



Plan:

OPS 011 - Fuel Shortage Contingency

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Plan Version and advice on document history, availability and storage

This is version 7 of the Fuel Shortage Contingency Plan. It builds upon the Emergency Preparedness, Resilience and Response Policy and reflects guidance from NHS England.

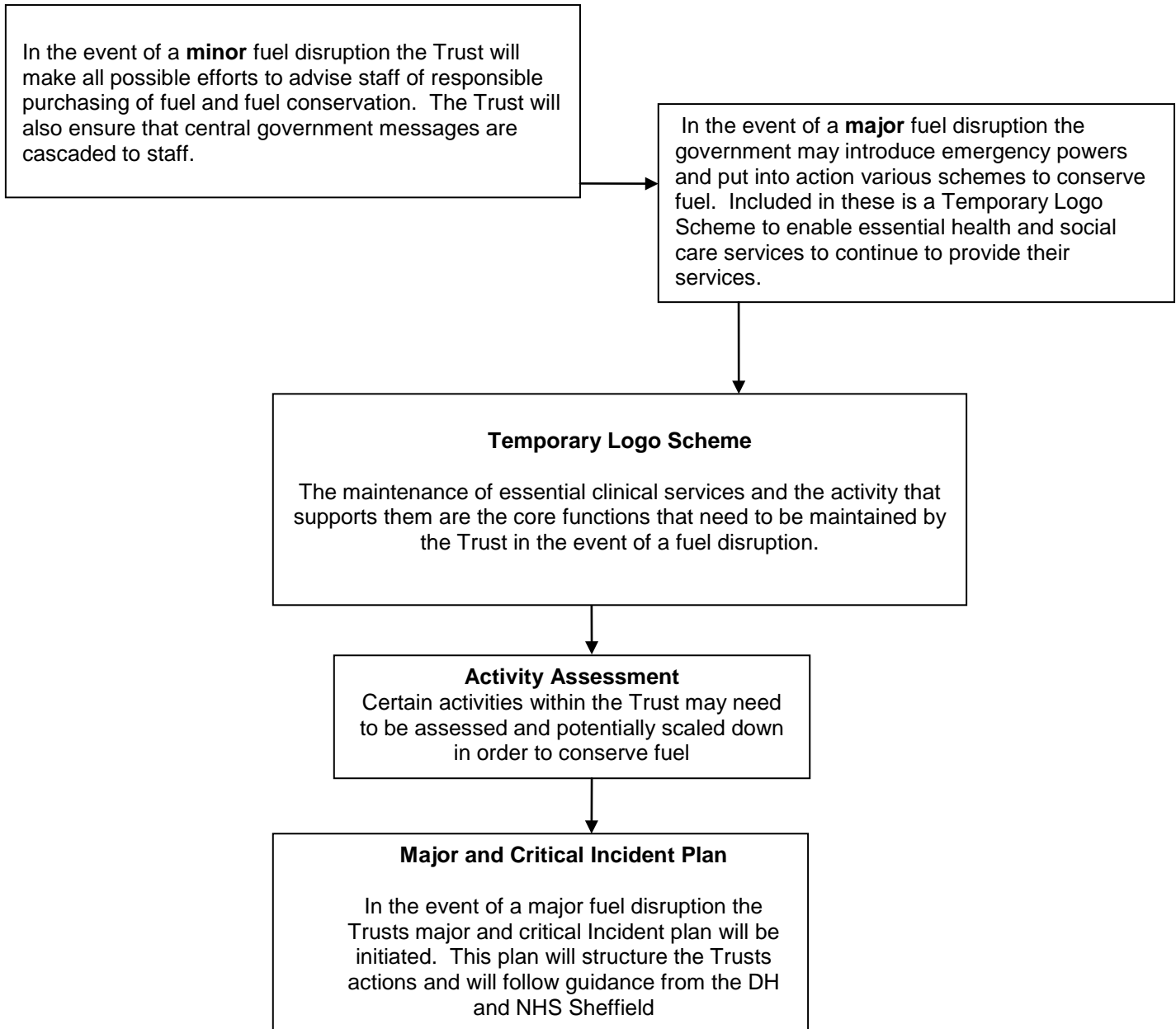
This plan will be available to all staff via the Sheffield Health & Social Care NHS Foundation Trust Intranet and Internet. The previous version will be removed from the Intranet and archived. Other than formatting, there is little change to version 6.

