APPENDIX 4

Lesson	Incident/ Exercise Name	Date of Incident/ Exercise	Category	Theme	Learning or concern identified	Reviewed	Date reviewed	Needs addressing	How addressed/ Action Taken	Open/ Closed	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Planning	I was sat on a table with two others from the same organisation. I feel that we would have been better being distributed around the other tables for networking opportunities and it contained all our knowledge in one area rather than sharing it around the room.	Yes	25.08.2023	Yes	This will be considered during the planning for future exercises.	No	Yes
Internal	Exercise Waste Side	04.07.2023	CBRNE	Planning	There was confusion as to whether the plume map referred to smoke or the chemical. This impacted on the actions taken	Yes	25.08.2023	Yes	This will be considered during the planning for future exercises.	No	Yes
Internal	Exercise Waste Side	04.07.2023	CBRNE	Situational Awareness	I think that the exercise section should have been longer and that the power point of non-NHS agencies roles could have been covered a lot quicker	Yes	25.08.2023	Yes	This will be considered during the planning for future exercises.	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Planning	Tabletop: you could organise the tables to ensure that there was a good mix of agencies	Yes	25.08.2023	Yes	This will be considered during the planning for future exercises.	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Planning	My only comment was that I thought we could have done with a little more time for this part of the exercise which was a bit rushed towards to end.	Yes	25.08.2023	Yes	This will be considered during the planning for future exercises.	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	JESIP	Good speakers who knew their subjects.	Yes	25.08.2023	No	N/A	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Planning	Good mix on people on the tables	Yes	25.08.2023	No	N/A	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Planning	As usual this was an excellent opportunity to meet other partners and discuss roles.	Yes	25.08.2023	No	N/A	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Planning	We could have done with another hour for the first part of the exercise (Tabletop) as this was an ideal opportunity to learn from partners.	Yes	25.08.2023	Yes	This will be considered during the planning for future exercises.	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Training	Entry Control Officer needs to be in the clean area (working in the dirty area without PPE is a bad idea).	Yes	25.08.2023	Yes	This will be built into training and exercises.	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Training	There needs to be a clear clean/dirty line that separates PPE and non-PPE areas.	Yes	25.08.2023	Yes	Ensure areas have clear demarkation using tape/ staff in PPE	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Training	Staff from ED need to be supervising the waiting patients before they are decontaminated. This is for welfare and clinical deterioration purposes.	Yes	25.08.2023	Yes	This will be built into training and exercises.	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Training	Patients need to be disrobed asap and not stand around in contaminated clothing.	Yes	25.08.2023	Yes	This will be built into training and exercises.	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	CBRNE	Patient flow needs to be followed through from initial arrival to entry to the ED or discharge. How are we tracking the patients?	Yes	25.08.2023	Yes	Patient tracking to be built into the Major Incident Plan and the CBRN Plan	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Situational Awareness	This could have done with having more rounds to represent a developing situation.	Yes	25.08.2023	Yes	This will be considered during the planning for future exercises.	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Situational Awareness	Some elements of feedback to other agencies would be good. E.g., requests for humanitarian support to non nhs venues.	Yes	25.08.2023	Yes	This will be considered during the planning for future exercises.	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Planning	Lots of waiting round and the start, then queue to register at event start.	Yes	25.08.2023	Yes	This will be considered during the planning for future exercises.	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	CBRNE	Decontamination of non-ambulatory patients' needs to be investigated.	Yes	25.08.2023	Yes	Working with WMAS to understand how we can address this.	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	CBRNE	Clarification should be sought from NHSE as to the scope of the ED decon facility. Is it designed for a couple of self-presenters or for mass decon of 40+ people? If NHSE expect mass decon, then ED does not have the facilities to conduct mass decon and a significant uplift in equipment and personnel is required.	No		Yes		No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	CBRNE	Veolia witnessed the test dirty of water decant method.	Yes	25.08.2023	No		No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	CBRNE	Provide suitable lockable wheeled container for bagged dirty clothes.	No		Yes		Yes	

Internal	Exercise Waste Side	04.07.2023	CBRNE	CBRNE	Provide coloured number coded wristbands for dirty patients then after shower swap for new colour and retain all wristbands log all details.	No		Yes		Yes	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Communications	Restrict press and mobile phone taking in the Decon area. Place additional security on main roadside hospital entrance. Identify suitable area for witness statements to be taken from patients.	Yes	25.08.2023	Yes	To be included in the Major Incident Plan and CBRN Plan Action Cards	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Planning	Provide clean side modesty tent and think about a tent waiting area. Contact voluntary group (Perhaps salvation army) clean people have no money or belongings for teas sandwiches etc.	Yes	25.08.2023	Yes	Work with Local Authorities and the CVS sector to build these arrangements into the plans.	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	CBRNE	Provide minor first aid wound pads to be self-applied by dirty side. Names addresses of patients to be taken immediately entering dirty queue so they can be traced if wander off etc.	Yes	25.08.2023	Yes	To be included in the Major Incident Plan and CBRN Plan Action Cards	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	CBRNE	Provide whistle to team leader for emergency evac etc. Provide wheelchairs for frail / weak patients. Check exterior lighting for midwinter use, also are spotlights needed or intrinsically safe torches for tent use.	Yes	25.08.2023	Yes	Whisltes have been purchased. Wheelchairs are available in ED. Lighting will be checked in the dark.	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Training	Decon suits to be worn in dirty areas at all times. Provide adequate footwear for clean patients. Clinically assess patients for queue priority.	Yes	25.08.2023	Yes	To be included in the Major Incident Plan and CBRN Plan Action Cards	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Training	Move contaminated people line away from clean side and hospital entrance. Person with stopwatch was in dirty area with no Decon suit first half of exercise, provide suit.	Yes	25.08.2023	Yes	To be included in future training and exercises.	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Training	Need to consider how to move patients who cannot walk. If Ferno board, remember that we say 6 to lift - this would be 6 to carry - so that may change numbers of staff required. This needs to be drilled, in PPE.	Yes	25.08.2023	Yes	To be included in future training and exercises.	Yes	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Planning	A good all-round exercise that highlighted potential issues that may need to be addressed. People exiting the clean side of the tent could be non-clothed and a modesty tent would need to be installed. People waiting to be decontaminated were down wind of the people ahead so the potential for further contamination was increased, test wind conditions and position people wind side on.	Yes	25.08.2023	Yes	To be included in future training and exercises.	No	
