The Public Health Wales
Emergency Response Plan

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Purpose and Summary of Document:
This document provides the specific arrangements for the Public Health Wales strategic and tactical response to incidents, outbreaks and emergencies that have significant impact on the delivery of services.

Emergency contact numbers are contained in the Public Health Wales Emergency Response Telephone Directory. This document is located in the on call section of groupware and circulated to key individuals.

***Sensitive Information has been redacted***
Executive Summary

As a category 1 responder, Public Health Wales is required under the *Civil Contingencies Act 2004* to maintain and develop plans to ensure that if an emergency occurs or is likely to occur the organisation can deliver its functions so far as necessary or desirable for the purpose of preventing the emergency, reducing, controlling or mitigating its effects, or taking other action in connection with it. The organisation has developed the Public Health Wales Emergency Response plan to provide a framework to establish, create and improve resilience.

This plan has been developed in light of a risk assessment process which has given consideration to the measures required to militate against identified risks within the capabilities and resource of the organisation. In addition, learning from previous responses to incidents and exercising have been considered in the development of the plan to ensure that lessons have been identified, implemented and embedded to strengthen the organisations resilience capability and response.

This document outlines the roles and responsibilities of Public Health Wales in emergency response including its activation and deactivation arrangements, command and control structures, and recovery arrangements. Further details concerning incident debriefing, business continuity, training and exercising as well as information sharing are contained within the plan. A glossary explains some of the key terms used in emergency planning.

Public Health Wales has a long history of effectively managing emergencies. While there are always challenges associated with emergency response (such as resource and capacity issues, and staff training and development), this revised plan outlines a framework to ensure the successful delivery of the organisation’s emergency response function into the future.

Dr Tracey Cooper – Chief Executive Public Health Wales
Strategic Vision for Civil Contingencies

Public Health Wales’ vision for civil contingencies is:

“To ensure that Public Health Wales and its entire staff are aware and capable of supporting the needs of Wales’ communities should they be involved in an emergency or call upon the services of the Public Health Wales Trust during a major emergency.”

Public Health Wales will achieve this vision through the following five strategies, by:

1. Maintaining compliance with the Civil Contingencies Act 2004 and all relevant guidance, regulations and statutory expectations.

2. Providing a sound and resilient organisational structure capable of escalating up to the needs of any major emergency with staff that are aware of their role and that of the organisation during a major emergency.

3. Providing an infrastructure which supports the co-ordinated management of Public Health Wales during a major emergency, through resilient, effective and appropriate information technology, resource allocation and fit for purpose Emergency Coordination Centres.

4. Ensuring that the ability to deliver the core activities of Public Health Wales is maintained and resilient through embedded and well practiced business continuity arrangements.

5. Providing an effective civil contingencies planning structure that facilitates and supports the preparation of emergency planning arrangements and cooperation with other responders engaged in providing local civil protection.
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<tr>
<td>Responsible Officer</td>
<td>Dr Tracey Cooper, Chief Executive</td>
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<td>Details of lead / responsible persons</td>
<td>Dr Quentin Sandifer, Executive Director of Public Health Services</td>
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**Review and Governance**

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1. Introduction

1.1.1 The Public Health Wales Emergency Response Plan details the organisation’s response arrangements to any emergency, incident or outbreak that impacts on or requires the mobilisation of public health resources and capabilities beyond the norm.

1.1.2 The Civil Contingencies Act 2004 (CCA) requires Category 1 responders to maintain plans for preventing emergencies and reducing, controlling or mitigating the effects of emergencies in both response and recovery phases. The Act defines an emergency as:

a) an event or situation which threatens serious damage to human welfare in a place in the United Kingdom,

b) an event or situation which threatens serious damage to the environment of a place in the United Kingdom, or

c) war, or terrorism, which threatens serious damage to the security of the United Kingdom.

1.1.3 As a Category 1 responder Public Health Wales is required under the CCA to maintain and develop plans to ensure that if an emergency occurs or is likely to occur the organisation can deliver its functions so far as necessary or desirable for the purpose of preventing the emergency, reducing, controlling or mitigating its effects, or taking other action in connection with it. The Emergency Response plan provides a framework to establish, create and improve resilience.

1.1.4 The Civil Contingencies Act places a number of civil protection duties on Public Health Wales in respect of

- Risk assessment
- Emergency plans
- Business continuity
- Warning and Informing
- Sharing of information
- Cooperation with local responders

1.1.5 Public Health Wales is responsible for providing public health emergency preparedness, resilience and response leadership, and scientific and technical advice at all organisational levels, working in partnership with other organisations to protect the health of the public within Wales. In fulfilling these Public Health Wales will undertake the responsibilities in table 1 whilst ensuring business continuity arrangements are in place, to ensure services provided by the organisation are delivered and maintained.
Table 1 - Roles and Responsibilities of Public Health Wales in emergency response

- Assess the impact on population health to inform the multi-agency response.
- Liaise with stakeholders to gather detailed information on the type of incident.
- Seek preliminary advice from specialists including Public Health England (PHE), Centre for Radiation Chemical and Environmental Hazards Wales (CRCE Wales), National Poisons Information Service (NPIS), with regards to likely symptoms of those exposed (both immediate and delayed) and the need for immediate countermeasures such as decontamination and mass chemoprophylaxis.
- Recommend measures to protect public health and mitigate effects of an incident.
- Interpret and share information/advice with health services and other partners.
- Collate information obtained from different sources into a coherent, meaningful and usable format for different audiences.
- Contribute to a Strategic Coordinating Group (SCG).
- Attend Strategic (Gold) /Tactical (Silver)/ Operational (Bronze) groups as required.
- Provide representation at Emergency Coordination Centre Wales (ECCW).
- Convene and initially chair a Scientific and Technical Advice Cell (STAC) at the request of the police incident commander.
- Advise on the effective communications of public health risks to others.
- Analyse and evaluate the response proposed by other agencies in terms of the likely impact on public health.
- Facilitate epidemiological follow-up of affected populations / communities as necessary.
- Convene and chair (or be a core member of) an Outbreak Control Team in response to a significant infectious disease incident.
- Provide an integrated approach to the protection of public health in Wales supporting partner agencies in the provision of scientific and technical advice within the following specialist areas:
  - Infectious disease
  - Outbreak surveillance
  - Chemical hazards
  - Biological hazards
  - Radiation hazard
  - Health and wellbeing (including mental health)
1.1.6 Specific arrangements for the organisational response to identified hazards and threats are contained within the following plans:

- Public Health Wales Business Continuity Management Process (this document is supported by divisional business continuity plans)
- Environmental Incident Management Plan
- Communicable Disease Outbreak Plan for Wales

1.1.7 In the event of a business continuity incident, the Public Health Wales Business Continuity Incident Management Process should be invoked.

