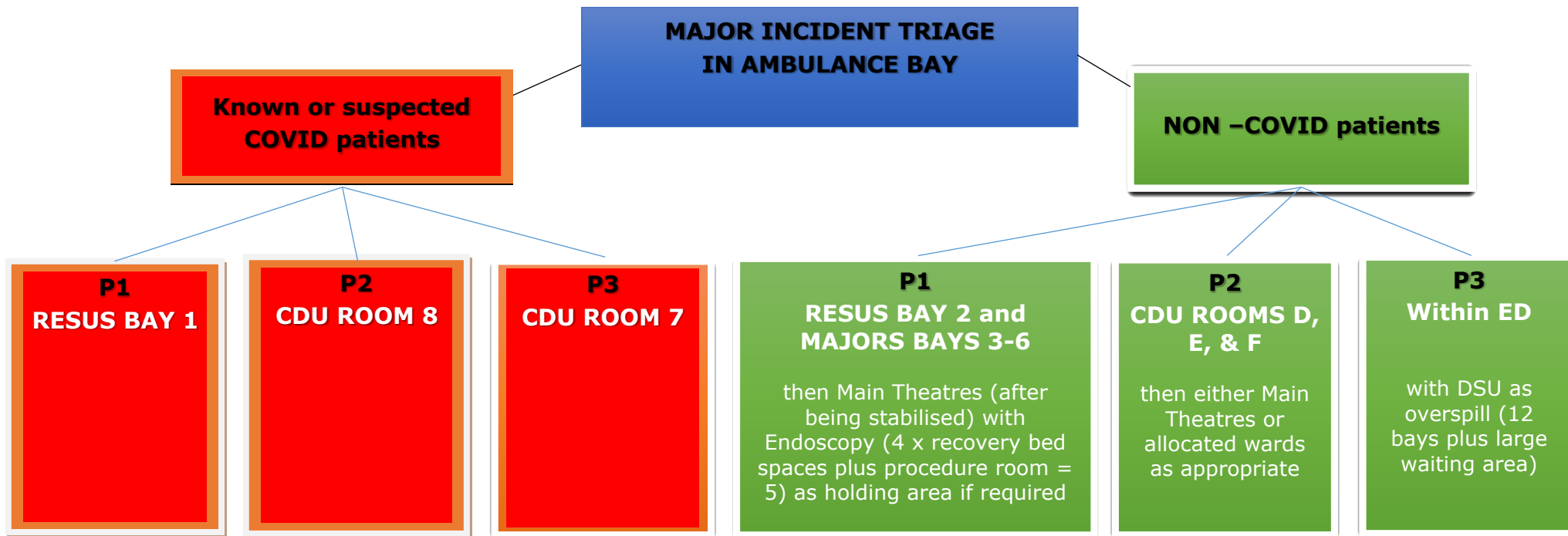
All other parts of HDUHB major incident plan remain unchanged



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Hywel Dda
University Health Board

EMERGENCY DEPARTMENT MAJOR INCIDENT FLOW CHART



Hywel Dda University Health Board

Addendum to Major Incident Plan

Glangwili General Hospital Site Only

In response to the COVID-19 pandemic, Glangwili General Hospital (GGH) has had to make changes to a number of its service delivery models.

In addition, the "The front door model" within the Emergency Department (ED) has had to be amended to accommodate Green (Non-COVID-19) and red (COVID-19) pathways to ensure the safety of both staff and patients and also to maintain effective patient pathways.

Emergency Department (ED) and flow diagram

The flow diagram (page 3) illustrates these revised pathways.

Whilst a total re-write of the major incident plan is unwarranted, this addendum has been produced to acknowledge the changes that have been made in response to the pandemic.

Hospital Co-ordination Centre (HCC)

The Major Incident will be coordinated from the HCC (Ty Nant, level 1) which is located at the rear of the hospital. This replaces the site coordination centre as it provides a larger room and ability to socially distance to 2m.