Internal	Exercise Waste Side	04.07.2023	CBRNE	Training	Ensure staff across SaTH, more broadly, are fully informed of upcoming Ex and able to contribute/send representation.	Yes	25.08.2023	Yes	To be included in future training and exercises.	No	
Internal	W&C's Generator Failure	14.03.2023	Business Continuity	Learning	Share learning and ensure all divisions undertake a planning session for the same scenario.	Yes	29.03.2023	Yes	Complete- Post Incident report shared.	No	
Internal	W&C's Generator Failure	14.03.2023	Business Continuity	Communications	EJB to work with Paul Corbett to develop a solution/ method for contacting Exec's in the event of a Major, Critical, Business continuity incident requiring escalation and exec input.	Yes	29.03.2023	Yes	Complete- consider using the new Genysys system.	No	
Internal	W&C's Generator Failure	14.03.2023	Business Continuity	Communications	Consider early comms messages for staff members to prevent rumours and the need to reactively myth bust.	Yes	29.03.2023	Yes	Complete- Comms Team will be co-opted onto the IMT from the first meeting.	No	
Internal	W&C's Generator Failure	14.03.2023	Business Continuity	Communications	Ensure lines of communication and escalation are clear more robust from corporate teams to clinical teams and up the chain of command.	Yes	29.03.2023	Yes	Complete- Comms Team will be co-opted onto the IMT from the first meeting.	No	
Internal	W&C's Generator Failure	14.03.2023	Business Continuity	Communications	The WAC teams were made aware when a member of the Estates Team wrote a note for an engineer on the whiteboard, briefed one of the nurses. They need to ask to speak to the NIC/ Ward Manager in order for them to escalate upwards via the Division/ Corporately as necessary.	Yes	29.03.2023	Yes	To be incuded in future training and exercises.	No	

Internal	W&C's Generator Failure	14.03.2023	Business Continuity	Communications	Ensure comms are circulated sensitively to teams to prevent any inaccurate and informal sharing of information.	Yes	29.03.2023	Yes	Complete- Comms Team will be co-opted onto the IMT from the first meeting.	No
Internal	W&C's Generator Failure	14.03.2023	Business Continuity	Equipment	Work with Estates to understand the risk to the rest of the PRH site should any of the other generators fail in a similar way in future and ensure local BCP's consider this scenario.	Yes	29.03.2023	Yes	Complete- all BC leads have been tasked with reviewing their plans for this type of scenario.	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Action Cards	Additional Speciality Consultants and Jnr Dr's Cover supported with Discharges over the weekend	Yes	Continual	No		No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Planning	Arrange for Speciality in reach in to ED's	Yes	Continual	Yes	Added as an action to the Escalation Policy	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Planning	Development of back up rota's in the event of last minute absence/ staffing shortfalls	No	Continual	Yes		No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Command	Activate ICC with SMOC and EOC presence if necessary over the next BH Weekends	Yes	Continual	Yes	SMOC's and EOC are aware that they may need to establish an ICC OOH and are invited to attend Command Post Training.	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Planning	Additional GP appointments over the BH weekend may have supported front door attendance- request that this continues.	Yes	Continual	Yes	To be addressed by the ICS.	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Mutual Aid	Local Authority Social Care Support over the weekend supported with complex discharges	Yes	Continual	Yes	To be addressed by the ICS.	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Command	Roles of people in ICC/ Control room need to be established in the event of a Critical Incident. They need a clear purpose with Action Cards and clear expectations which will add value to the response.	No	Continual	Yes	To be included in the Escalation Policy	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Command	Expectations of attendance on site need to be clear at EMS Level 4 and when a Critical Incident has been declared - EOC's/ SMOC's/ ICC Staff.	Yes	Continual	Yes	This is regularly raised with EOC's and SMOC's	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Mitigation	Longer term, there isn't a funded service for Pharmacy on a Sunday and this would be a challenge to staff at the moment	Yes	Continual	Yes	There currenlty is not the available workforce to facilitate this.	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Planning	Replicate the effective actions undertaken during the Jubilee and Long May BH Weekend.	Yes	Continual	Yes	This has been actioned.	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Command	Rhythm of the day needs to be established and clearly communicated.	Yes	Continual	Yes	This is considered at the morning handover meeting at 08:30 each morning.	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Situational Awareness	Automatic method/ system for 12 hour breaches.	Yes	Continual	Yes	12 hour breaches are being captured by the Flo-Co's and the implementation of Careflow/Pas may support automation.	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Planning	Ensure standard work/ questions/ tasks are in place when staff are expected to be on site.	No	Continual	Yes		No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Mitigation	Pharmacy support- outstanding FFA's, perhaps these could be done in advance.	Yes	Continual	Yes	Process in place to carry this out has been developed.	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Business Continuity	Medical Staffing OOH to be considered.	No	Continual	Yes		No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Patient Tracking	Working with CSSD teams, prioritise patients against available capacity.	Yes	Continual	Yes	Therapies trams have developed a process with wards to ensure that patients are priortised in line with discharge planning.	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Mitigation	Criteria Led Discharges- Wards and CSM's need to be aware that this has been implemented and the trust needs to have appropriate logistics in place to manage this.	Yes	Continual	Yes	Complete	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Mitigation	Ensure "pink forms" for criteria led discharge are available and placed in the front of pts. notes.	Yes	Continual	Yes	Complete	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Communications	The technology for the above is in place and awareness/ usability/ accessibility needs to be addressed. Needs to be in an aide memoir/ communicated to relevant staff.	Yes	Continual	Yes	Complete	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Planning	Link with nearby community pharmacies to support with medication over Bank Holiday Weekends	Yes	Continual	Yes	Complete	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Situational Awareness	Request that EZEC join the weekend meetings and liaise re. discharge lists.	Yes	Continual	Yes	EXEC join the weekend calls.	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Situational Awareness	Access to the EZEC APP- add to SMOC training and CSM training- they can support with "making people ready" quickly.	Yes	Continual	Yes	To be raised at the Monthly SMOC meeting	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Communications	Ensure communications regarding contingency arrangements for the Snowdrop Room are circulated to W&C/ W&C on Call/ CSM's/ SMOC's etc.	Yes	Continual	Yes	Complete, comms has been circulated.	No
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Planning	CJ Williams arrangements re. transportation of the deceased between sites to be included in BH Weekend Plans.	Yes	Continual	Yes	Complete, arrangements were included.	No

Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Planning	Ensure correct transport is booked for patients. Family first, taxi, EZEC etc.	Yes	Continual	Yes	Complete, ongoing standard process.	No	