Any printed copies of the previous version (V6 2016-17) should be destroyed and if a hard copy is required, it should be replaced with this version.

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Flowchart



1. Introduction

This plan sits within the Trusts Emergency Preparedness, Resilience and Response (EPRR) Policy, forming a series of plans as required within NHS England's EPRR Core Standards.

In the event of a national fuel shortage, Sheffield Health and Social Care NHS Foundation Trust, hereinafter referred to as the Trust, may need to implement special measures in order to maintain its core functions.

It is envisaged that there will be three main issues:

1. Ensuring continuity of priority services to service users in terms of staffing services
2. Guaranteeing delivery of essential supplies to service users and other 24 hour services.
3. Staff unable to get to work in both clinical and non-clinical areas.

The Government Department for Business Enterprise and Regulatory Reform have developed a National Emergency Plan in the event of a fuel shortage. Within this plan are Emergency Powers that can be implemented in the event of disruption to fuel supplies to enable the supply of fuel to the emergency services and also to utility organisations, some of whom supply the health service.

The Trust will ensure flexibility and will be sensitive to issues surrounding problems with staff transport to and from work. In response, the Trust will expect where possible, flexibility and support from its employees during any such crisis. The Trust's response to a disruption in fuel supply will be proportionate to the scale of the disruption.

- In the event of a minor disruption the Trust will make all efforts possible to advise staff of responsible purchasing of fuel and fuel conservation. The Trust will also ensure that central government messages are cascaded to staff.
- In the event of a major fuel disruption the Trust's major and Critical Incident Plan will be initiated. This plan will structure activity and actions in response to guidance from the Department of Health and Social Care and NHS Sheffield.

The maintenance of essential clinical services and the activity that supports them are the core functions that need to be maintained by the Trust in the event of a fuel disruption. Therefore, any special measures that are implemented by the Trust need to assist in maintaining these core functions.

Moreover, any measure the Trust can implement that will assist in the conservation of fuel will help contribute to the national response to the disruption.

2. Scope

This plan applies to all Trust staff and services.

3. Responsibilities

Chief Executive

- Ensure that there is an effective business continuity plan that properly considers fuel shortage contingency measures

- Ensure this contingency plan is included within the Trust's Emergency Preparedness, Resilience and Response
- Has overall responsibility for ensuring critical services are maintained

Accountable Emergency Officer (AEO)

- Initiate and chair incident control arrangements in line with the Major and Critical Incident Plan in the event of a major fuel disruption
- Co-ordinate the Trust response on a day to day operational basis in conjunction with the Executive Team.
- Ensure that the plan is reviewed and updated periodically and as new information emerges
- Update the Executive team and affected staff in the event of a fuel disruption

Emergency Planning Manager

- Support the AEO in co-ordinating the trust response to the fuel shortage.
- Ensure effective communication is maintained with all appropriate partners
- Will ensure that the plan is reviewed/tested periodically and after any incident where the plan is implemented
- A lessons learnt log is created and recorded in real time and these are incorporated into the next version of this plan.

Network Management Teams

- Oversee the effective implementation of the plan within their Services
- Ensure team plans are established to implement local action plans in line with the overall contingency plan
- Develop and maintain a list of essential car users that may be required under the Emergency Service Scheme
- Cascade communications messages
- Ensure clinical team managers and department heads have effective plans in place to manage staffing and activity during a fuel shortage.