Hospital Co-ordination Team (HCT)

This will be established in the Hospital Co-ordination Centre at GGH;

In Hours	OOH
Hospital General Manager	Senior Manager on-call
Hospital Lead Nurse	Hospital General Manager
Hospital Clinical Lead	Operational Site/Bed Manager
Site/Bed Manager	Hospital Lead Nurse
Corporate Communications	Corporate Communications
Co-ordinating Consultant – on call	Co-ordinating Consultant – on call
Asst Medical Director	Asst Medical Director
Health Care Records	Health Care Records
Loggist (Admin staff)	Loggist (Admin staff)
HCT Runner (Porters or Admin staff)	HCT Runner (Porters or Admin staff)
Ambulance Liaison Officer	Ambulance Liaison Officer
Police Documentation Team (Casualty Bureau)	Police Documentation Team (Casualty Bureau)

Staff Reporting Procedure

Staff called to site to assist in the response are to report their arrival to the Hospital Co-ordination Centre for managerial and support staff. Nursing staff and HCSW's to report to the

Site Co-ordination Centre where you be allocated to a ward/department by the site manager/Senior Nurse Manager.

Relatives of Casualties & Uninjured Survivors.

During the pandemic, no relatives should arrive at GGH. The Cardio-Respiratory Department will act as a point of contact for all welfare services and other support agencies. Contact numbers will be available to relatives to call in and if they are the NOK of a critically ill patient there will be an assessment of their covid risk and the relevant ward/dept to agree if they can visit.

Clinic rooms are available and can be utilised for several staff to work in this area if there are multiple casualties.

Uninjured survivors that attend hospital site are to have personal details recorded by the Police who will have a team on site in the first instance and then directed to Cardio-Respiratory Department.

Seminar Room, Cardio-Respiratory contact number 01267 226336 Ext 3936

Existing Emergency Department Patients

Patients who are already in ED who cannot go home, should either be admitted to an available bed on a COVID19/non COVID19 ward dependant on their clinical requirement.

Out patients will be split between the 2 suites Red and Green, to manage these patients and those presenting with minor injuries.

