

#### Falkirk Council

Title: Coronavirus Update: Lessons Learned

Meeting: Scrutiny Committee

Date: 11 November 2021

Submitted By: Chief Executive

# 1. Purpose of Report

1.1 This report provides an update following on from previous reports of May 2020 (to Emergency Executive) and June 2021 to Scrutiny Committee and Executive) on the impact of the Covid-19 pandemic on the Falkirk area and the work carried out to date to identify the lessons learned. It highlights the ongoing impact of the pandemic for the Council, the ongoing actions being taken to mitigate through response and recovery and the measures being taken to reinstate resilience exercises for business continuity purposes.

#### 2. Recommendation

# 2.1 It is recommended that the Scrutiny Committee:

- a) considers the attached report on the Council's response to the Covid-19 pandemic.
- b) notes that resilience exercising and testing of Business Continuity Plans will recommence involving the Council and its partners.
- c) considers if this report requires to be forwarded to Executive for consideration, along with any additional comments that Scrutiny Committee would like to make to inform the lessons learned.

# 3. Background

- 3.1 In June 2021, the Scrutiny Committee considered an updated report on COVID response and recovery. The Committee asked that a further update be presented for November 2021, focusing in particular on the lessons learned. This update is a result of the request and includes an update on the findings from de-brief exercises undertaken by each Service and the lessons learned.
- 3.2 Since previously reporting on the global pandemic in June 2021, there has been a significant change as the Scottish Government's route map out of lockdown has been implemented.
- 3.3 The move through the various levels out of lockdown has coincided with the implementation of a concentrated vaccination programme which has been working alongside a Contact Trace and Testing Programme, involving both Symptomatic

- (PCR) and Asymptomatic (LFD).
- 3.4 On 9 August 2021, Scotland moved beyond level 0 whereby the vast majority of restrictions were removed and significant opening of public and private spaces was permitted. Live events were also permitted to commence for the first time in 18 months.
- 3.5 The Covid-19 vaccination programme commenced in December 2020. The Council provided support to the NHS in identifying premises that could be used as mass vaccination sites. In addition to this the Council provided the Scottish Ambulance Service with use of Council properties to support their PCR testing programme whilst also overseeing and delivering the Asymptomatic testing programme on behalf of Scottish Government. This work is planned to continue until 1 April 2022.
- 3.6 The Council continues to support the NHS in delivering the vaccine programme. To date, 88.2% of the Falkirk adult population has had two doses of the vaccine. A booster programme for everyone over 50 and vulnerable people under 50 has now commenced.
- 3.7 It is important to recognise the impact of Covid-19 on the Falkirk area and the challenges that Council services have experienced in responding to the pandemic. The following information summarises (as at 3 October 2021) some of the key facts relating to the pandemic's impact:
  - There has been a total of 16,309 cases of Covid-19 experienced by people across the Falkirk area
  - The current case rate for the Falkirk area is 409.8 per 100,000 people. At the height of the pandemic, on 5 January 2021, the rate reached 317.6 people per 100,000
  - Importantly, it must be noted that most people are now double vaccinated and, while Covid prevalence remains high, the demand on NHS FV beds has significantly declined.
  - There have been 275 Covid-19 related deaths in the Falkirk area
  - A total of 346,099 Covid-19 tests have been undertaken in the Falkirk area
  - The current test positivity rate is 8.5% of those tested. At the height of the pandemic, the positivity rate reached 10.4 % for those tested.
  - A total of 120,563 people have received their first vaccination and 114,683 have received their second dose of vaccination.
  - Young people aged 12-15 years are currently being offered the vaccine, which is being delivered at Falkirk Community Hospital
- 3.8 Throughout the various stages of the pandemic the Council had to be dynamic and adaptable in its approach to ensure efficient service delivery whilst maintaining business continuity. The various actions undertaken by Council services in response to the pandemic were summarised in the report to the June meeting of the Scrutiny Committee. In considering these actions it was recognised that there was a need to identify the lessons learned and consider how these might be applied in future situations to ensure business continuity.

#### 4. Considerations

#### **Covid-19 lessons learned**

4.1 To maintain service delivery during the pandemic, the business continuity plans of each service were implemented. This continues to be an evolving process with the learning from implementation being integrated into daily business and assisting to develop future working practices.