1.1.8 A diagram outlining the Public Health Wales Emergency Response Plan relationship with external multi-agency plans can be found in Appendix 1.

2 Scope

2.1.1 This plan outlines the strategic framework for emergency preparedness, resilience and response arrangements to reduce, control and mitigate the effects of emergencies.

2.1.2 The plan has been developed following the assessment of risk and review of lessons identified through incident response and exercising. This is to ensure Public Health Wales is capable of effectively responding to an emergency.

3 Aims and Objectives

3.1.1 The aim of this plan is to detail the strategic framework to support the Public Health Wales response to emergencies.

3.1.2 The objectives of this plan are to:

- Outline command and control arrangements within Public Health Wales and how this dovetails with multi-agency response groups.
- Detail Public Health Wales response to an emergency both in and out of hours
- Define the criteria as to when the plan should be activated
- Outline the roles and responsibilities of staff
- Describe the activation and deactivation procedures
- Outline Public Health Wales’ responsibilities for emergency preparedness, resilience and response
4 Notification

If you have received a notification of a major incident please go to section 4.2

4.1 Notification of an Incident/Outbreak/Emergency of Public Health Interest Requiring Activation of the Plan

4.1.1 Public Health Wales may be alerted by a variety of routes to developing incidents, outbreaks or emergencies that have significant impact on the delivery of services.

4.1.2 Any member of staff receiving a notification (of a potential public health incident) should refer this to their team lead. The team lead should refer to Criteria for Assessment of Response Level set out in table 3 (page 14).

4.1.3 In most cases it is the Health Protection Team (in hours) or the on-call service (out of hours) that receives notifications of developing outbreaks or emergencies from staff, services or divisions or externally from partner agencies (including national/international bodies).

4.1.4 The notification received will be assessed by the appropriate team lead in 4.1.2 or 4.1.3 above.

4.1.5 For any incident, outbreak or emergency that meets one or more of the criteria for assessment (see table 3 page 14), consideration should be given as to whether this plan should be activated (see section 5.2).

4.1.6 If you are in doubt as to whether this plan should be activated escalate the decision upwards to the executive level.

4.2 Specific Arrangements for the Formal Notification of a Major Incident from an External Agency

4.2.1 The Cabinet Office [2016] defines a major incident as “An event or situation, with a range of serious consequences, which requires special arrangements to be implemented by one or more emergency responder agencies”.

4.2.2 Public Health Wales will be formally alerted to an external major incident via the Welsh Ambulance Service. This alert will be received by the local health protection team within the region the incident has occurred.

4.2.3 The NHS has standard messaging in the declaration of a major incident outlined below. There are 4 levels of alerting:
**Major incident **standby  
The incident does not require an immediate response, however there is the potential for the incident to escalate and a decision will be made to send out a ‘stand by alert’ to the organisation and the incident will be monitored and if necessary a major incident can be declared.

**Major Incident declared**  
The incident requires an immediate response and the Public Health Wales Emergency Plan is activated under the direction of the Strategic Director.

**Major incident cancelled**  
Cancels either the first or second message.

**Major incident stand down**  
When an incident is over it is the responsibility of all responding agencies to determine when their organisation should stand down.

<table>
<thead>
<tr>
<th>4.2.4</th>
<th>Any Public Health Wales employee receiving a notification of a major incident (usually from the Welsh Ambulance service) should record the incident details using the METHANE template (appendix 2), inform their team lead and <strong>immediately</strong> pass these details to the Executive Director of Public Health Services by telephone followed by an email (for audit purposes).</th>
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<td>4.2.5</td>
<td>If the Executive Director of Public Health Services is not available the incident details must be passed to the Deputy Director of Public Health Services. If neither of these are available they should be passed to the executive team member on call for the week, Out of hours, the incident details should be given to the executive team member on call.</td>
</tr>
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<td>4.2.6</td>
<td>The decision to provide a Public Health Wales response will be made by the member of the executive team who receives the notification.</td>
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5 Incident Levels and Activation

5.1 Public Health Wales Response Levels

5.1.1 The Public Health Wales response level will be dictated by the seriousness of the incident and the impact on the organisation. These may be subject to change over time. The response level will be the over-riding guide to how the organisation responds, regardless of the nature of the alert.