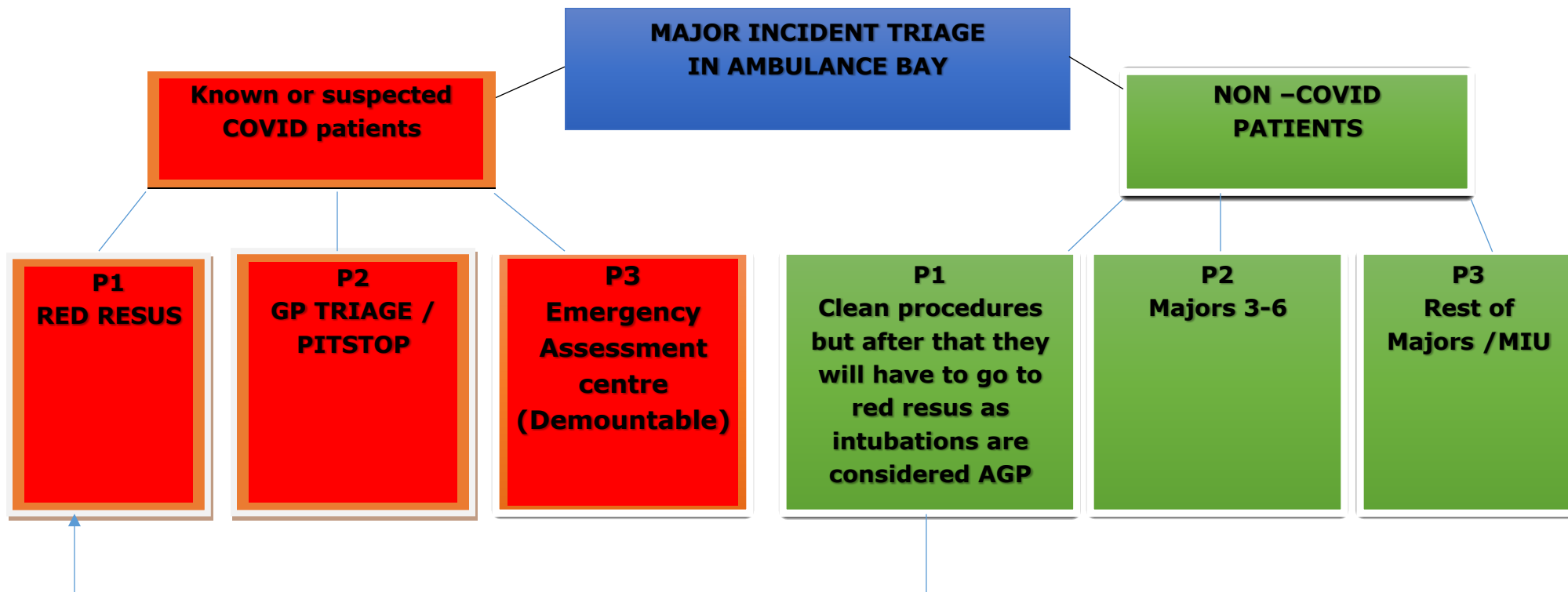
Corporate Communications

Corporate Communications Media Team will be responsible for the management of all HDUHB media strategy and communications. They will report to the HCC to be briefed before setting up the media cell at the Post Graduate Centre, GGH.

All other parts of HDUHB major incident plan remain unchanged



EMERGENCY DEPARTMENT MAJOR INCIDENT FLOW CHART



Hywel Dda University Health Board

Addendum to Major Incident Plan

Withybush General Hospital Site Only

In response to the COVID-19 pandemic, Withybush General Hospital (WGH) has had to make changes to a number of its service delivery models.

In addition, the "The front door model" within the Emergency Department (ED) has had to be amended to accommodate Green (Non-COVID-19) and red (COVID-19) pathways to ensure the safety of both staff and patients and also to maintain effective patient pathways.

Emergency Department (ED) and flow diagram

The flow diagram (page 3) illustrates these revised pathways.

Whilst a total re-write of the major incident plan is unwarranted, this addendum has been produced to acknowledge the changes that have been made in response to the pandemic.

Hospital Co-ordination Centre (HCC)

The Major Incident will be coordinated from the longstanding HCC (Emergency & Urgent Care Centre, Level 1).

Hospital Co-ordination Team (HCT)

This will be established in the Hospital Co-ordination Centre at WGH;

In Hours	OOH
Hospital Site Manager	Senior Manager on-call
Hospital Lead Nurse	Hospital General Manager
Hospital Clinical Lead	Site/Bed Manager
Site/Bed Manager	Hospital Lead Nurse
Corporate Communications	Corporate Communications
Co-ordinating Consultant – on call	Co-ordinating Consultant – on call
Asst Medical Director	Asst Medical Director
Health Care Records	Health Care Records
Loggist (Admin staff)	Loggist (Admin staff)
HCT Runner (Porters or Admin staff)	HCT Runner (Porters or Admin staff)
Ambulance Liaison Officer	Ambulance Liaison Officer
Police Documentation Team (Casualty Bureau)	Police Documentation Team (Casualty Bureau)

Staff Reporting Procedure

Staff called to site to assist in the response are to report their arrival to the Hospital Co-ordination Centre. Clinical staff will be allocated to a ward/department by the clinical site manager/Senior Nurse Manager/ Service Manager. Admin and support staff should attend the

HCC. Additional areas will be utilised adjacent to the HCC so as to enable social distancing requirements to be met.

Relatives of Casualties & Uninjured Survivors.

During the pandemic, no relatives should arrive at WGH. The ante natal department will act as a point of contact for all welfare services and other support agencies. Contact numbers will be available to relatives to call in and if they are the NOK of a critically ill patient there will be an assessment of their covid risk and the relevant ward/dept to agree if they can visit.

Clinic rooms are available and can be utilised for several staff to work in this area if there are multiple casualties.

Uninjured survivors that attend hospital site are to have personal details recorded by the Police who will have a team on site in the first instance and then directed to the ante-natal department.