## This approach has:

- ensured the delivery of essential services with Government guidance such as social distancing, wearing of PPE and other preventative measures being implemented.
- conversion of 'business as usual' activities to a blend of home and digital methods of working.
- where appropriate, the postponement of service delivery in areas where safe working was unable to be sustained. This has been under constant review with a near full reinstatement of service levels matching those prior to the pandemic.
- assisted delivery of the Government's Asymptomatic (LFD) programme

The experience from handling the pandemic has also enabled lessons to be learned from day to day working to refine the approach required to service delivery. Debriefing of the measures taken is also being taken into account to inform business continuity plans and risk assessments.

## **Business Continuity - Covid-19 Debriefs**

- 4.2 As highlighted in the June 2021 report, all Services in Falkirk Council, including Falkirk Community Trust and the Falkirk Health and Social Care Partnership (including one care home and a supported housing complex) have had Structured Debriefs carried out in respect of how the Service reacted to the initial outbreak of Covid-19.
- 4.3 It is important that the experiences from handling the pandemic and lessons learned are taken into account to inform business continuity plans and the assessments of risk from future events that may face the Council. In the early period of the pandemic, a series of business continuity plans were enacted and steps taken to implement these to enable essential services to be maintained while enabling 'business as usual' activities to proceed with home working and social distancing measures in place. The debriefs have assessed the lessons learned from these measures.
- 4.4 The debriefs supplied each Service with recommendations to consider as well as identifying lessons learned and examples of good practice, several of which were highlighted in the June report. Overall, the debriefs were found to be very positive with a great deal of examples given of the goodwill, initiative and cross service working that has typified the Council's response. This work has informed this summary report. The key lessons learned from these debriefs were:

- the need for clear methods of command, control and communication across the strategic (CMT), tactical (Service) and operational (units and teams) levels of resilience support, involving co-opted advisors as necessary
- decision logs should be maintained to capture key decisions being made and actions required. These logs should be reviewed regularly.
- ensure parity of communication between staff working at home, in offices or deployed in operational settings
- review authoring rights to the Council website to enhance capacity for update
- to consider a review of work/life balance supporting mental health issues and addressing issues arising from staff working from home
- to review the approach to the engagement of volunteers, mapping these as necessary to job profiles
- identify staff who have skills which could assist colleagues in the continued delivery of critical functions.
- enhance the provision of ICT support to enable mobile and flexible working
- update business continuity plans in light of lessons learned from the debriefing following the pandemic.

These debriefs have been translated to an action plan for each Service and the common or corporate recommendations were then developed into a corporate action plan. CMT has reviewed these actions and the corporate debrief and Appendix 1 summarises the lessons learned at a corporate level and the actions being taken to apply these lessons across the Council.

4.5 Further debriefs will be carried out as and when required, further highlighting and developing the good practice and lessons learned and assisting with the recovery plans.

### Communications

- 4.6 Over the past 19 months, there has been significant demand for clear and targeted communications as local communities responded to the Covid-19 pandemic. Initially this was a very rapidly changing environment and the public had to adjust to a whole range of public health measures as well as changes to Council services that had to be communicated clearly and quickly.
- 4.7 Continuous updates were provided by both Scottish Government and the NHS and these were shared via the Council's social media channels. Advice and guidance on the appropriateness of communications to reach the large variety of target audiences has been given throughout to all services.
- 4.8 The Council's website has been resilient throughout, with information supplied to the public and employees, regularly updated as new arrangements were announced. The Covid-19 section of the website comprehensively covered the alternative arrangements services put in place and reacted fluidly to changes in the severity of the outbreak.

- 4.9 Regular briefings were given to staff and Elected Members to aid communication of changes in service and the effects of the pandemic as it progressed. National guidance is shared wherever relevant, particularly as services revert to more 'normal' modes of delivery.
- 4.10 A blended approach of office and home working has now been adopted by the Council. Any changes to these arrangements have and will continue to be clearly communicated to all employees. This includes messages on the transition from current buildings to the new 'Foundry' facility in Larbert.
- 4.11 Work continues to support the reopening of buildings. Since lockdown commenced most buildings have been partially open; some only on a very limited basis to support accessing files for example. The full reopening of buildings is being aligned where possible to the findings of the Strategic Property Review with priority being given to public facing buildings.
- 4.12 Managers who have staff deemed vulnerable have offered support, allowing staff to continue working in a safe environment. The need for sustained support for these groups of staff is recognised and managers have been supplied with guidance on managing these staff.