5.1.2 Public Health Wales operates a five level response structure outlined in the table 2 below.
<table>
<thead>
<tr>
<th>Level</th>
<th>Incident Impact</th>
<th>Management</th>
<th>Responsible Persons for Activation at this level</th>
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<tr>
<td>1</td>
<td>An incident with limited local impact for Public Health Wales.</td>
<td>The incident can be managed within the capacity of a single regional/local team taking due note of specialist advice.</td>
<td>Team leader</td>
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<tr>
<td>2</td>
<td>An incident that has wider local effect but can be managed within existing local resources. Incident may involve significant interagency work.</td>
<td>Can be dealt with by the responding team within the area of their usual responsibilities. Some support from other teams may be necessary for call handling/specialist support etc.</td>
<td>Team leader</td>
</tr>
<tr>
<td>3</td>
<td>An emergency, or novel event, that has significant impact on the resources of one or more parts of Public Health Wales (e.g. laboratories, field services etc). Multiagency command and control structures may have been implemented.</td>
<td>Will involve at minimum the full resources of one or more of the responding teams. Additional support from the wider organisation is likely to be required. Public Health Wales command and control structures implemented. Strategic Director and Tactical Incident Manager to be nominated. Incident Coordination Centre is to be activated.</td>
<td>Executive Director of Public Health Services or nominated deputy (see 4.2.5)</td>
</tr>
<tr>
<td>4</td>
<td>An emergency that has a severe impact and causes major disruption in many parts of Public Health Wales. Multiagency command and control structures would have been implemented.</td>
<td>Will require support from all divisions in Public Health Wales. Public Health Wales command and control structures implemented. Strategic Director and Tactical Incident Manager to be nominated. Incident Coordination Centre is to be activated. Some routine work will be stopped and work reprioritised.</td>
<td>Executive Director of Public Health Services or nominated deputy (see 4.2.5)</td>
</tr>
<tr>
<td>5</td>
<td>A catastrophic emergency that has overwhelming impact on Public Health Wales. One or more multiagency command and control structures would have been implemented.</td>
<td>Response at all levels of the organisation will be required for a protracted period. Response will require resources beyond the scope of the organisation. Public Health Wales command and control structures implemented. Strategic Director and Tactical Incident Manager to be nominated. Incident Coordination Centre is to be activated.</td>
<td>Chief Executive or nominated deputy</td>
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5.1.3 When undertaking the risk assessment reference should be made to tables 2 and 3.

**Table 3**

**Criteria for Assessment of Response Level**

**(A) Incident under assessment meets the following criteria**

1. Public Health Impact: any actual or potentially serious health/public health consequences?

2. Involves more than one local authority area? (Consider extent of implications for other partners as well as local authorities).

3. Requires resources beyond that readily available to the responding Public Health Wales team/service/divisions (Consider complexity of situation and competencies for handling).

4. Is the problem likely to require a sustained response?

5. Is specific expertise needed to determine the health threat of/response to unusual or emerging threats?

6. Is this the first response to a new organism or threat in Wales by the Public Health Wales?

7. Is this a potentially malicious incident?

**(B) In the absence of a significant public health incident, a considered response is needed:**

1. Are there concerns or demands from partner organisations/the public for a public health response to a perceived risk? (Consider impact on reputation and relationships).

2. Is there substantial media interest in a public health response to a perceived risk?

**5.2 Activation**

5.2.1 The responsible persons for activating each Public Health Wales response level are outlined in table 2.

5.2.2 If a response level 3 or above is declared than command and control arrangements are invoked as summarised in figure 1.

5.2.3 The Executive Director of Public Health Services (or nominated deputy in their absence) should aim to activate a response within 30 minutes.
Figure 1 - Command and Control Activation Arrangements

1. Notification received by Public Health Wales Team Lead
2. Begin risk assessment
3. Possible level 3 or above incident. If in doubt escalate
4. Notify Executive Director of Public Health Services (or nominated deputy see 4.2.5 for alternatives)
5. Executive Director of Public Health Services (or deputy) is to review risk assessment and confirm level of incident
6. Confirmed Level 3 or above incident?
7. Yes
   - Activate Emergency Plan
   - Appoint Strategic Director
   - Strategic Director to appoint Tactical Incident Manager

8. No
9. Continually review and monitor situation and risk assessment
10. Tactical Incident Manager to appoint members of the Tactical Emergency Management Team
6 Command and Control

6.1 Public Health Wales Command and Control

6.1.1 To achieve a combined and coordinated response to an incident or emergency, Public Health Wales needs to ensure that appropriate command and control arrangements are in place. Control arrangements ensure personnel and assets are appropriately resourced. Incident command provides direction to achieve defined objectives.

6.1.2 The command and control structure provides a formal escalation / de-escalation path between strategic, tactical and operational level personnel (figure 2). This structure ensures effective communication with multi-agency command and control structures.

6.1.3 If an incident is declared to be level 3 or above (Public Health Wales response level), formal command and control structures will be implemented. The Executive Director of Public Health Services will initially assume the role of the Strategic Director or appoint an alternative as appropriate to the situation and level of incident. In their absence the Deputy Director of Public Health Services will initially assume the Strategic Director role. If neither, are available this role will be assumed by the executive team member on call for the week. Out of hours, the incident details should be given to the executive team member on call. or the Executive Director on call will be appointed. The Strategic Director will immediately appoint a Tactical Incident Manager. The Tactical Incident Manager will subsequently convene a Tactical Emergency Management Team.

6.1.4 If the response to an emergency has significant business continuity implications, then a Business Continuity Tactical Management Team will be established and report directly to the Emergency Response Strategic Director. If necessary, to deal with major Business Continuity Issues, a separate business continuity strategic director can be appointed however the Emergency Response Strategic Director has overall command and control of the organisational response to the internal and external consequences of the incident.
Figure 2: Public Health Wales Command and Control Structure
6.2 **Strategic Level Arrangements**

6.2.1 The strategic responsibility rests with the Strategic Director who has the authority to draw resource from across the whole organisation. The Executive Director of Public Health Services will initially assume the role of the Strategic Director or appoint an alternative as appropriate to the situation and level of incident. In their absence the Deputy Director of Public Health Services will initially assume the Strategic Director role. If neither, are available this role will be assumed by the executive team member on call for the week. Out of hours, the incident details should be given to the Executive Team Member on call. The Chief Executive may appoint an alternative Strategic Director as the situation demands.

6.2.2 The Strategic Director has the authority and capability to convene a Strategic Management Team of appropriate personnel to support the Strategic response to the incident. The Strategic Management Team should consist of senior staff representing one or more the following areas as required by the incident.

- Human Resources
- Business Continuity
- Governance
- Finance
- Quality, Nursing, and Allied Health Professionals

6.2.3 A suitable space needs to be made available at No 2 Capital Quarter, Tyndall Street, Cardiff, CF10 4BZ for the Strategic Management Team to convene. Facilities should be made available for staff to meet remotely due to the potential requirements of the incident.