Internal	SaTH Critical Incident Post Easter Review	09.05.2023-12.05.2023	Critical Incident Declared	Communications	Ensure EZEC's retrospective emails detail clear and accurate rationale for failed transport.	Yes	Continual	Yes	Complete, correspondance outlines reasons for failed transports.	No	
Internal	IT Outage	30.05.2023	Business Continuity	Communications	Review alerting process via telecoms. Alert to Telecoms Red Phone which should trigger an escalation phone call to the IT on-call support team	Yes	25.06.2023	Yes		No	
Internal	IT Outage	30.05.2023	Business Continuity	Communications	On-call team need the door code to the Medical Records corridor as this delayed access to the Data Centre.	Yes	25.06.2023	Yes	On call Estates Team have the codes to all of the doors. The process would be for the SMOC's to contact them for access OOH.	No	
Internal	IT Outage	30.05.2023	Business Continuity	Communications	Infrastructure team to review pro-active alerting mechanisms through solutions we already have in place	Yes	25.06.2023	Yes	Complete	No	
Internal	IT Outage	30.05.2023	Business Continuity	Planning	Infrastructure team need to review cold start up procedures for all servers. Especially Pathology Telepath, Radiology CRIS and AGFA PACS.	No	25.06.2023	Yes	Will be carried out in line with planned maintenance programme.	No	
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Learning	Role of the SCC/SPOC at the ICB to be better understood. At present this isn't manned over the weekend. SaTH to understand how the providers communicate/ escalate out of office hours as SaTH can't contact NHSE directly with the advent of the ICB becoming a Cat 1 responder under the CCA from July 2022.	Yes	25.08.2023	Yes	Regular meetings held with the ICS and the SCC SCC is now staffed over the weekend. Alerting/ reporting arrangements have been rehearsed and are embedded.	No	
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Planning	Check interdependencies/ assumptions/ relocation plans and impacts across Divisions with all BCP's.	Yes	25.08.2023	Yes	Tested in line with Fire Evacuation arrangements.	No	
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Planning	BCP's to consider impact on other services and to ensure other divisions are aware of plans to utilise other spaces.	Yes	25.08.2023	Yes	To be developed as part of a Tactical Level Plan	No	
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Mitigation	Continue to develop the principles of the Learning passport- using midwives to support other trusts when our services were closed.	Yes	25.08.2023	Yes	This is an ongoing piece of work.	No	
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Command	Representation at meetings/ IMT's needs to be clear. With clear rationale for attendance at these meetings. Contradictions re. attendance, requested clinical attendance over the weekend but then subsequently asked to leave as the DON/ MD weren't on call.	Yes	25.08.2023	Yes	Attendance at IMT's, depending on the Incident Level to be agreed and formalised and included in response plans.	No	
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Situational Awareness	In the event of future incidents, ensure there is clarity from NHSE and the ICB in terms of Sitreps & submissions- there was a lot of cross over/ duplication.	Yes	25.08.2023	Yes	The trust continues to work closely with the ICS and NSHE to ensure reporting arrangments are clear.	No	
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Communications	ICS role in communications with other trusts needs to be clearer in the event of Major/ Critical/ Business Continuity Incidents.	Yes	25.08.2023	Yes	ICS to incorporate into their plans which should then be shared with provider organisations.	No	
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Learning	Learning from this incident and the incident in March 2023 to be shared/ embedded through the debrief report/ recommendations.	Yes	25.08.2023	Yes	Learning is shared at all Business Continuity and Evacuation and Shelter Training.	No	
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Logging	Executive to release staff to train as loggists.	Yes	25.08.2023	Yes	Ongoing	No	
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Situational Awareness	In the event of future incidents, ensure that the trust notifies health watch and updates the DoS.	Yes	25.08.2023	Yes	To be built into the action cards in the Major Incident and Business Continuity Plan(s).	No	
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Planning	Develop an activation check list for Major/ Critical/ BC Incidents outlining the steps to take including who to notify in particular circumstances. i.e. Clinical Networks/ ICB.	Yes	25.08.2023	Yes	To be built into the action cards in the Major Incident and Business Continuity Plan(s).	No	
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Logging	Arrange Loggist Training for the SMOC's.	Yes	25.08.2023	Yes	Loggist training sessions are available to book on LMS.	No	
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Patient Tracking	Co-ordination of patient diversions/transfers and capacity to be clarified.	Yes	25.08.2023	Yes	The ICS to incorporate this into their plans and share with Provider Organisations.	No	
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Communications	Work with the Telecomms Team to ensure the Trust has robust methods of contacting each other.	Yes	25.08.2023	Yes	The trust has a small stock of Wi-Fi phones available.	No	
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Planning	Offer the opportunity for partners to work with SaTH in peacetime to develop the Trust and System preparedness via training and exercising opportunities.	Yes	25.08.2023	Yes	Partner organisations have been and continue to be invited to EPRR Training and Exercises.	No	
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Planning	Business continuity plans to be embedded and signed off through clear governance structures.	Yes	25.08.2023	Yes	A revised governance process for EPRR has now been implemented.	No	
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Logging	Templates (SBAR's, sitreps) to be added to the SMOC folder and ensure SMOC's are trained to use them.	Yes	25.08.2023	Yes	Complete	No	

Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Communications	Handing over protracted incidents over the weekends and during the week needs to be more robust.	Yes	25.08.2023	Yes	Clear handover arrangements and template is available for on call teams, although it was still felt that there is some merit in continuity/ consitence.	No		
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Command	Command, Control and Communication structures need to be developed, tested and trained since the inception of the ICB's.	Yes	25.08.2023	Yes	To be developed by the ICS and shared with Provider Organisations.	No		
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Training	Arrange system wide planning/ training and exercising to understand system/ regional planning assumptions and escalation, command, control and communications arrangements.	Yes	25.08.2023	Yes	To be developed by the ICS and shared with Provider Organisations.	No		
Internal	W&C's Generator Failure	16.06.2023	Critical Incident Declared	Business Continuity	Arrange more frequent Business Continuity, Critical and Major Incident training and exercising	Yes	25.08.2023	Yes	Training and Exercising programme for 2023/24 is in development	No		
Internal	Lockdown PRH	11.07.2023	Lockdown	Training	All to familiarise themselves and their teams with the Lockdown Policy.	No		Yes		No		
Internal	Lockdown PRH	11.07.2023	Lockdown	Training	All departments to ensure their doors are closed and locked in the event of a lockdown.	Yes	25.08.2023	Yes	Included in Lockdown training	No		
Internal	Lockdown PRH	11.07.2023	Lockdown	Communications	Work with WMP to look at the ESS System as part of the Resilient Telecomms workstream	No	25.08.2023	Yes		No		
Internal	Lockdown PRH	11.07.2023	Lockdown	Communications	Consider automated alert system.	Yes	25.08.2023	Yes	LRF have invested in Genysys which the trust should eb able to use.	No		