Director of Facilities Management

- Ensure contingencies are in place for fuel to heat Trust premises and run generators
- Manage issuing of Temporary Logos to Facilities vehicles if required
- Ensure plans are in place to maintain essential supplies such as linen and catering
- Liaise with Chief Pharmacist to ensure that Drugs are both available and delivered

HR Director

- Support AEO in managing and monitoring Trust actions
- Co-ordinate media correspondence with Head of Communications
- Co-ordinate communications to Trust staff

Clinical Team Managers / Assistant Service Directors

- Ensure staff are aware of their responsibilities
- Manage flexibility within shift patterns and consider reducing the number of shifts worked (by increasing hours each shift)
- Ensure arrangements are in place for maintaining continuity of services
- Implement action plans where relevant
- Monitor a log of car shares by staff

- Identify staff who may work from home
- Brief staff of the situation and any new developments and Trust actions
- Ensure that local accommodation arrangements for key staff are included in their Business Continuity Plans

Staff

- Prioritise journeys, avoiding unnecessary journeys and taking into consideration fuel needed to attend work. There is an expectation on all staff who rely on their vehicle for work, to conserve fuel as far as is possible in order to be able to get to and from work at all times.
- Utilise other means of transport where possible such as public transport, car sharing, walking or cycling to work
- Where the staff member has inadequate fuel to make the journey to work they should make every attempt to attend work by other means
- If all means have been exhausted and the staff member is unable to attend work they should contact their patient service manager/head of department giving as much notice as possible before the planned shift.

Contingencies to supply fuel to priority staff using their own vehicle in the course of their work for health and social services may be implemented. However, there is no provision for fuel to be given to staff to get to work. This needs to be considered by staff in the amount allowed to them as members of the public and they may need to consider alternative arrangements for getting to work during a period of fuel shortage.

4. Minor Fuel Disruption

In the event of a potential minor disruption to the supply of fuel, the Trust will communicate with staff, advising them of responsible actions and passing any central messages.

This will both ensure that staff are prepared and will also reinforce the message of responsible fuel purchasing.

The messages communicated to staff in these circumstances may include:

- Buying fuel normally and not panic buying is the responsible thing to do and will avoid creating problems that weren't already there
- Drive considerately to conserve fuel
- Where possible avoid using the car and use public transport, walk, cycle or car share
- Ensure that you prioritise car use to have enough fuel to get to and from work if necessary and if on-call, you have enough fuel to last you for that period.

Messages need to be communicated sensibly avoiding the potential to cause panic and can be coincided with any messages received centrally.

5. Major Fuel Disruption

In the event of a major fuel disruption the government may be forced to implement emergency powers under the Energy Act 1976. Should this arise, the Trust may need to put in place special measures in order to manage during the disruption.

This may necessitate a major incident being invoked in which case follow procedures within the Trust Major and Critical Incident Plan.

6. Maximum Purchase Scheme

Under Emergency Powers the Government may issue a scheme to limit the public to 15 litres of fuel per visit to a petrol station. This is considered to be adequate to enable employees to get to work but encourages drivers to act responsibly and cut down on journeys that are non-essential.

7. Temporary Logo Scheme

Under Emergency Powers the Government may implement the Temporary Logo Scheme. In this scheme, designated petrol stations will supply fuel to vehicles with an emergency service logo which includes NHS vehicles. This will allow vehicles used by the Trust to be supplied with fuel.

Temporary logos may be issued for use by identified priority NHS staff who drive vehicles that do not have emergency service logos. It is made clear in the national emergency plan that this scheme should not normally be used to supply fuel to staff for the purposes of getting to work. However, the Trust provides a 24 hour service and has staff who visit service users in the community. It may be necessary to utilise the Temporary Logo Scheme to ensure key staff are available to provide a service. These services should be assessed and scaled down if appropriate following a risk assessment.

Should the Temporary Logo Scheme be implemented:

- Essential services will be allocated a number of temporary logos based on priority need for the period of the fuel disruption. Using these temporary logos, vehicles will be able to purchase fuel at a Designated Filling Station. A list of Designated Filling Stations will be issued once the scheme is activated.