6.2.4 If the response to an emergency has significant business continuity implications then paragraph 6.1.4 applies.

6.2.5 The strategic response should include the following activities:

- Define strategic objectives
- Follow the JESIP joint decision model to co-ordinate information, maintain situational awareness, record and share dynamic risk assessment and assist in the implementation of plans and procedures. (Appendix 3).
- Ensure clear lines of communication within and across the organisation.
• Ensure longer term resourcing and expertise for organisational command, control and resilience.
• Assess and deploy appropriate support required to Emergency Coordination Centre Wales (ECCW) as well as one of more Strategic Coordinating Group as required.
• Plan beyond the immediate response phase to recovery.
• Allocate resources and expertise to tactical commanders.
• Keep a log, recording the received information and rationale behind each decision.

6.2.6 The role and responsibilities of the Strategic Director are outlined in section 15.1

6.3 Tactical Level Arrangements

6.3.1 The tactical response will be managed by the Tactical Emergency Management Team. The team will be required to:

• Receive strategic direction from the Strategic Director.
• Follow the JESIP Joint Decision Model to co-ordinate information, maintain shared situational awareness, record and share dynamic risk assessment and assist in the implementation of plans and procedures. (Appendix 3).
• Ensure Public Health Wales is represented at relevant multi-agency groups and provide support as necessary.
• Co-ordinate tasks.
• Determine priorities in allocating resources.
• Obtain resources.
• Assess and disseminate information and intelligence to evaluate hazards, threats and vulnerabilities to maintain multi-agency awareness.
• Provide accurate and timely information to protect and inform communities.
• Keep a log, recording the received information and rationale behind each decision.

6.3.2 The Tactical Emergency Management Team will be staffed flexibly with the requirements of the emergency dictating its membership. The minimum staffing requirement of the Tactical Management Team is:

• Tactical Incident Manager.
• Specialist programme/team representatives as required.
• Communications Officer.
• Loggists / Administrative Support.

6.3.3 Normally an Emergency Planning representative will also be a member of this group (should they be available) to provide advice and tactical support.

6.3.4 The Tactical Emergency Management Team will be managed by the Tactical Incident Manager and will usually be located in the Incident Coordination Centre, the location of which may be dictated by the demands of the incident.

6.3.5 The role and responsibilities of the Tactical Incident Manager are outlined in section 15.2

6.4 Incident Co-ordination Centre Arrangements

6.4.1 The Public Health Wales Tactical Management is coordinated through the Incident Coordination Centre (ICC).

6.4.2 The ICC aims to consolidate information about the organisational operational / tactical response, gather information from wider sources about the incident and make sure information flows efficiently through the chain of command and to partner organisations.

6.4.3 The Incident Coordination Centre operational plan details the centre’s activation/deactivation process as well as communication arrangements.

6.4.4 The Public Health Wales Incident Coordination Centre is usually located at [Address]. Should this location be unavailable the Incident Coordination Centre is to be relocated to [Address].

6.5 Operational Level Arrangements

6.5.1 Operational teams may be established, and coordinated, by any Tactical Emergency Management Team member, as required, and will be dedicated to the tasks associated with the resolution of an incident. Operational staff receives direction from the Tactical Emergency Management Team.

6.5.2 Operational staff will be required to:

• Follow the JESIP joint decision model to co-ordinate information, maintain situational awareness, record and share dynamic risk assessment and assist in the implementation of plans and procedures (Appendix 3).

• Implement rapid and effective actions as directed to minimise harm and mitigate the effects of an incident.
• Concentrate resources on specific tasks.
• Provide briefings to the Tactical Emergency Management Team about their allocated task, and ensure that the message is clear and understood.
• Keep a log, recording the received information and rationale behind each decision.

6.6 Liaison with Health Boards

6.6.1 At all Public Health Wales response levels the organisation will proactively liaise with the Executive Director of Public Health and any other appropriate Health Board Executive (dependant on the incident) in the affected Health Board region on the progress of the incident response.

6.6.2 Liaison is to ensure an effective flow of information between the Health Board and Public Health Wales.

6.7 Liaison with Welsh Government

6.7.1 At level 3 (Public Health Wales response level) the organisation will proactively liaise with Welsh Government officials on the progress of the incident response.

6.7.2 At the request of Welsh Government Public Health Wales will send liaison staff to support Emergency Coordination Centre Wales (ECCW).

6.7.3 Liaison staff are to ensure there is an effective flow of information between Welsh Government and Public Health Wales.

6.8 Liaison with UK Nations Public Health Organisations (England, Scotland, Northern Ireland)

6.8.1 Public Health Wales will engage with partner agencies within the UK to support a coordinated and consistent public health response to national incidents.

6.8.2 Liaison is conducted via teleconference and SITREPs in line with the established daily/weekly schedule.

6.8.3 Liaison staff are to ensure there is an effective flow of information between UK Nations, Public Health Organisations and Public Health Wales.

6.9 Public Health Wales Relationship with External Emergency Response Groups

6.9.1 The relationships between emergency response groups are outlined in figure 3.
Figure 3 - Public Health Wales Integration with Multi-Agency partners.
7 Escalation and De-escalation

7.1.1 The Strategic Director is responsible for the escalation and de-escalation of the organisation’s response to an incident in discussion with the Tactical Incident Manager.

7.1.2 Escalation or de-escalation through the Public Health Wales response levels need not occur sequentially, but will be driven by the nature, scale and complexity of incidents coupled with the expectations of response. Response levels can be changed following a review of the strategic direction and operational management of the emergency by the Strategic Director in discussion with the Tactical Incident Manager.

7.1.3 The response level may need to be escalated or de-escalated for a number of reasons. These may include:

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<th>Criteria for escalation</th>
<th>Criteria for de-escalation</th>
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<td>• the need for additional internal resources</td>
<td>• reduction in internal resource requirements</td>
</tr>
<tr>
<td>• increased severity of the incident</td>
<td>• reduced severity of the incident</td>
</tr>
<tr>
<td>• increased demands from partner agencies or other government departments</td>
<td>• reduced demands from partner agencies or other government departments</td>
</tr>
<tr>
<td>• heightened public or media interest</td>
<td>• reduced public or media interest</td>
</tr>
<tr>
<td>• increase in geographic area or population affected</td>
<td>• decrease in geographic area or population affected</td>
</tr>
</tbody>
</table>

8 Stand down procedures

8.1.1 Once it has been decided that a response at level 3 and above is no longer necessary the Strategic Director, in liaison with the Tactical Incident Manager, will consider standing down the response.