Internal	Lockdown PRH	11.07.2023	Lockdown	Training	Cascade for Lockdown and Major Incident to be rehearsed and tested more frequently.	Yes	25.08.2023	Yes	To be included as part of the 6 monthly comms test.	No		
Internal	Lockdown PRH	11.07.2023	Lockdown	Equipment	Invest in radio comms at both sites	No	25.08.2023	Yes		No		
Internal	Lockdown PRH	11.07.2023	Lockdown	Command	Less is more in terms of command and control- 1 commander. Align the principles of subsidiarity as per the MI Policy into the Lockdown Policy.	Yes	25.08.2023	Yes	EOC's will be attending MAGIC and MAGIC Lite courses.	No		
Internal	Lockdown PRH	11.07.2023	Lockdown	Planning	Clear action cards in the Lockdown Policy with responsibilities allocated to roles.	Yes	25.08.2023	Yes	In progress	No		
Internal	Lockdown PRH	11.07.2023	Lockdown	Training	Awareness raising/ training sessions for Switchboard for Lockdown/ Major/ Critical Incident cascades	Yes	25.08.2023	Yes	To be included as part of the 6 monthly comms test.	No		
Internal	Lockdown PRH	11.07.2023	Lockdown	Communications	Can Switch group alerts to all bleeps in the event of Lockdown/ Major/ Critical Incidents?	Yes	25.08.2023	Yes	To be included as part of the 6 monthly comms test.	No		
Internal	Lockdown PRH	11.07.2023	Lockdown	Communications	Paul Corbett to undertake a RCA to understand why not all bleeps were contacted.	No	25.08.2023	Yes		No		
Internal	Lockdown PRH	11.07.2023	Lockdown	Communications	Ensure the opposite site have been made aware of Lockdown status.	Yes	25.08.2023	Yes	To be incuded in the Lockdown Policy.	No		
Internal	Lockdown PRH	11.07.2023	Lockdown	Planning	Plan in place for porters to lock down W&C's entrance as part of the lockdown plan.	Yes	25.08.2023	Yes	Porters have been made aware.	No		
Internal	Hollinswood House Evacuation Exercise	05.11.2023	Evacuation and Shelter	Training	Further and regular evacuation chair training required for teams.	No	N/A	Yes		No		
Internal	Hollinswood House Evacuation Exercise	05.11.2023	Evacuation and Shelter	Planning	Succint action card to be developed for the NIC/ Evacuation co-ordinator	No	N/A	Yes		No		
Internal	Hollinswood House Evacuation Exercise	05.11.2023	Evacuation and Shelter	Exercising	During future exercises, deploy a smoke generator to allow staff to rehearse in a more realistic environment	No	N/A	Yes		No		
Internal	Hollinswood House Evacuation Exercise	05.11.2023	Evacuation and Shelter	Training	Arrange for the team to have an emergency mobile/ mobiles and radio's	No	N/A	Yes		No		
Internal	Hollinswood House Evacuation Exercise	05.11.2023	Evacuation and Shelter	Equipment	Procure Hi-Vis Jackets with roles identified on the back.	No	N/A	Yes		No		
Internal	Pathology Flood	13.10.2023	Critical Incident Declared	Access	There were issues with access to the On Call folder on the X Drive.	Yes	17.11.2023	Yes	Call logged with IT	No		
Internal	Pathology Flood	13.10.2023	Critical Incident Declared	Welfare	Night shift teams to be provided with an opportunity to debrief and diffuse before they leave home from their shifts	No		Yes		No		
Internal	Pathology Flood	13.10.2023	Critical Incident Declared	Reporting	Align IRP requirements across the system and with NHSE in terms of SBAR submissions (within 1 hour of the declaration).	Yes	17.11.2023	Yes	Ensure SMOC's and EOC's are aware of the alerting and reporting requirements and the need to log any decision making/ rationale in the event that either are delayed as a result of responding to the incident.	No		
Internal	Pathology Flood	13.10.2023	Critical Incident Declared	Reporting	Consider delaying declaring an incident until the trust is in a position to submit Sitreps/ SBAR's. EOC and SMOC were busy dealing with the incident on site and wouldn't have had capacity/ time to complete the paperwork required by NHSE.	Yes	17.11.2023	Yes	Ensure SMOC's and EOC's are aware of the alerting and reporting requirements and the need to log any decision making/ rationale in the event that either are delayed as a result of responding to the incident.	No		
Internal	Pathology Flood	13.10.2023	Critical Incident Declared	Reporting	Re-iterate the contact details for NHSE 1st on call as a contingency in case the ICB on all aren't able to notify them. The phone number is in the SMOC slides on the X Drive.	Yes	17.11.2023	Yes	This is re-iterated in training, monthly SMOC meetings and weekend handover meetings.	No		

Internal	Pathology Flood	13.10.2023	Critical Incident Declared	Reporting	Unless the trust is explicitly requesting support from other trusts/ the system/ NHSE, the trust may consider submitting a request that reporting can be delayed.	Yes	17.11.2023	Yes	Ensure SMOC's and EOC's are aware of the alerting and reporting requirements and the need to log any decision making/ rationale in the event that either are delayed as a result of responding to the incident.	No
Internal	Pathology Flood	13.10.2023	Critical Incident Declared	Learning	Establish a method of dealing with the administration processes required in the event of an incident (logging/ reporting etc) whilst balancing the potential forensic interpretation of our records.	Yes	17.11.2023	Yes	SMOC's have access to the list of trained loggists, although OOH, they have no obligation to support. The SMOC's have a Whattsapp group to be able to call additional SMOC supoprt in should they require it.	No
Internal	Pathology Flood	13.10.2023	Critical Incident Declared	Communications	Wider communications/ alerting system to be considered/ implemented.	Yes	17.11.2023	Yes	Engaging with the comms team to further develop Crisis Communications Plan.	No
Internal	Pathology Flood	13.10.2023	Critical Incident Declared	Communications	Open and transparent communications early on with all staff. Official lines to be taken.	Yes	17.11.2023	Yes	Engaging with the comms team to further develop Crisis Communications Plan.	No
Internal	Pathology Flood	13.10.2023	Critical Incident Declared	Welfare	Explore support for teams with workforce colleagues.	Yes	17.11.2023	Yes	There are welfare support tools/ contact details on the Intranet. Staff are aware of how to access these resources.	No
Internal	Pathology Flood	13.10.2023	Critical Incident Declared	Welfare	Anna/ Angus/ Liz to brief teams for reassurance/ closure of the incident.	Yes	17.11.2023	Yes	Complete	No
Internal	Pathology Flood	13.10.2023	Critical Incident Declared	Equipment	Consider safety clothing (wellies/ hi vis etc.) for on call staff.	No		Yes		Yes
Internal	Pathology Flood	13.10.2023	Critical Incident Declared	Communications	Red phone to be installed in Pathology.	No		Yes		Yes
Internal	Pathology Flood	13.10.2023	Critical Incident Declared	Communications	Consider adding a pre-recorded message be added to the Pathology phones/ divert to one phone in the event of periods of pressure and during incidents etc.	No	17.11.2023	Yes		No
Internal	RAAC Exercise	16.11.2023	Evacuation and Shelter	Patient Tracking	System wide exercise of the patient cell Barry Moss discussed. (PDEC) as it doesn't interact well with Smart evac tools	No	12.12.2024	Yes		No
Internal	RAAC Exercise	16.11.2023	Evacuation and Shelter	Command	Consider membership and activation of a RAAC response team	Yes	12.12.2024	Yes	Complete	No
Internal	RAAC Exercise	16.11.2023	Evacuation and Shelter	Alerting	Fire service/ automated alarms and alerts re location of RAAC- actions to take as if the fire alarm is the method of alerting, the fire marshals will deploy to an unsafe area.	Yes	12.12.2024	Yes	Complete	No
Internal	RAAC Exercise	16.11.2023	Evacuation and Shelter	Training	Training re. RAAC response required for CSM's, Fire Wardens, Porters etc.	No	12.12.2024	Yes	To be carried out in Q4 2024/25	Yes
Internal	RAAC Exercise	16.11.2023	Evacuation and Shelter	Training	Develop a script for Switchboard in the event of a failure to enable them to call in the RAAC response team.	Yes	12.12.2024	Yes	Complete	No
Internal	RAAC Exercise	16.11.2023	Evacuation and Shelter	Mitigation	Establish whether there is any CCTV in the vicinity of the RAAC, if not consider whether to install and ensure this is monitored 24/7	Yes	12.12.2024	No	There are robust inspection regimes in place.	No