Priority roles that should be considered for the issue of Logos under the scheme are shown in Appendix A, together with guidance on their use – Appendix B and a log of vehicles issued with them – Appendix C

8. Car Sharing

The Trust encourages car sharing during a major fuel disruption. Each ward/team will supply Assistant Service Directors with information of staff that use a car to travel to work, the area travelled from and copies of the off duty rota. Staff having problems travelling to work are to contact their Assistant Service Directors who will try to match them up with another member of staff living in that area and working on the same day. A degree of flexibility on start and finish times will be needed for this. Each car share should be logged by the clinical team or ward/department manager to ensure staff safety.

9. Flexible Shifts and Working from Home

Flexibility will be needed during a major fuel disruption with regards to working patterns. Ward/department managers and Assistant Service Directors will need to be sensitive to problems staff have regarding being at work at certain times due to transport arrangements.

Temporary changes to shift patterns may be required during the duration of the fuel disruption. Increasing the length of the working day and reducing the number of days worked is an effective way of reducing fuel consumption for staff.

Non-clinical staff, those in some administrative functions such as HR, IT, Finance and some management staff may be able to work from home however, sufficient on site cover should be maintained. For those staff able to do so, working from home is an option only

with agreement of line management and arrangements for evidencing this when next at work.

This approach is consistent with the Adverse Weather Plan.

10. Communications

Care needs to be taken in messages that the trust gives to staff during a disruption or potential disruption of fuel. Inaccurate and inappropriate messages to trust employees may have the effect of fuelling rumours and causing panic buying. This in turn may either create problems where there were none or exacerbate an existing problem.

Directors and Assistant Service Directors will be briefed regarding any potential fuel disruption through the AEO. They will be advised on action the trust may take and given any central messages received by the Trust.

The AEO will also brief the communications team on any proposed actions to be taken.

As part of the wider NHS, it is important that any information the Trust provides in the event of a fuel disruption is in line with that of the government so as to maintain consistency and public confidence.

- All internal and external communication messages will be agreed with and co-ordinated by the Head of Communications
- Messages to staff will be given through their line manager
- Any correspondence with the media must be conducted through the Head of Communications and the communications team.

11. Recovery to normal service provision

Recovery is defined as the procedure of rebuilding, restoring and rehabilitating the Trust as a whole post incident. In effect, it is replacing what has been lost or reduced and the rehabilitation of those affected who have been covering and maintaining the services during the disruption.

Recovery from a national fuel shortage may be a prolonged process depending on the length of the incident itself and the amount of disruption it causes to staff and services within the Trust. As well as regaining normal service delivery, recovery should be used as a tool to learn from the event which has occurred and develop more efficient ways of coping should the procedures used not have worked as well as first thought. This could include the reviewing of Business Continuity Plans throughout the Trust.

Recovery should begin at the earliest opportunity and this could run in unison with the Trust's response. Recovery should continue until the disruption has ended and the effects on the Trust have been resolved.

It should commence with enabling the services that were scaled down to regain full capacity, followed by services that were temporarily discontinued and then any other services that were affected, in order for the Trust to be working at normal service delivery. This may take longer to achieve than the disruption itself.

12. Partnership working

The Trust will work with partner organisations:

- In planning service reductions

- In ensuring that essential services are maintained
- In sharing resources appropriately
- In learning lessons from the situation

13. Associated Policies and Plans

Emergency Preparedness Resilience and Response (EPRR) Policy

Major and Critical Incident Plan

Business Continuity Policy

14. Related documents and references

Energy Act 1976

NHS England EPRR Core Standards 2015

15. Monitoring and review

This plan will be audited by review as part of the governance and reporting procedures included in it. Any failure to complete or update the plan within the timescales will be addressed as it occurs.

Furthermore, monitoring of related documents and references will be conducted by the Emergency Planning Manager to ensure the plan remains up to date, irrespective of its normal review dates.