8.1.2 The standing down of the response should be considered throughout the response and recovery phases of an incident through ongoing liaison with the Strategic Director.

8.1.3 The stand-down process requires a structured approach to ensure lessons are identified, records and logs are appropriately recorded and staff debriefed. Further consideration should be given to staff health and wellbeing as well as the provision of psychological support.
9 Recovery

9.1.1 The recovery phase of an incident needs to be considered at the onset of an emergency. The recovery phase continues until disruption has been rectified, demands on services have returned to normal and the needs of the affected population have been met.

9.1.2 Recovery management should encompass the physical, social, psychological, political and financial consequences of an emergency.

9.1.3 It is the responsibility of the Strategic Director to anticipate consequences and appropriate recovery planning right from the beginning of any response.

9.1.4 The Strategic Director may wish to convene a recovery team to manage the Public Health Wales recovery to an incident.

10 Debriefing

10.1.1 Level 3 and above incidents will require a structured debrief. This is to ensure learning points are identified, analysed, acted upon and if deemed necessary incorporated into the organisations response arrangements. The sharing of good practice reduces the risk of incidents reoccurring and their impact. Significant level 2 incidents may be debriefed at the request of the divisional director or proactively by the responding team leader if deemed appropriate.

10.1.2 Consideration should be given to the type of debrief that is required (hot debrief, organisation debrief, multiagency debriefs). Hot debriefs must take place with staff involved immediately post de-escalation. A Public Health Wales staff debrief form can be found in appendix 4.

10.1.3 Incidents at level 3 and above require a post incident report. This report is to be produced within 8 weeks of the incident being declared over. This report is internal to Public Health Wales (although can be shared externally as required). It is separate from the external multiagency report that may be published.

10.1.4 The incident report will be submitted to the Public Health Wales Emergency Planning Group. Lessons to be learned will be recorded and progress monitored.

11 Training and Exercising

11.1.1 Within the regulations of the Civil Contingencies Act 2004 every plan maintained by a general Category 1 responder under section 2(1)(c) or (d) of the regulations must include provision for:
a) The carrying out of exercises for the purpose of ensuring that the plan is effective.

b) The provision of training of an appropriate number of suitable staff for the purposes of ensuring that the plan is effective.

11.1.2 To meet these requirements the NHS Wales Emergency Planning Core Guidance requires the organisation to:

a) Evaluate training and exercise requirements which may exceed the minimum requirement for a live exercise every 3 years, a table top exercise and physical setting-up of the control centre every year and a test of communications cascades every six months.

b) Involve staff in exercises that are appropriately trained in their role within the plan.

c) Where possible participate in multi-agency exercises led by partner organisations where Public Health Wales has a key role.

11.1.3 To ensure that Public Health Wales fulfils its duties under the Act in respect of training, staff identified as having emergency response roles within the plan and those who potentially have a role within emergency response, will be required to participate in Emergency Preparedness, Resilience and Response training to ensure competency in their roles.

12 Governance

12.1.1 The maintenance of the document is the responsibility of the Executive Director of Public Health Services and it will be reviewed as required by the Public Health Wales Emergency Planning Group and approved by the Board of Public Health Wales.

12.1.2 Its content will be reviewed at least annually, by the Public Health Wales Emergency Planning Group and any major changes recommended to the Chief Executive to be formally reviewed and submitted for further approval to the Board.

12.1.3 This plan will also be reviewed following a level 3 or above incident or exercise and/or in light of any changes to the relevant legislation.

12.1.4 The Public Health Wales Emergency Planning Group will approve and sign off any amendments to this plan. Revised versions will be submitted to the Board of Public Health Wales for approval.
13 Communications

13.1.1 Communications is an essential aspect of the Emergency Response. The Communications Team has a responsibility to lead and coordinate the Public Health Wales communications response to any emergency incident.

13.1.2 Engagement with multi agency groups e.g. Strategic Coordinating Group Media Cell, Welsh Government and other communication leads is vital to ensure external agencies are appropriately alerted, briefed and communication strategies are consistent.

13.1.3 The Communication Team are required to inform and advise all Public Health Wales staff of the response level to the incident as well as information relating to it (dependent on its nature).

13.1.4 All incidents at level 3 and above should be communicated to staff. This requires the development of communication materials including press statements, social media posts.

13.1.5 NHS Direct Wales is a key participant in the communications process and must be kept informed of the progress of the major emergency as they may be experiencing increased calls as a result of the incident. In addition, NHS Direct Wales can provide intelligence and are able to offer helpline and public information facilities to help with responsibilities to inform the public.

13.1.6 In managing the response the Strategic Director may wish to designate a Single Point of Contact.

14 Supporting Arrangements

14.1 Record Keeping

14.1.1 A comprehensive record should be kept of all events, decisions, reasoning behind each key decision and actions taken. The organisation is responsible for maintaining its own records.

14.1.2 All staff are required to record, as far as they are able, the rationale for decision taken, including, (if possible) the options that were considered as well as the details of advice sought and received.

14.1.3 Logging is an essential procedure which must aim to provide people with the right information at the right time in a form they can assimilate and act upon. Loggists capture information relating to decisions made and actions taken. Loggists are required to produce a contemporaneous log of the incident. The loggist action card can be found in section 15.3.
14.1.4 All documentation will need to be saved and produced for the purposes of internal/multiagency debrief, inquiry, civil or criminal proceeding, or coroner’s court. Any log produced is disclosable and as such becomes legal evidence.

**14.2 Vulnerable Persons**

14.2.1 Public Health Wales is required to give special consideration to those who are made vulnerable as a result of the emergency or who are less able to help themselves in the circumstances of an emergency.