Internal	RAAC Exercise	16.11.2023	Evacuation and Shelter	Communications	Ensure partners who share/ co-locate (i.e LA's/ Virtual Ward etc.) on site are made aware in the event of an incident.	Yes	12.12.2024	Yes	Complete: Sub Acute wards have been made aware and EPRR Counterparts have been made aware to notify their teams.	No
Internal	RAAC Exercise	16.11.2023	Evacuation and Shelter	Situational Awareness	Arrange for SMOC's to attend discrete site visits of the affected areas.	Yes	12.12.2024	Yes	To be carried out in Q4 2024/25	No
Internal	RAAC Exercise	16.11.2023	Evacuation and Shelter	Situational Awareness	Arrange for the site plans of the affected area to be placed in the fire boxes.	Yes	12.12.2024	Yes	Complete	No
Internal	RAAC Exercise	16.11.2023	Evacuation and Shelter	Communications	Great session. Good mix of skills and knowledge within the room	No		No	N/A	No
Internal	Vitals Planned Upgrade	21.11.2023	Planned Downtime	Mitigation	BCP packs to be made available on wards/ in CSM office for IT outages (paper back up forms etc.)	Yes	06.01.2024	Yes	Complete	No
Internal	Vitals Planned Upgrade	21.11.2023	Planned Downtime	Business Continuity	Add BC checks to exemplar	Yes	06.01.2024	Yes	Complete	No
Internal	Vitals Planned Upgrade	21.11.2023	Planned Downtime	Planning	NEWS charts need to be printed in colour, there wasn't enough access to printing and printing took time.	Yes	06.01.2024	Yes	Complete	No
Internal	Vitals Planned Upgrade	21.11.2023	Planned Downtime	Exercising	Rehearse the use of paper charts.	Yes	06.01.2024	Yes	Complete as part of Careflow Cutover and other planned Vitals downtime,	No
Internal	Vitals Planned Upgrade	21.11.2023	Planned Downtime	Planning	Trust wide SOP for manual obs/ completion of NEWS forms.	Yes	06.01.2024	Yes	Complete and on Intranet	No
Internal	Vitals Planned Upgrade	21.11.2023	Planned Downtime	Alerting	Need to know who to escalate deteriorating patients to, when and how without vitals.	Yes	06.01.2024	Yes	As per SOP referenced above	No
Internal	Vitals Planned Upgrade	21.11.2023	Planned Downtime	Reporting	Ensure someone is responsible for updating and ensuring sufficient paper based workarounds are in place.	Yes	06.01.2024	Yes	To be tested regularly	No
Internal	Vitals Planned Upgrade	21.11.2023	Planned Downtime	Planning	Plan for mitigation works in peacetime i.e loss of printers and other systems, mutual aid arrangements, radio comms, contingency and workarounds.	Yes	06.01.2024	Yes	In place in line with Business Continuity Plans	No

Internal	Vitals Planned Upgrade	21.11.2023	Planned Downtime	Training	Ensure all on call teams are trained and aware of contingency arrangements and mitigations in the event of an IT outage.	Yes	06.01.2024	Yes	SMOC's breiefed at monthly meetings, this was an agenda item. Action for HoC and EPRR Lead to add to On Call handbook.	No
Internal	Vitals Planned Upgrade	21.11.2023	Planned Downtime	Situational Awareness	Consider triggers and actions for activating an Incident/ putting incident on stand-by in the event of an IT outage (would we know it was a cyber incident straight away- no?)	Yes	06.01.2024	Yes	Teams are familiar with Escalation and SBAR Reporting procedures.	No
Internal	Vitals Planned Upgrade	21.11.2023	Planned Downtime	Planning	Replenish stocks from LG Davies to the wards for Vitals paperwork	Yes	06.01.2024	Yes	Complete	No
Internal	Vitals Planned Upgrade	21.11.2023	Planned Downtime	Planning	Actions to follow when a patient scores/ algorithm to follow to be printed off on large posters when Vitals goes down.	Yes	06.01.2024	Yes	Complete	No
Internal	Vitals Planned Upgrade	21.11.2023	Planned Downtime	Communications	Some area's were reluctant to move back to the electronic system once they were working on paper.	Yes	06.01.2024	No	N/A	No
Internal	Vitals Planned Upgrade	21.11.2023	Planned Downtime	Communications	Comms to be strengthened going forward, who should outages be signed off by and with unplanned outages, how can we best communicate this across the trust?	Yes	06.01.2024	Yes	Comms team are able to quickly share urgent messages to teams.	No
Internal	Vitals Planned Upgrade	21.11.2023	Planned Downtime	Exercising	BCP Box files to be made available which should be updated regularly and tested regularly on the wards.	Yes	06.01.2024	Yes	Being rolled out as part of EPRR Ward Champion work	No
Internal	Vitals Planned Upgrade	21.11.2023	Planned Downtime	Exercising	More training on the wards for Business Continuity to be made available for IT outages and other scenarios as well.	Yes	25.05.2024	Yes	Rehearsed during EPR Cutover, to be embedded into next years training programme	No
Internal	Vitals Planned Upgrade	21.11.2023	Planned Downtime	Situational Awareness	BC boxes to be held centrally and handed/ signed out to wards.	Yes	06.01.2024	Yes	Being rolled out as part of EPRR Ward Champion work	No
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Planning	CI Actions vs Recovery period to be defined in the Escalation Plan.	Yes	09.03.2024	Yes	Complete	No
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Planning	Consider staffing models for CI/ L4 and the costing associated with this.	Yes	09.03.2024	Yes	Enhanced staffing model is in place, CSSD are reliant on voluntary commitment during CI. Review Staffing models- to be added to action cards.	No
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation		Review HF Policy re. corridor vs. "next patient" spaces to be reviewed.	Yes	09.03.2024	Yes	To be re- reviewed following further advice from Fire colleagues	No
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Patient Tracking	Consider whether the trust is admitting too many patients/ not discharging enough- consider the data in relation to CI/ Escalation Policy.	Yes	09.03.2024	Yes	To form part of the improvement work being undertaken in Medicine and Surgery	No
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Action Cards	Actions taken in L1, 2,3,4, CI Standby/ CI Declaration need to support de-escalation processes.	Yes	09.03.2024	Yes	CSSD have refreshed action cards to include additionality during CI and the role titles. MEC will complete this after the test of change week. Consultant on Call missing from V12- EJB to add to the policy. SB will speak to John Jones and feedback	No
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Communications	Divisional Leads to attend workshop on Wednesday/ send a representatives.	Yes	09.03.2024	Yes	Representatives from Medicine attended, the session was stood down.	No
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Action Cards	Action cards- to be prescriptive- what can we do to prevent CI/ reduce duration of CI to reduce CI fatigue.	Yes	09.03.2024	Yes	Action cards have been reviewed	No
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Situational Awareness	Consider whether the Trust needs to declare sooner (in the day/ week etc). Could be better linked to triggers/ actions.	Yes	09.03.2024	Yes	Triggers and actions have been reviewed.	No
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Command	Clear command and control arrangements for capacity CI to be developed.	Yes	09.03.2024	Yes	Principles of Command and Cotrol in line with JESIP have bee implemented	No
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Communications	Consider whether any further support from therapies for the acute wards to support with discharges is required.	Yes	09.03.2024	Yes	To be added to the Site Agenda when at L4. Triggers and criteria for declaration to be prescriptive- all triggers or some? Copy across from Hospital Full Policy- Karen Evans to circulate to SB for Sara to seek approval at Execs.	No
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Communications	Level 4 actions vs CI actions to be clear, and made at the right time and right place to de-escalate: action cards required for Execs/ Divisions/ Estates/ Facilities/ Nursing/ Medics.	Yes	09.03.2024	Yes	Clear and defined roles for the Incident Room to be defined. Formal Mutual Aid requested should be considered Therapies are scoping the Therapies W/F across 7 days and any additional W/F required.	No
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Command	Are the existing processes supporting the de-escalation of ED and If not, how can they be improved?	Yes	09.03.2024	Yes	Defined metric to be identified as part of Escalation Policy review.	Closed
