

Royal Hospital for Neuro-disability

A national medical charity Registered Charity No. 205907

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Date Ratified:	
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Policy Executive Owner:	Chief Operating Officer, RHN
Designation of Author:	Head Of Estates
Name of Committee/Group/Department	
Date Issued:	13/07/2017
Review Date:	
Target Audience:	All Staff
Other Linked Policies:	Policy for the Management of Medical Gas Pipeline and Cylinder Systems Fire Prevention Policy Health and Safety Policy Major Incident Plan Business Continuity Plan (in progress)
Key Words: (only required if it helps searching on intranet)	
Details of individuals or groups consulted	Acting Head of Estates, RHN RHN Site Supervisor, Wates Smartspace Head of Patient Safety and Quality, RHN Chief Operating Officer, RHN Head of Estates, RHN
Equality Assessment	Yes
Dissemination and Implementation	

1. Version Control Sheet

Version	Date	Author	Status	Comment
V0.2	21/03/2017	Interim Project Manager	Draft for feedback	Issue to: Site Supervisor, Wates Acting Head of Estates, RHN Chief Operating Officer, RHN
V0.3	30/03/2017	Interim Project Manager	Second draft incorporating technical and clinical feedback	Issue to: Site Supervisor, Wates Acting Head of Estates, RHN
V0.4	05/04/2017	Interim Project Manager	Final draft for feedback	Issue to: Head of Estates, RHN
V0.5	06/04/2017	Interim Project Manager	Insert ToC	
V1.0	13/07/2017	Head of Estates	Final pass prior to distribution	Incorporates Head of Estates feedback

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2. Introduction

This document is designed to provide first response guidance to the on-site Duty Manager in the event of an estates related major incident or non-clinical disruption, to ensure losses or down time are kept to a minimum.

This document is planned to support the call out process already in place to the Estates Specialist Service Provider, (Wates Smartspace Call Centre.) Where there is any doubt, seek guidance either from the Estates Specialist Service Provider or the RHN Estates Department:

RHN Head of Estates	X4524	or	07711 485176
Wates Smartspace Call Centre	X4528	or	0845 602 8297

Risk assessment is the most effective way to identify risks and plan the most efficient and effective mitigation, and is carried out regularly by the Estates Management Team as a part of their business as usual management process.

3. Objectives

The objective of this plan is to minimise loss and disruption in the event of a major incident to the estate infrastructure or utilities supplies at the Royal Hospital for Neuro-disability, (RHN.)

This document is designed to inform and act as an 'aide memoir', but is not intended to replace the comprehensive RHN Major Incident Plan.

It should be referenced in parallel to the RHN:

- Fire Prevention Policy
- Health and Safety Policy (pending approval)
- Management of Medical Gas Pipeline and Cylinder Systems Policy and Procedures
- Major Incident Plan
- Business Continuity Plan (in development)

For the purposes of this infrastructure focussed Disaster Recovery Plan, events identified as major incidents include:

- 1. Fire
- 2. Loss of electrical supply site specific and to the locality
- 3. Loss of gas supply or gas leak site specific and to the locality
- 4. Explosion or implosion
- 5. Flood
- 6. Loss of gas supply or gas leak
- 7. Loss of cylinder medical gas
- 8. Bomb/Toxin/Terror Threat
- 9. Failure of Patient Transport (RHN Ambulance fleet)
- 10. Water interruption

4. Major Incidents

4.1 Fire

This guidance should be read in conjunction with the RHN Fire Prevention Policy

During normal operational hours, (Monday – Friday, 0800-1630 hours,) RHN has a fire support team made up of Risk Management, Estates and Clinical Services members of staff. It is this team that will lead the 'seek and search' procedure, if the area of the fire alert cannot be confirmed at the main fire alarm panel adjacent to the North Door.

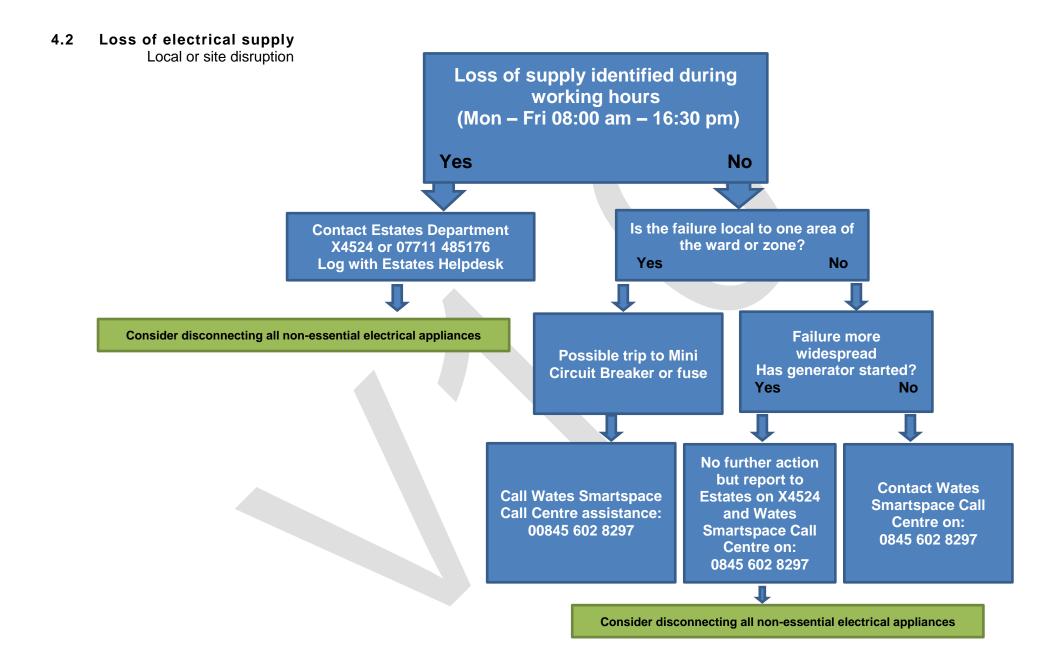
During normal operational hours, a 'delayed response' protocol has been implemented:

- 1. Fire alarm sounds
- 2. Fire Marshall(s) in affected zone(s) review local fire panel to identify location of activation
- 3. Fire Marshall confirms if alarm activation is genuine or false
- Fire Marshall has 5 minutes to confirm to RHN Switchboard whether activation is genuine or false
- If no message is received by RHN Switchboard and Alarm Monitoring Centre within the 5 minutes, London Fire Brigade will be called automatically by RHN Reception or Security and by the Alarm Monitoring Centre
- 6. RHN Reception or Security will log the activation and submit to RHN Estates Department, RHN Clinical Risk Management Department and RHN Facilities Department

When the fire alarm is activated <u>outside</u> working hours, (1630 – 0800 hours and all weekend,) the Fire Brigade is automatically called. A second 999 call must also be made by RHN Reception or Security

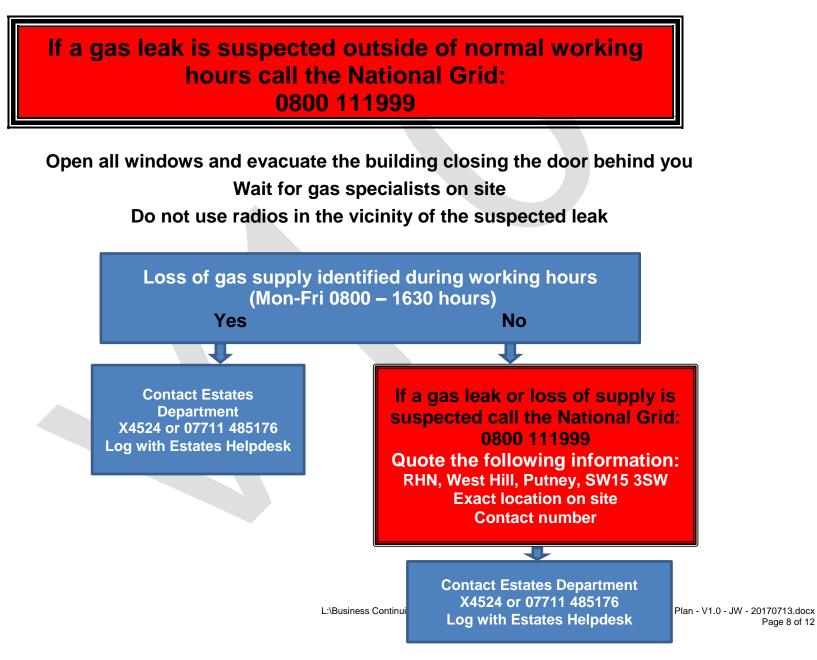
- 1. Initiate fire alarm system by breaking the glass in the nearest fire alarm call point
- 2. Assess the situation and attempt to contain the fire without causing undue risk to personnel, if you are trained to do so
- 3. If assessed as necessary, look to evacuate the local area. If the incident is adjacent to or on a ward, follow the evacuation procedures outlined for that specific ward
- 4. Ensure that all doors and windows are closed in the area
- 5. Ensure that the emergency services have been notified
- 6. Arrange for London Fire Brigade to be met at the North Door by a member of the Estates Department or the Wates Maintenance Team
- 7. Wait at your Assembly Point until London Fire Brigade have authorised a re-set of the fire alarm panel
- 8. Do not re-enter the building until the all clear has been given by London Fire Brigade





4.3 Loss of gas supply or gas leak

During normal working hours contact the estates department on extension 4524



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4.4 Explosion or Implosion

- Immediately cordon off area to prevent further access
- Assess the nature and extent of any damage *if it is safe to do so without putting yourself at further risk of harm*
- Contact the emergency services
- Contact the Estates Department on X4524 or 07711 485176
- Contact the On-call Manager on 07887 566017 (the On-call Manager will take the decision whether to contact the On-call Director)
- If the incident occurs out of hours, Contact the Head of Estates on 07711 485176

4.5 Flood or water ingress

Do not attempt to use electrical equipment until you are instructed it is safe to do so

During working hours

- Contact the Estates Department on X4524 or 07711 485176
- Log the incident on the electronic Estates Helpdesk
- Attempt to locate the nearest stop cock or valve to isolate whilst awaiting assistance

The Estates Department are in the process of producing floor plans for each Ward indicating the location of the stop cocks and valves. Laminated copies of the floor plans will be circulated to the Ward Managers by September 2017.