14.2.2 Those who are vulnerable will vary depending on the nature of the emergency. For planning purposes the Cabinet Office Guidance ‘Chapter 5 (Emergency Planning) Revision to Emergency Preparedness’ states that there are broadly 3 categories that need to be considered:

- those who, for whatever reason, have mobility difficulties including people with physical disabilities or a medical condition or otherwise may have physical challenges to their mobility, for example, pregnant women;
- those with mental health or learning difficulties; and
- others who are dependent, such as children.

14.2.3 Further consideration should be given to communicating with those who are identified as vulnerable, for example providing communications in different media and formats e.g. Braille for the visually impaired.

**14.3 Provision of mutual aid**

14.3.1 The effective management of a mass casualty incident will require a coordinated approach across the NHS, both in Wales and throughout the UK. Statutory guidance to the *Civil Contingencies Act 2004* recognises that the emergency planning process may identify some areas where existing capability to deal with an emergency are insufficient and presumes Category 1 responders will use mutual aid agreements as a way of addressing these.

14.3.2 The Public Health Wales Strategic Director/Executive(s) may receive a request for assistance and if required should take appropriate action within ‘a reasonable timeframe’ even when there may not be a public health implication to the incident.

14.3.3 The Strategic Director/Executive(s) will inform the Public Health Wales Chief Executive (or nominated deputy) as part of the decision making process. The Chief Executive must consider whether the resources required by partner(s) can be made available without impacting the organisation’s service delivery obligations.
14.3.4 The Chief Executive should consider the establishment of appropriate command and control structures to facilitate the coordination of these resources.

14.3.5 The Public Health Wales Document “The Provision of Mutual Aid in Response to a Mass Casualty Event” further details these arrangements.

14.4 Health and Safety

14.4.1 All Public Health Wales staff are required to follow Public Health Wales Health and Safety policies, procedures and protocols.

14.4.2 The Strategic Director will ultimately be responsible for the Health and Safety of all staff involved in the response.

14.4.3 Members of the Tactical Emergency Management Team should give consideration to Health and Safety policy, procedures and protocols in the directing of tasks to operational staff and should be made aware of any identified or potential risks.

14.4.4 Every member of staff has a statutory duty of care under the Health and Safety at Work Act 1974 to take reasonable care of their own health and safety and of others who may be affected by their acts or omissions.

14.5 Health and Wellbeing of Staff

14.5.1 The welfare of organisational staff is pertinent in the organisation’s ability to recover from an incident.

14.5.2 Public Health Wales has a duty of care to ensure employees are not harmed by work related stress. Distress after disasters is very common and although for the majority only short term effects will be experienced recovery and planning needs to consider the long term effects. Therefore the organisation need to ensure the following

- Arrangements for supporting staff during a response are in place
- Provision of long term support
- Accessible to psychological support
- Training i.e. coping with stress
- Inform staff of alternative methods of support i.e. relaxation, talking with a friend or colleague
- Be aware of their duties in relation to staff welfare
14.6 Business Continuity

14.6.1 The Civil Contingencies Act 2004 requires all Category 1 responders to maintain plans to ensure they are still able to exercise their functions, as far as reasonably practical, in the event of an emergency. Public Health Wales therefore needs to ensure that key services are maintained when faced with disruption.

14.6.2 Public Health Wales Business Continuity arrangements are outlined in the document “Business Continuity Incident Management Process”. This document is supported by divisional Business Continuity Plans.

14.7 Information Sharing

14.7.1 The Civil Contingencies Act 2004 provides the legal justification for the sharing of data with the appropriate authorities during an emergency as defined within the Act.

14.7.2 Public Health Wales may receive a request for information under the following Acts:

- **Data Protection Act 1998** – request for what is held by the organisation from an individual about themselves.
- **Freedom of Information Act 2000** – request for organisational, procedural or statistical information.
- **Environmental Information Regulations 2005** – request for environmental information.

14.7.3 All such requests are to be passed to the Chief Risk Officer or SIRO for advice and formal response. The Acts stipulate a time limit for response.

14.7.4 It is possible that a collaborating Authority or organisation may request additional information during the emergency. If specialist Information Governance advice is not available consideration must be given to:

- The purpose of the request, which should be clearly stated
- The legal justification for disclosure
- The information requested is not excessive for the purpose
- The method of transmission is secure especially if the data includes person identifiable information (PII)
14.7.5 Under the *Health Protection Legislation (Wales)* 2010 there are duties and powers contained within the *Public Health (Control of Disease) Act* 1984 as amended by the *Health and Social Care Act* 2008 in relation to the notification of diseases and the investigation and control of health protection threats. This involves the sharing of information between relevant public agencies as necessary to control these threats.
15 Action Cards

15.1 Strategic Director

Role

The Strategic Director is responsible for the organisations response to the incident and determines the strategic objectives for the response. The Strategic Director has overall command of the resources of Public Health Wales and will delegate implementation decisions to the Tactical Incident Manager.

Should a major incident be declared, the strategic director may be located at the Strategic Co-ordinating Centre representing the organisation at the Strategic Coordinating Group.

The Strategic Director will act on delegated responsibilities and powers from the Chief Executive and has the authority to act across the entire organisation.

Responsibilities

- Protect lives and minimise harm
- Promote effective decision making
- Follow the Joint Emergency Service Interoperability Programme (JESIP) principles to provide strategic direction in the organisation’s response to the incident.
- Establish the framework, policy and parameters within which the tactical level will work
- Provide regular status reports to the Chief Executive Officer on a frequency agreed at the time the incident is notified
- Define and communicate the overarching strategy and objectives for the response ensuring the strategy reflects any relevant policy, legal framework or protocols.
- Confirm strategic decisions with responders
- Ensure the development and implementation of an effective communications strategy.
- If required convene a Strategic Management Team to provide strategic direction to the organisation in its response to the Incident.
- Monitor the context, risks, impacts and progress towards defined objectives
• Establish shared situational awareness between agencies as well as with the Tactical Incident Manager

• Make decisions on arising strategic issues

• Ensure appropriate resources are provided to respond to the incident and ensure they are available to responders.

• Request and receive regular updates from the Tactical Incident Manager

• Hold regular up-date briefings

• Engage effectively in the political decision making process.