# **Business Continuity and Resilience**

- 4.13 A major part of recovery has been the recognition that business continuity (BC) and the approach to delivery of resilience support within the Council requires to be adapted to allow recognition of the lessons learned from Covid. These lessons will now be incorporated in updated BC plans and in the work of the Resilience team.
- 4.14 Resilience planning staff will help oversee this aspect of organisational recovery and the Council's resilience team has staff undertaking accredited business continuity training to develop this approach. This will assist the process whereby lessons learned from the pandemic will be fully incorporated in revised business continuity plans. The timescale for update of these plans will be guided by the process of removal of pandemic restrictions. This recognises that some services, particularly in the IJB, continue to operate in response mode with significant pressure on resources.
- 4.15 A key element of this work is the need to reactivate business as usual activities in resilience planning. This includes the need for continuous testing and exercising by Council services and partner agencies. The Local Resilience Partnership (LRP) has reinforced the need for this work to be enacted. Key resilience risks have been identified and a programme of exercises is being put underway.
- 4.16 This has seen the regulated Grangemouth multi agency exercise programme recommence, with a multi-agency live play exercise taking place in March 2022. There has been no such exercising since March 2020. A full review of Falkirk Council incident response is also taking place as a result of the learning form Covid. The preparatory and response framework being developed will fully complement Scottish Government's *Preparing Scotland* principles.

- 4.17 The Council has been fully engaged with the LRP's risk preparedness process and has provided risk assessment feedback in accordance with the National Risk Preparedness Assessment. Once collated by Scottish Fire and Rescue Service, this will form the Forth Valley Resilience Partnership workplan and thereafter an appropriate and relevant testing and exercising programme will commence.
- 4.18 Work has commenced on re-engaging community resilience and follows the principles of the recent Audit Scotland Community Empowerment guidance
- 4.19 It is also noted that specific arrangements have been required in relation to the range of organised events taking place following the pandemic. Close working arrangements with Police, business and community organisations etc. have been put in place to ensure that events proceed safely and acknowledge the continued need for social distancing and other protective measures to be maintained.

# **Service Delivery – Health and Social Care Partnership**

- 4.20 The Covid-19 pandemic has had a significant impact on the HSCP's delivery of services for well over a year. This impact has been consistent throughout Scotland. During the initial stages of the pandemic lockdown, the partnership was able to move staff resources from one area to another. Some services were closed on a temporary basis releasing staff, and the HSCP commissioned additional capacity from external providers to meet demand across community care. This flexibility enabled the partnership to continue to deliver vital care services whilst responding to the numerous demands of the pandemic response and coping with staff absence
- 4.21 Over recent weeks we have seen significant changes to this position brought about by a combination of the pandemic restrictions easing and an increasing community level of Covid-19. The demand for care @home has increased by 40% against a backdrop of staff absences and vacancies across the local system. A number of care agencies have lost staff back into the food and hospitality sectors. The apparent increase in community spread has also led to a position where a significant number of staff across the sector have been required to self-isolate which has resulted in temporary closure of care homes to admissions. At the time of writing the report there are 7 Falkirk care homes closed to admissions. These issues have been further compounded by on-going challenges to recruit to vacant posts within internal care at home service and Care Homes. A similar position is visible in the acute care aspect at hospitals.
- 4.22 With the easing of restrictions, there has been an increase in community spread of Covid-19 and this has had an impact on the availability of staff resource. This, alongside the historically high numbers of vacant posts within the in-house service, has meant that the delivery of care at home services has been severely impacted.
- 4.23 Whilst steps have been taken to fill vacant posts, it is worth noting that there is competition for staff with external providers. It is anticipated that there will be some gains in terms of recruitment, however, it has reached a point where the staffing resource across both in house and external services is having a significant impact on the ability to provide care for individuals.