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Action Cards	Visibility of actions to be clear from Divisions to feed into the action cards and accounted for during post incident review.	Yes	09.03.2024	Yes	Measure the impact of actions within the agreed metrics. Note and respond to escalations as they arise	Closed

Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Communications	Communication with Wards/ partners etc. when we are in CI- clear lines of communications and standardised lines to take. SB is meeting with JF et. al this week to discuss further.	Yes	09.03.2024	Yes	Best way of communicating with teams who don't have regular email access to be considered and addressed during declaration of incidents.	Closed	
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Communications	Review another local Trust when in live Critical Incident to identify learning.	Yes	09.03.2024	Yes	Liaise with UHNM re their CI response and plans. UHNM have Divisional Command Centres that feeds into the main ICC/ Site Meetings. UHNM hold twice daily Tactical Calls during CI Sara will speak to Ned at Walsall.	Closed	
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Communications	Critical Incident Posters/Display boards on wards to pop up when in incident.	Yes	09.03.2024	Yes	Lisa Marsden is developing this as part of a wider MI/ BC/ CI project.	Closed	
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Communications	5 min brief to be shared with all ward staff to highlight Incident Command Centre and its purpose.	Yes	09.03.2024	Yes	Best way of communicating with teams who don't have regular email access to be considered and addressed during declaration of incidents.	Closed	
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Training	Emergency Planning Champion on all wards/Depts to be CI trained and have tools required to hand	Yes	09.03.2024	Yes	Divisions to consider how teams outside of Divisions could support during CI (i.e facilities/ catering and other corporate services) to be included in the Escalation Policy.	Closed	
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Alerting	System Support- in planning and response, clear and visible support is required from system partners when a CI is declared.	Yes	09.03.2024	Yes	System wide Escalation Plan to be developed.	Open	
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Alerting	When SaTH declares, the trust needs to understand the additional support and resources available.	Yes	09.03.2024	Yes	System wide Escalation Plan to be developed.	Open	
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Business Continuity	When in CI, all 'cut-off times' should be scrapped.	Yes	09.03.2024	Yes	System wide Escalation Plan to be developed.	Open	
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Business Continuity	At the very least, Cut Off times should be extended late into the evening. Too often we have a failed discharge due to a Homes not accepting a patient after a fixed time.	Yes	09.03.2024	Yes	System wide Escalation Plan to be developed.	Open	
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Communications	IDT Action Card to be reviewed and circulated.	Yes	09.03.2024	Yes	Complete	Closed	
Internal	Critical Incident- Capacity	01.01.2024 and 22.01.2024	Surge and Escalation	Exercising	System Tabletop Exercise to take place	Yes	09.03.2024	Yes	System wide Escalation Plan and exercise to be developed.	Open	
Internal	RSH Blackstart Exercise	18.02.2024	Business Continuity Exercise	Situational Awareness	Further testing is taking place (31st March) in the new MRI Pod which is covered by full essential supply- potential to be the emergency MRI if unplanned loss of power happens - to be discussed	Yes	01.03.2024	Yes		Closed	
Internal	RSH Blackstart Exercise	18.02.2024	Business Continuity Exercise	Business Continuity	The main access control system is having a UPS upgrade (uninterrupted power system) which bridges the loss between mains power to generated power. A portable hard drive has also been purchased to manually backup data on a weekly basis which in the event of a similar issue occurring means the majority of cards will still be able to access doorways controlled by this system	Yes	01.03.2024	Yes		Closed	
Internal	RSH Blackstart Exercise	18.02.2024	Business Continuity Exercise	Exercising	For the next black start Estates will ensure our BMS (Building Management System) contractors are on-site. The comms issue experienced here is unique, comms was momentarily lost when power switched back to mains. We are still yet to understand the cause . The AHU was allocated to an Estates member of staff but a BMS specialist would have been looking over the networking and comms health.	Yes	01.03.2024	Yes		Closed	
Internal	RSH Blackstart Exercise	18.02.2024	Business Continuity Exercise	Business Continuity	Pharmacy are looking into improve the alarming notifications, this won't negate the 15 minutes critical downtime limit, but will help to enact cleaning processes so a reduced amount of downtime will be experienced in future.	Yes	01.03.2024	Yes		Closed	
Internal	RSH Blackstart Exercise	18.02.2024	Business Continuity Exercise	Communications	Aseptic comms relayed through an IT UPS supplied network switch. Estates are looking to potentially install a GSM unit which will text alert on power loss.	Yes	01.03.2024	Yes		Closed	

Internal	RSH Blackstart Exercise	18.02.2024	Business Continuity Exercise	Mitigation	TC manual reset is a safe process, but ideally this area should switch back to mains automatically. if we were to experience an uncontrolled power loss during the night, the rest of site will switch back to mains and the generators will not switch off until TC has been manually switched. Estates have sought quotes for modifying this system.	Yes	01.03.2024	Yes		Closed		
Internal	RSH Blackstart Exercise	18.02.2024	Business Continuity Exercise	Planning	13/3/24 IT Network Migration project should improve reliability due to volume of UPS being replaced.	Yes	01.03.2024	Yes		Closed		
Internal	RSH Blackstart Exercise	18.02.2024	Business Continuity Exercise	Communications	Ensure the Estates Team communicate that important medical equipment should be plugged into essential sockets and highlight how we identify essential and non essential sockets.	Yes	01.03.2024	Yes		Closed		
Internal	Critical Incident- Capacity	03.04.2024-05.04.2024	Critical Incident Declared	Business Continuity	How do radiology (particularly U/S) prioritise/ triage emergency lists from wards and ED during CI and during BAU.	No	06.06.2024	No	Needs to form part of standard processes	Closed		
Internal	Critical Incident- Capacity	03.04.2024-05.04.2024	Critical Incident Declared	Mitigation	Use pharmacy tracker to review updates on TTO's/ FP10's etc. rather than call first could reduce the time to discharge,	Yes	06.06.2024	Yes	Needs to form part of standard processes	Closed		
Internal	Critical Incident- Capacity	03.04.2024-05.04.2024	Critical Incident Declared	Welfare	Keep all admissions portals safe at all times.	Yes	06.06.2024	No	Needs to form part of standard processes	Closed		
Internal	Critical Incident- Capacity	03.04.2024-05.04.2024	Critical Incident Declared	Surge	Pull patients as beds become available- work to the 30 minute transfer	Yes	06.06.2024	No	Needs to form part of standard processes	Closed		
Internal	Critical Incident- Capacity	03.04.2024-05.04.2024	Critical Incident Declared	Surge	Protected mealtimes- patients can move with their meals.	Yes	06.06.2024	No	Needs to form part of standard processes	Closed		
Internal	Critical Incident- Capacity	03.04.2024-05.04.2024	Critical Incident Declared	Mitigation	Ward teams to spend some time with the Site Team (B6's and7's) for wards to understand the pressures on the site team and in ED's.	Yes	06.06.2024	Yes	Complete, B6's have been allocated shadow shifts with CSM's	Closed		
Internal	Call Out Cascade Exercise	03.06.2024	Communications	Training	EPRR team to provide Major Incident Training opportunities for Estates Colleagues.	Yes	03.06.2024	Yes	Te be arranged	Open		