• Allocate additional resources where possible

• Confirm and continually review the risk assessment putting in place appropriate mitigation and management arrangements to continually monitor and respond to the changing nature of the incident.

• Continually evaluate the strategic direction of the incident

• Address medium and long term priorities to facilitate the recovery of the organisation and affected communities.

• Ensure that statutory responsibilities are met for the health, safety, human rights, data protection and welfare of effected individuals and staff during the incident.

• Carry out a post incident hot debrief and debrief as necessary.

• Ensure that all tactical decisions made, and the rationale behind them, are documented in a decision log, ensuring that a clear audit trail exists for all multi-agency debriefs and future learning.

**Initial Actions**

<table>
<thead>
<tr>
<th>Action</th>
<th>Tick</th>
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<tbody>
<tr>
<td>On receiving the notification of a major incident, or an incident of public health concern gather information and intelligence.</td>
<td></td>
</tr>
<tr>
<td>Assess the information and intelligence provided to you against the risk assessment and response levels located in the plan and identify a Public Health Wales response level.</td>
<td></td>
</tr>
<tr>
<td>Is the incident Public Health Wales level 3 or above? Should the incident be lower than a level 3 inform the staff member who provided the initial notification and reassess from ‘time to time’ (i.e. should additional information and intelligence be received). If in doubt escalate.</td>
<td></td>
</tr>
<tr>
<td>If the incident is a level 3 or above command and control</td>
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</tr>
</tbody>
</table>
arrangements need to be invoked.

**Appoint a Tactical Incident Manager**

**Inform the Chief Executive Officer of Public Health Wales**

If a Strategic Coordination Group is convened establish clear communication channels and ensure appropriate representation. The Strategic Director may wish to locate their self at the Strategic Coordination Centre.

**Establish communication channels with Welsh Government.**

Continually review the incident making reference to the Joint Decision Model (JDM) considering the ongoing needs of Public Health Wales in response to and recovery from the incident.

**Skills required to fulfil the role**

The following National Occupational Standards for Civil Contingencies are required to fulfil this role

- Take effective decisions (E10)
- Lead meetings (D11)
- Respond to emergencies at the Strategic level (CCAG1)
- Warn, inform and advise the community in the event of emergencies (CCAF2)
- Conduct debriefing after an emergency, exercise of other activity (CCAE3)
- Anticipate and assess the risk of emergencies (CCAB1)
- Work in cooperation with other organisations (CCAA1)
- Share information with other organisations (CCAA2)
- Manage information to support civil protection decision making (CCAA3)
15.2 Tactical Incident Manager

Role
The role of the tactical incident manager is to ensure that rapid and effective decisions are made and actions implemented to save lives and minimise harm.

The Tactical Incident Manager will manage the tactical level of command during and incident and will work between the strategic and operational levels of command. They are responsible for interpreting strategic directions (where strategic-level command is in use) and developing and coordinating the tactical plan.

Responsibilities

- Protect lives and minimise harm
- Promote effective decision making
- Activate the organisations Incident Co-ordination Centre and ensure that it is up and running and receiving information relating to the incident.
- Manage and convene a Tactical Emergency Management Team ensuring representation from appropriate divisions and work streams to manage the organisations tactical response to the incident.
- Establish and maintain communication with the Strategic Director, Gold/SCG representation, multi-agency Silver/Tactical (if sitting) and with staff at Operational /Bronze Levels.
- Establish shared situational awareness between agencies as well as responding staff across the organisation.
- Follow the Joint Emergency Service Interoperability Programme (JESIP) principles to tactically manage the organisations response to the incident.
- Receive regular updates through communication with the Tactical Management team members and communicate response arrangements to affected services and staff.
- Determine & co-ordinate the immediate Public Health priorities.
- Make decisions on arising operational issues.
- Request & receive response updates from service areas.
- Hold regular up-date briefings.
• Allocate additional resources where possible and/or escalate as necessary.

• Confirm and continually review the risk assessment putting in place appropriate mitigation and management arrangements to monitor and respond to the changing nature of the incident.

• Continually evaluate the tactical plan.

• Ensure that statutory responsibilities are met for the health, safety, human rights, data protection and welfare of effected individuals and staff during the incident.

• Carry out a post incident hot debrief and debrief as necessary.

• Ensure that all tactical decisions made, and the rationale behind them, are documented in a decision log, ensuring that a clear audit trail exists for all multi-agency debriefs and future learning.

**Skills required to fulfil the role**

The following National Occupational Standards for Civil Contingencies are required to fulfil this role

• Take effective decisions (E10)

• Lead meetings (D10)

• Respond to emergencies at the tactical level (CCAG2)

• Conduct debriefing after an emergency, exercise of other activity (CCAE3)

• Anticipate and assess the risk of emergencies (CCAB1)

• Work in cooperation with other organisations (CCAA1)

• Share information with other organisations (CCAA2)

• Manage information to support civil protection decision making (CCAA3)
15.3 Loggist

Role
The role of the loggist is to capture and accurately record the process of decision making, to assist in the evaluation of responses and to produce an audit trail for use in any inquiry that may follow.

Responsibilities

- Capture information relating to decisions made and actions taken during an incident. An accurate log will demonstrate the reasonable basis on which decisions were made. This aids co-ordination of the incident and supports and future inquiries which may occur.

- Accurately record all decisions/actions with a date and time, including any rationale for the decision.

- The decision maker and log keeper will review the decision log periodically.

- The decision maker (e.g. Tactical Incident Manager, Strategic Director) will articulate decisions, actions and rationale to the loggist when possible.

- Update the meeting/responding persons with the progress of the outstanding actions in the absence of the action owner.

- Record new actions, leads and any time scales generated by the meeting together with any priorities given in the format appropriate to the organisation who provides the chair.

- Compare new actions with those already tasked (whether completed or outstanding) for duplications and refer back to the relevant chair for clarification.

- Confirm the existing and new actions with those present before the meeting is concluded.

- The loggist is not a minute take.