Out of hours

- Contact the out of hours Wates Smartspace on 0845 602 8297
- Attempt to locate the nearest stop cock or valve to isolate whilst awaiting assistance
- If the flood continues uncontrolled, consider contacting the London Fire Brigade in consultation with the On-call Manager

4.6 Loss or leak of piped medical gas

On discovery of a leak or loss:

The Wates RHN Site Supervisor is the Medical Gases Authorised Person on site

- Inform on-site Duty Manager immediately
- On-site Duty Manager to inform the on-site or on-call Medical Gases Authorised Person via Wates Smartspace Call Centre stating the exact location of the loss or leak
- On-site Duty Manager to check which patients have been put at risk and to arrange immediate emergency medical attention if necessary
- On-site or on-call Authorised Person and the on-site Duty Manager to ensure there are sufficient gas cylinders available for the anticipated duration of the loss
- On-site or on-call Authorised Person to provide on-site Duty Manager with details of emergency suppliers
- On-site or on-call Authorised Person to contact the gases supplier to report the loss and to arrange an emergency delivery and/or repair

4.7 Loss of cylinder Medical Gas

On discovery of a low supply level during working hours:

Contact RHN Portering Service during normal working hours
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- Out of hours the ward staff should contact another ward for a back-up supply
- Complete appropriate paperwork to record transaction
- Arrange for replacement cylinders to be delivered the next working day

The Wates RHN Site Supervisor is the Medical Gases Authorised Person on site

On discovery of a low supply level during out of hours: In addition to the instructions above:

• On-site Duty Manager should monitor the cylinder levels and contact BOC if an emergency delivery is required on **0800 111333**



Ordering direct from BOC should only be approved by the onsite Duty Manager in the event of a real emergency as premium rates will be charged for the delivery

4.8 Bomb/Toxin/Terror Threat

Threat received by phone at Main Reception during working hours

- Contact the Chief Operating Officer or Chief Executive
- Contact the Director of Nursing
- Contact the On-call Manager on 07887 566017

Threat received by phone at Main Reception outside working hours

Contact the On-call Manager

In the event that a call is taken by staff other than Main Reception, they should pass the message to Reception staff who will invoke the process above.

The On-call Manager is responsible for making the decision to escalate to the Police. RHN staff will then take all instructions from the police concerning searches and evacuation.

Procedure to be followed in the event of finding a suspicious package

- Do not attempt to open or move package
- Instruct staff to immediately clear the area of all patients, visitors and staff
- Contact Main Reception on extension 0
- Main Reception will contact the On-call Manager on 07887 566017 and the on-site Duty Manager (Bleep holder)

4.9 Failure of Patients' Transport (Ambulances)

All RHN ambulances contain instructions for the drivers in the event of a breakdown either on or off site.

On site breakdown

Contact UK Specialist Ambulance Service on 03332 407111

Off site breakdown

- Contact the AA on 0845 887766
- If they are unable to effect repairs at the roadside, they will make arrangements for it to be recovered to the Hospital

5. References

- a) Health and Safety at Work Act, 1974
- b) Management of Health and Safety at Work Regulations, 1999 & Amendment 2006
- c) Work Place (Health, Safety and Welfare) Regulations 1992 & Amendment 1996
- d) Provision and Use of Work Equipment Regulations 1998
- e) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations, 1995
- f) Control of Substances Hazardous to Health (COSHH) Regulations, 2002
- g) Pressure Equipment (Safety) Regulations 2016
- h) Pressure Systems Safety Regulations, 2000
- i) Highly Flammable Liquid and Liquid Petroleum Gas Regulations, 1972
- j) The Human Medicines Regulations 2012
- k) Manual Handling Operations Regulations, 1992
- I) Personal Protective Equipment at Work Regulations, 2002
- m) Electromagnetic Compatibility Regulations 2006
- n) Electricity at Work Regulations, 1989

6. Equality Impact Assessment Tool

		Yes/No	Comments
1. **	Does the Service affect one group less or more favourably than another on the basis of:		
I	• Age	No	
ii	Disability	No	
iii	Gender Reassignment	No	
iv	Marriage/ Civil Partnership	No	
v	Pregnancy / Maternity	No	
vi	Race, Nationality, Culture, Ethnic origins	No	
vii	Religion or belief	No	
viii	Sex (Gender)	No	
ix	Sexual Orientation	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	N/A	
4.	Is the impact of the service delivery likely to be negative?	N/A	
5.	If so can the impact be avoided?	N/A	
6.	What alternatives are there to providing the service without the impact?	N/A	
7.	Can we reduce the impact by taking different action?	N/A	