Internal	Call Out Cascade Exercise	03.06.2025	Communications	Mitigation	Service contract with GRS to be established.	Yes	03.06.2025	Yes	In place for both sites	Closed		
Internal	Call Out Cascade Exercise	03.06.2026	Communications	Training	EPRR Team to ensure paper EPR packs are made available in ED	Yes	03.06.2026	Yes	In place	Closed		
Internal	Call Out Cascade Exercise	03.06.2027	Communications	Communications	Amend the script for Switchboard during exercises that take place during office hours.	Yes	03.06.2027	Yes	In place and SOP amended	Closed		
Internal	Call Out Cascade Exercise	03.06.2028	Communications	Equipment	More barriers/ cones to be made available to control crowds.	Yes	03.06.2028	Yes	To be ordered	Closed		
Internal	Critical Incident- Capacity	18.06.2024-16.06.2024	Surge and Escalation	Surge	MADE Event before the Industrial Action supported with flow in advance of the IA.	Yes	16.07.2024	Yes	To be considered during future periods of IA	Closed		
Internal	Critical Incident- Capacity	18.06.2024-16.06.2024	Surge and Escalation	Surge	Consider MADE events/ Pre Critical Incident Actions in advance of periods of IA/ planned disruptions etc.	Yes	16.07.2024	Yes	To be considered during future periods of IA	Closed		
Internal	Critical Incident- Capacity	18.06.2024-16.06.2024	Surge and Escalation	Surge	ICB to develop rules of engagement/ Terms of reference and clear agenda's for IA and IMT meetings.	Yes	16.07.2024	Yes	ICB to develop and socialise these documents	Closed		
Internal	Critical Incident- Capacity	18.06.2024-16.06.2024	Surge and Escalation	Surge	ICB to develop joined up escalation plans aligned to the OPEL framework.	Yes	16.07.2024	Yes	ICB to develop and socialise these documents	Closed		
Internal	Blackstart Exercise	28.05.2024	Business Continuity Exercise	Communications	Despite a robust Communications Plan in place, communications plan to be enhanced to ensure all teams are aware of any future planned Blackstart exercises.	Yes	16.07.2024	Yes	Communications and Business Continuity Plans to be reviewed and tested for no -notice interruptions.	Closed		
Internal	Blackstart Exercise	28.05.2024	Business Continuity Exercise	Command	Estates x1034 was the key number which hindered the ICC. If another mid week test happens, we will keep the x1034 number as the main number, filtering out non critical faults. We will increase number of Business support staff involved in ICC.	Yes	16.07.2024	No	In Place	Closed		
Internal	Blackstart Exercise	28.05.2024	Business Continuity Exercise	Communications	We would like to see Comms highlight Blackstart on a weekly basis leading up to the test, all departments need to know power to site will be switched off at the date and time, Estates highlight.	Yes	16.07.2024	Yes	Communications and Business Continuity Plans to be reviewed and tested for no -notice interruptions.	Closed		
Internal	Blackstart Exercise	28.05.2024	Business Continuity Exercise	Mitigation	The fault has been pinpointed to a phase failure relay - we have instructed our appointed HV AP to investigate further and replace any components that have failed in the system to prevent this from re-occurring again. This piece of work is still underway and not yet completed.	Yes	16.07.2024	Yes	Not complete	Open		
Internal	Blackstart Exercise	28.05.2024	Business Continuity Exercise	Communications	UPS to the Antenna that sits on ward block roof would provide some extended coverage.	Yes	16.07.2024	Yes	Conversations with telecoms manager has taken place to update our radio system, as all parts are obsolete.	Closed		
Internal	Blackstart Exercise	28.05.2024	Business Continuity Exercise	Mitigation	Decision made to leave crane up and to abandon the test if an air ambulance call was received - moving forwards - communications to improve inside the wider Estates team to prevent further pre planned work issues	Yes	16.07.2024	Yes	Helipad has temporarily re-located. Estates are investigating if possible, to change to essential supply to cranes when operating on site.	Closed		

Internal	Blackstart Exercise	28.05.2024	Business Continuity Exercise	Mitigation	Fit a small UPS to the system. Code has been shared for emergency callout situations and enable access to this area when required as first response. Specialist contractors were on site to resolve this issue, it could be battery voltages creating issue with the door controllers, they have temporarily removed the battery's to see if this fixes the issue, which we will test on the next standard generator test	Yes	16.07.2024	Yes	Complete	Closed
Internal	Blackstart Exercise	28.05.2024	Business Continuity Exercise	Learning	The test was positive, we found key areas of improvements that we can make, personally, Estates lead will no longer be based at the generator house (which is where we experienced the fire on first Blackstart test)	Yes	16.07.2024	Yes	Estates lead will be in the ICC and coordinating, prioritising which issue we respond to in which order	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Co-ordination	Dedicated lead support for areas for escalation and technical support	Yes	16.07.2024	No	In place as a result of EPR Cutover Weekend	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Business Continuity	Basic user guides for IT Systems to be available	Yes	16.07.2024	No	To be reviewed with Head of Information Governance & Data Protection	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Training	Ensure there is training available for all elements of the system to ensure there is no delay in functionality in advance of future system upgrades/ changes	Yes	16.07.2024	No	Training was made available, departments and Divisions to ensure, encourage, track and report team training compliance.	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Equipment	Log books were too weak when turning pages, binder to be used instead of tags for extra reinforcement	Yes	16.07.2024	Yes	Complete	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Communications	Phone lines - ICC phone numbers to be hidden in the background not published, this way they can be removed from the circuit once the Control room stands down and calls continue to be streamed to EPR teams	Yes	16.07.2024	Yes	Complete, all ICC Phone numbers are now on a "hunt group" and only x 1276 will be advertised.	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Training	Beneficial to identify individual training needs earlier on, who needs what training to make training schedules more targeted.	Yes	16.07.2024	Yes	Training Needs Analysis developed for people with key roles in incident response. This model will be followed for future planned events.	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Training	Training general awareness, dependent on ESR	Yes	16.07.2024	Yes	Role based access has now been implemented and those who require different/ enhanced access based on their roles has been resolved.	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Command	Level of control to be maintained ongoing	Yes	16.07.2024	Yes	Role based access has now been implemented and those who require different/ enhanced access based on their role. As people change roles, this will be monitored and RBAC amended as necessary.	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Business Continuity	Sticking to paper when it's the most practical and easiest means of reverting to BCP - spreadsheets didn't work well	Yes	16.07.2024	Yes	Situational awareness of the site position is still required. The spreadsheets worked well for the Clinical Site Team.	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Business Continuity	Having dedicated digital champions / super users that can also help users practically with the IT system	Yes	16.07.2024	Yes	To be considered for future digital projects.	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Reporting	Data entry on ED paperwork caused delays in roll out - Better quality data entry on paper forms to reduce delays	Yes	16.07.2024	Yes	Training to continue to ensure teams using the paper forms in the event of an IT outage are familiar with and aware of the importance of accurate data capture.	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Planning	Extra staffing resource	Yes	16.07.2024	Yes	Enable and encourage teams to be released to support with future planned IT projects/ Business Continuity Planned events.	