Skills required to fulfil the role

The following National Occupational Standards for Civil Contingencies are required to fulfil this role

- Work in cooperation with other organisations (CCAA1)

- Share information with other organisations (CCAA2)
- Manage information to support civil protection decision making (CCAA3)
- Respond to emergencies at the tactical level (CCAG2)
16 Glossary

Cabinet Office Briefing Room (COBR): Refers to the location for a type of emergency or crisis response committee set up to coordinate the actions of UK government departments in response to instances of national or regional crisis, or when events occur elsewhere in the world with major implications for the UK.

Civil Contingencies Act (2004): Legislation passed by the UK government codifying the local and national arrangements for civil protection and the meaning and use of emergency powers.

Emergency Coordinating Centre Wales (ECCW): Welsh Government’s Emergency Coordinating Centre. This is set up during incidents in Wales and a Public Health Wales representative is based here if the incident has public health implications to support co-ordination between partners.

Health Emergency Coordination Centre (HECC): If an incident requires co-ordination between different NHS partners (ambulance/health boards etc) then a Health Emergency Coordinating Centre is established.


Joint Emergency Services Interoperability Programme (JESIP): A standard approach to multi-agency working to help improve response. Initially focusing on Major Incidents the working principles can be applied in a multitude of environments where organisations need to work more effectively together.

Joint (National) Decision Model: A decision-making model used by responding agencies under the Joint Doctrine (below) to help support staff to make key decisions when they are working under extreme, difficult and time-critical conditions, enabling commanders to make effective decisions together.

Joint Doctrine: Provides a common way of working together with responding agencies with saving life and reducing harm at its core. The key components of the joint doctrine are Principles for Joint Working, M/ETHANE and the Joint Decision Model.


M/ETHANE: A common method for passing incident information between services and their control rooms.

Public Health Wales: A NHS Trust established in 2009. Provides national public health leadership for civil contingencies and is a Category 1 responder under the Civil Contingencies Act (2004).
**Scientific Advisory Group in Emergencies (SAGE):** Group of scientific and technical experts that is established to provide a common source of advice to inform decisions made during the central government response to an emergency.

**Scientific and Technical Advice Cell (STAC):** A multiagency group of experts convened in response to a request from the Strategic Coordinating Group police commander. The Scientific and Technical Advice Cell provides evidence based advice on specific scientific questions which the agencies represented at the Strategic Coordinating Group are unable to answer from their own expertise. The Scientific and Technical Advice Cell communicates only with the Strategic Coordinating Group and is usually initially chaired by a senior officer from Public Health Wales.

**Tactical Coordinating Group (TCG):** Multiagency tactical response group. It takes strategic direction from the Strategic Coordinating Group.

**Single Point of Contact:** A person or department serving as the coordinator or focal point of information concerning an activity, programme or response. Often used where information is time-sensitive and accuracy is important.

**Strategic Coordinating Group (SCG):** Multi-agency Gold command usually led by the police. The group gives strategic level advice to those dealing with the incident and is ultimately responsible for the response.
## 17 Frequently Used Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>COBR</td>
<td>Cabinet Office Briefing Room</td>
</tr>
<tr>
<td>CCA</td>
<td>Civil Contingencies Act [2004]</td>
</tr>
<tr>
<td>CBRN</td>
<td>Chemical, Biological, Radiological and Nuclear</td>
</tr>
<tr>
<td>CONOPS</td>
<td>Concept of Operations</td>
</tr>
<tr>
<td>CRCE</td>
<td>Centre for Radiation Chemicals and Environmental Hazards</td>
</tr>
<tr>
<td>DPPW</td>
<td>Directors Public Protection Wales</td>
</tr>
<tr>
<td>ECCW</td>
<td>Emergency Coordinating Centre Wales</td>
</tr>
<tr>
<td>EPRR</td>
<td>Emergency Planning, Resilience and Response</td>
</tr>
<tr>
<td>HECC</td>
<td>Health Emergency Coordinating Centre</td>
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<tr>
<td>IMT</td>
<td>Incident Management Team</td>
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<tr>
<td>JESIP</td>
<td>Joint Emergency Services Interoperability Programme</td>
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<td>JDM</td>
<td>Joint Decision Model</td>
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<tr>
<td>LHB</td>
<td>Local Health Board</td>
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<td>LRF</td>
<td>Local Resilience Forum</td>
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<td>OCT</td>
<td>Outbreak Control Team</td>
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<td>NRW</td>
<td>Natural Resources Wales</td>
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<td>PHW</td>
<td>Public Health Wales</td>
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<td>PHE</td>
<td>Public Health England</td>
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<td>SAGE</td>
<td>Scientific Advisory Group in Emergencies</td>
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<td>SCC</td>
<td>Strategic Coordinating Centre</td>
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<td>SCG</td>
<td>Strategic Coordinating Group</td>
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<tr>
<td>SitRep</td>
<td>Situation Report</td>
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<tr>
<td>STAC</td>
<td>Scientific and Technical Advice Cell</td>
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<tr>
<td>WAST</td>
<td>Welsh Ambulance Service Trust</td>
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<tr>
<td>WG</td>
<td>Welsh Government</td>
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</tbody>
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18 Appendix

18.1 Appendix 1 – Public Health Wales Emergency Plan relationship with multiagency plans
18.3 Appendix 3 – JESIP Joint Decision Model

Appendix 4 – Public Health Wales Staff Debrief Form

Public Health Wales Debrief Form

<table>
<thead>
<tr>
<th>Incident/Outbreak</th>
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<tbody>
<tr>
<td>Date of Incident/Outbreak</td>
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<tr>
<td>Date form completed</td>
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<tr>
<td>Completed by</td>
</tr>
<tr>
<td>Role in Incident/outbreak</td>
</tr>
<tr>
<td>Organisation</td>
</tr>
</tbody>
</table>

After any incident or event it is accepted there will be some areas of improvement identified, but it is also important to note good practice to assist and guide others who may face a similar set of circumstances in the future. Your views and experience count.

Please detail the things that went well:

Please detail the things that did not go well:

What is the most valuable thing you have learned as a result of this incident?

Please provide any tips for people who may perform a similar role in the future:

Please return completed forms to: Daniel Rixon (Emergency Planning Officer) Daniel.Rixon@wales.nhs.uk