Reception, Ante-Natal Department contact number 01437 773286

Existing Emergency Department Patients

Patients who are already in ED who cannot go home, should either be admitted to an available bed on a COVID19/non COVID19 ward dependant on their clinical requirement (this may mean exceeding established and staffed capacity, depending upon the nature of the incident and number of potential casualties).

Out patients & Cardio respiratory Dept will split to make Red and Green areas, for those presenting with minor injuries who need attention.

Existing Inpatients

These will need urgent medical review and those who can safely go home or to another care environment should be discharged.

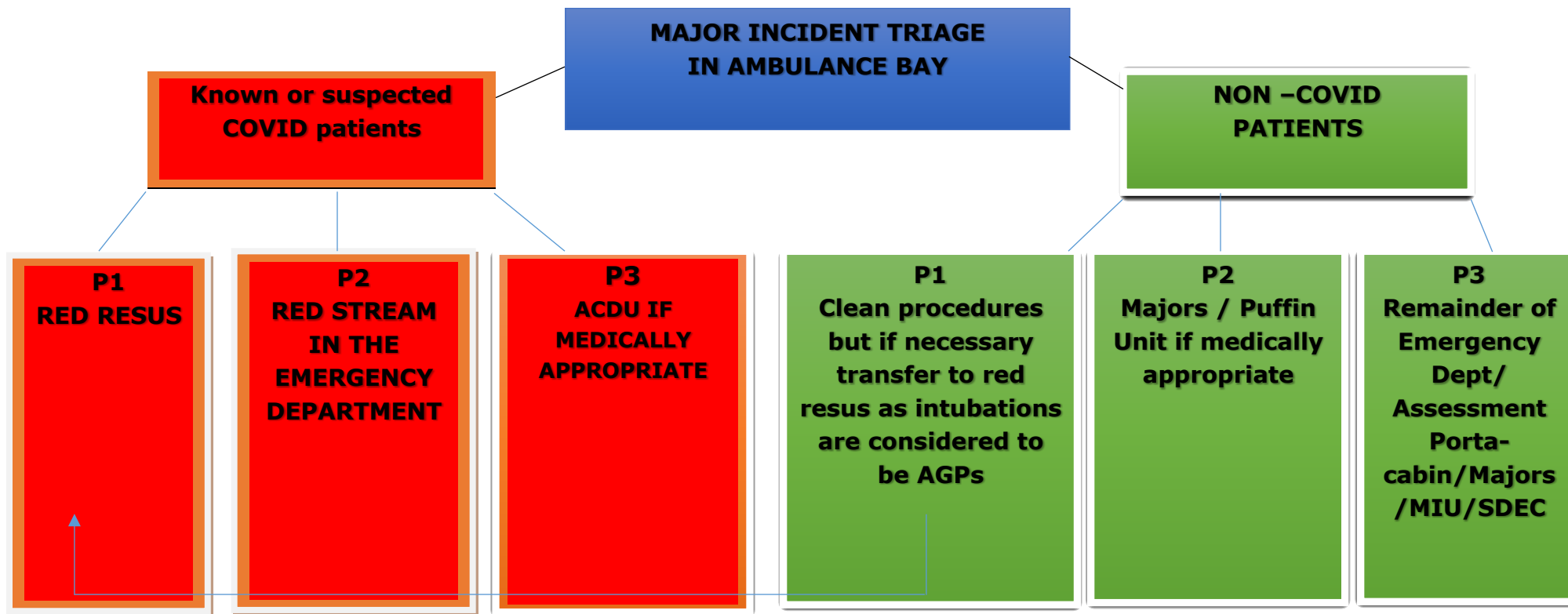
Corporate Communications

Corporate Communications Media Team will be responsible for the management of all HDUHB media strategy and communications. They will report to the HCC to be briefed before setting up the media cell at the Conference Centre, WGH.

All other parts of HDUHB major incident plan remain unchanged



EMERGENCY DEPARTMENT MAJOR INCIDENT FLOW CHART



- The DAV crew should be contacted and asked to attend the Emergency Department to assist in whatever way is considered appropriate by the Consultant & Nurse in Charge at the time