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Business Continuity	Improvement in data entry checking process	Yes	16.07.2024	Yes	Ensure teams are familiar with the forms and that the ICC have a sample copy of a completed form and SOP to follow to ensure incomplete forms are returned for completion quickly.	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Business Continuity	Data quality checks to be based at the source	Yes	16.07.2024	Yes	Ensure teams are familiar with the forms and that the admission portals have a sample copy of a completed form and SOP to follow to ensure incomplete forms are returned for completion quickly.	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Reporting	National approval process, SaTH first organisation to go through this, achieved but with challenges	Yes	16.07.2024	Yes	Working with NHSE Digital and managing expectations to be replicated during future "go live" projects. SaTH to share the Trust learning and experiences with other Trusts.	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Welfare	Phasing and level of 3 week support has taken its toll on the digital teams and floor walkers. The trust needs to ensure we continue to progress and ensure staff have adequate rest breaks	Yes	16.07.2024	Yes	Robust rota's, rest breaks and welfare offer to be developed and adhered to.	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Business Continuity	Additional strategic issues ongoing within the trust, constant pressure on staff and divisions	Yes	16.07.2024	No		Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Training	Reliant on LMS reports for training compliance	Yes	16.07.2024	Yes	Ensure LMS records are kept up to date.	Closed

Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Learning	Understanding other planned work and expertise that can be called in, UHNM support with printing issues as example	Yes	16.07.2024	Yes	To be further developed as part of business continuity and Mutual Aid arrangements	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Mutual Aid	Further discussions with ICB in advance, more support and understanding from the system would have been beneficial	Yes	16.07.2024	Yes	Continue to maintain open, transparent and respectful interactions.	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Business Continuity	Understanding BAU work on the floor is still ongoing	Yes	16.07.2024	No		Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Reporting	Reporting, PTL was not in a position expected	Yes	16.07.2024	Yes		Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Planning	Have in advance the detail of what privileges staff have before trying to work out what is missing to undertake tasks.	Yes	16.07.2024	No		Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Access	Role based access control (RBAC) mis matches to what was agreed- still causing issues	Yes	16.07.2024	No	Resolved	Closed
Internal	Electronic Patient Record Cutover Weekend	19.04.2024-22.04.2024	Major Events	Business Continuity	Data quality process to be reviewed going forward	Yes	16.07.2024	Yes	Ensure teams are familiar with the forms and that the ICC have a sample copy of a completed form and SOP to follow to ensure incomplete forms are returned for completion quickly.	Closed
Internal	The Exercise Western- CBRN, CareFlow-Major Incident, and Countermeasures	15.08.2024	CBRN Exercise	Debriefing	System with pre-populated random numbers as per SEMA Helix to be adopted. Can a list be pre-developed- no, can IT speak to System C to action.	Yes	20.12.2024	Yes		Open
Internal	The Exercise Western- CBRN, CareFlow-Major Incident, and Countermeasures	15.08.2024	CBRN Exercise	Debriefing	Include in Action card for ED HCA or Responds Practitioner to match children to parents.	Yes	20.12.2024	Yes		Open
Internal	The Exercise Western- CBRN, CareFlow-Major Incident, and Countermeasures	15.08.2024	CBRN Exercise	Debriefing	Look at role allocations, need 2 x triage consultants, 2 x NIC's and Reception booking in. We need to get a MI number and labels as soon as the patient arrives so that they can be included on the whiteboard as soon as they arrive, they can then get wristbands and bloods etc.	Yes	20.12.2024	Yes		Open
Internal	The Exercise Western- CBRN, CareFlow-Major Incident, and Countermeasures	15.08.2024	CBRN Exercise	Debriefing	Get early flow and marking of patients. Keep the P1, P2, P3 cards pre-numbered to help record and report number to NHSE/ICB ASAP.	Yes	20.12.2024	Yes		Open
Internal	The Exercise Western- CBRN, CareFlow-Major Incident, and Countermeasures	15.08.2024	CBRN Exercise	Debriefing	Trust to decide which Triage Tool the trust is going to use - Andrew Horn to speak to consultant colleagues to make the decision. Have a toolbox of different triage tools and decide which tool in the event of an incident.	Yes	20.12.2024	Yes		Open
Internal	The Exercise Western- CBRN, CareFlow-Major Incident, and Countermeasures	15.08.2024	CBRN Exercise	Debriefing	All patients to be booked in as unknown in the event of a MI and the Receptionists (when they have time) will complete the other demographics.	Yes	20.12.2024	Yes		Open
Internal	The Exercise Western- CBRN, CareFlow-Major Incident, and Countermeasures	15.08.2024	CBRN Exercise	Debriefing	Someone within the ED triage team to be assigned to complete the MI Initial Triage Form in each area and ask reception to book the patients in and generate the MI number	Yes	20.12.2024	Yes		Open
Internal	The Exercise Western- CBRN, CareFlow-Major Incident, and Countermeasures	15.08.2024	CBRN Exercise	Debriefing	Generate BC numbers and excel spreadsheet for use in a Major Incident (as per careflow weekend) in the event of an IT outage. If care flow is not available and major incident happens at same time, this paper base in excel will be used.	Yes	20.12.2024	Yes		Open
Internal	Exercise Pioneer-Evacuation and shaelter of New ED	10.10.24	Evacuation and Shelter	Debriefing	Explore using ward mangers and nurse in charge to complete evacuation documents.	Yes	20.12.2024	Yes		open
Internal	Exercise Pioneer-Evacuation and shaelter of New ED	10.10.24	Evacuation and Shelter	Debriefing	Explain the decant process for ED to other areas in the event of evacuation. Have hurdles to discuss this as the footprint keeps changing.	Yes	20.12.2024	Yes		Open
Internal	Exercise Pioneer-Evacuation and shaelter of New ED	10.10.24	Evacuation and Shelter	Debriefing	Monthly training by security on Lockdown (Blacksmith) of different areas. Considering the fire safety risks, evacuation needs,	Yes	20.12.2024	Yes		Open
Internal	Exercise Pioneer-Evacuation and shaelter of New ED	10.10.24	Evacuation and Shelter	Debriefing	Include evacuation doc pack in Fire outlets	Yes	20.12.2024	Yes		Open
Internal	Exercise Pioneer-Evacuation and shaelter of New ED	10.10.24	Evacuation and Shelter	Debriefing	Include using what3word app in filling METHANE message.	Yes	20.12.2024	Yes		Open
Internal	Exercise Pioneer-Evacuation and shaelter of New ED	10.10.24	Evacuation and Shelter	Debriefing	Consider purchasing a SMART evacuation system	Yes	20.12.2024	Yes	had a service detail session with James from Smartmci Compay. A quote of £30,000 was shared to purchase the tools and resoources. The quote will be shared with STW system and the ICB to explore joint purchase	Open
Internal	Exercise Pioneer-Evacuation and shaelter of New ED	10.10.24	Evacuation and Shelter	Debriefing	Invite Fire/ambulance/HAART team/DUI/Casualty Bureau at bigger and live event.	Yes	20.12.2024	Yes		Open

							Yes		Yes			Open	
Internal	Exercise Pioneer-Evacuation and shaelter of New ED	10.10.24	Evacuation and Shelter	Debriefing				20.12.2024				Open	
Internal	Exercise Pioneer-Evacuation and shaelter of New ED	10.10.24	Evacuation and Shelter	Debriefing	Purchase WHITE Hi-Viz jacket for Sath incident commander	Yes		20.12.2024	Yes			Open	
Internal	Exercise Pioneer-Evacuation and shaelter of New ED	10.10.24	Evacuation and Shelter	Debriefing	Review the triggers and patient resident criteria for moving patients around. Evacuation strategies and knock-on effects.	Yes		20.12.2024	Yes			Open	