16. Equality Impact Assessment

The Trust management are committed to providing equality of opportunity, not only in its employment practices but also in the services for this plan for which it is responsible. The Equality Impact Assessment of the plan is neutral.

The Trust values and respects the diversity of their respective employees and the communities they service. In applying this policy they will have due regard for the need to:

- Eliminate unlawful discrimination
- Promote equality of opportunity
- Provide for good relations between people of diverse groups

17. Version Control

Version No.	Type of Change	Date	Description of change(s)
5.0	Plan written as a supplement to the SHSC Major Incident Plan	November 2015	First writing as a stand-alone plan
6.0	Review undertaken	November 2016	No changes
7.0	Review undertaken	June 2019	Re-formatted in line with other Trust Plans and Policies. Aligned with NHS England EPRR core standards.

18. Contact details

<i>Title</i>	<i>Name</i>	<i>Phone</i>	<i>Email</i>
Terry Geraghty	Emergency Planning	0114 226 3147	Terry.Geraghty@shsc.nhs.uk

List of Essential Fuel Users

(not in order of importance)

AMHP's and S.12 Doctors on the Mental Health Act rota
Crisis Team
GP's from Clover Group
Pharmacy and food deliveries to Trust Inpatient sites and other 24 hour services
Essential maintenance vehicles
Out of hours manager and Exec on call
Consultant on Call
Rapid Response Team in Older Adults

TEMPORARY LOGO GUIDANCE

Guidance issued with Temporary Logo

This Temporary Logo has been issued to **you** to enable you to access the Temporary Logo Scheme (TLS) as a driver of a non-logoed vehicle to enable the **essential health, social-care and critical life-saving** services provided by or on behalf of Local Authorities, Health Authorities and Local Responders to continue.

Only the person to whom this document has been issued is entitled to use it to obtain fuel at a Designated Filling Station (DFS) operating the Emergency Services Scheme (ESS).

Abuse of this Scheme is a criminal offence under section 18(2) of the Energy Act 1976 and offenders may be prosecuted.

A list of the local DFS is available on the LRF website or by contacting your Emergency Planning Team.

In order to obtain fuel users of Temporary-logos must produce this document along with their (photographic) Staff ID at the point-of-sale or kiosk at the DFS. They should also ensure that they have a valid means of payment.

DFS operators will only allow access to fuel once they are content that a recognisable logo has been displayed (vehicle or temporary), ID and means of payment has been confirmed. Once the Fuel Retailer is content that they are a legitimate user they will then turn on the pumps.

Where there is doubt about a Temporary Logo or identification the DFS operator will contact the local Incident Control Room on the number provided to them for advice. Temporary-Logo users may also use this number if the Designated Filling Station (DFS) operator has refused to allow them access to fuel.

Temporary-logo holders who need to re-fuel their vehicles at a DFS outside their area must inform the SHSC Trust Emergency Planning Group who will inform the appropriate authority in that area in advance to ensure that refuelling problems are not encountered. An example of where this might arise would be the transfer of a patient to a specialist hospital by Ambulance and the vehicle needs to refuel to return to its base.

Fuel purchased under the Temporary Logo Scheme (TLS) should only be used by the named member of staff carrying out **critical functions** of the Authority. It should not be used for non-critical or domestic use. Fuel for non-critical or domestic use should be purchased under the Maximum Purchase Scheme (MPS) at (non DFS) retail filling stations as a member of public. There is no maximum purchase when refuelling under the TLS at a DFS. Users are also allowed, subject to certain conditions, to fill portable containers with fuel **required for their work**.

Any misuse of this document may not only give rise to a prosecution as detailed but also internal disciplinary action by your organisation.

The Department of Energy and Climate Change's legal advice is that **"Once issued with a logo, on the part of the user, the filling of a vehicle where its use is not necessarily incidental to the carrying out of the functions of the service provider is where the offence lies"**.