4.24 The HSCP has a number of actions underway to address the continuing challenges and is working with NHS colleagues to respond to pressures across the whole health and care system.

## 5 Implications

#### **Financial**

5.1 The financial implications for the Council of Covid-19 have been significant and arelikely to last for some time. These have been advised regularly to Council and Executive in reports on the budget and business plan. Summary details of the financial impact of Covid were given in the June report.

#### Resources

5.2 It is recognised that the pandemic had a major impact on the demands facing Council workforces with many having to adjust their working patterns to ensure that service delivery could be maintained. The resilience and adaptability of Council staff in dealing with the situations that emerged during the pandemic has been impressive and was acknowledged in the June 2021 report. It is important to recognise the long-lasting demands that the pandemic has placed upon some staff and risks of fatigue that may emerge in some service areas.

## 5.3 Legal

There are no significant legal issues arising at this time.

#### Risk

5.4 The risk to service delivery remains high as we now get used to the new normal, particularly as we reach the winter season. The pressures on the Health and Social Care Partnership to maintain service delivery in these circumstances remain critical.

#### Sustainability

5.5 The effects of lockdown had some beneficial consequences for the environment with less consumption of carbon emitting fuels through reduced travel and heating/lighting of buildings. An update on the development of the Council's Climate Change Action Plan was given at the June Executive meeting and this noted the effects of Covid-19 in reducing future carbon emissions through revised patterns of home working and travel reductions.

# **Policy**

5.6 The effects of the Covid-19 pandemic for Council services were examined in the course of preparing the Council's new Corporate Plan, Business Plan and Economic Recovery Plan.

#### 6 Conclusion

6.1 The Scottish Government recently announced that an independent Public Inquiry

into the handling of the Pandemic will take place. Local authorities, through COSLA, have welcomed this announcement and have committed to actively support and participate in the enquiry. The outcomes of the enquiry will assist the development of strategies for the future.

- 6.2 Whilst the impact of the Covid-19 pandemic has been significant, the Council has shown the ability to work with partners and to adapt quickly in the most difficult of circumstances to ensure service delivery is maintained. This has been particularly challenging for staff who have had to, in many if not all cases, dramatically alter their way of life and how they go about their day to day work. It is credit to them that we are now in a position where we are delivering a recovery programme implementing many of the lessons learned through the response of this pandemic.
- 6.3 Notwithstanding the considerable service pressures that are continuing as a consequence of the pandemic, it is important that the Council prepares for the return to a level of normality. For this reason it is important to learn the lessons of the pandemic and to embed these in the business continuity plans maintained by services. This work is underway and will be monitored by CMT and the Corporate Risk Management Group. Additionally, it is necessary to reinstate a regular programme of exercising and testing of the response to resilience related risks facing the Council and its partners. The LRP has enacted this programme and this will be an important element of sustaining business continuity and attending to any future risks.

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## **Chief Executive**

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Date: 1 November 2021

# **Appendices**

Appendix 1: Covid 19 Service Structured Debrief. Corporate Management Team Action Plan Update November 2021 and Action Plan Infographic

## **List of Background Papers**

None

#### **FALKIRK COUNCIL**

**COVID-19: SERVICE STRUCTURED DEBRIEFS** 

#### **CORPORATE MANAGEMENT ACTION PLAN**

#### **UPDATE NOVEMBER 2021**

Stages of CMT Action Plan

Stage 1	Service Structured Debriefs carried out and recommendations /considerations agreed by SLT's
Stage 2	Review recommendations with other service debriefs for CMT action plan and BCPs
Stage 3	Engage extended SLT and CMT and allocate actions from CMT Action Plan
Stage 4	Task and coordinate Actions with regular progress updates

#### **Overview Statement**

The following is a table of recommendations which have appeared in Corporate and Housing Service (including Support for People), Development Services and Children's Service Debriefs. Many of the following Actions / Considerations are also reflected in the Falkirk Health and Social Care Partnership Debrief which is being progressed by the IJB Clinical Care and Governance committee. The Actions / Considerations are all at Corporate Management Team level. There are many other Actions / Considerations which are not in this report, unique to the individual Services and remain within their respective Action Plans for progression.

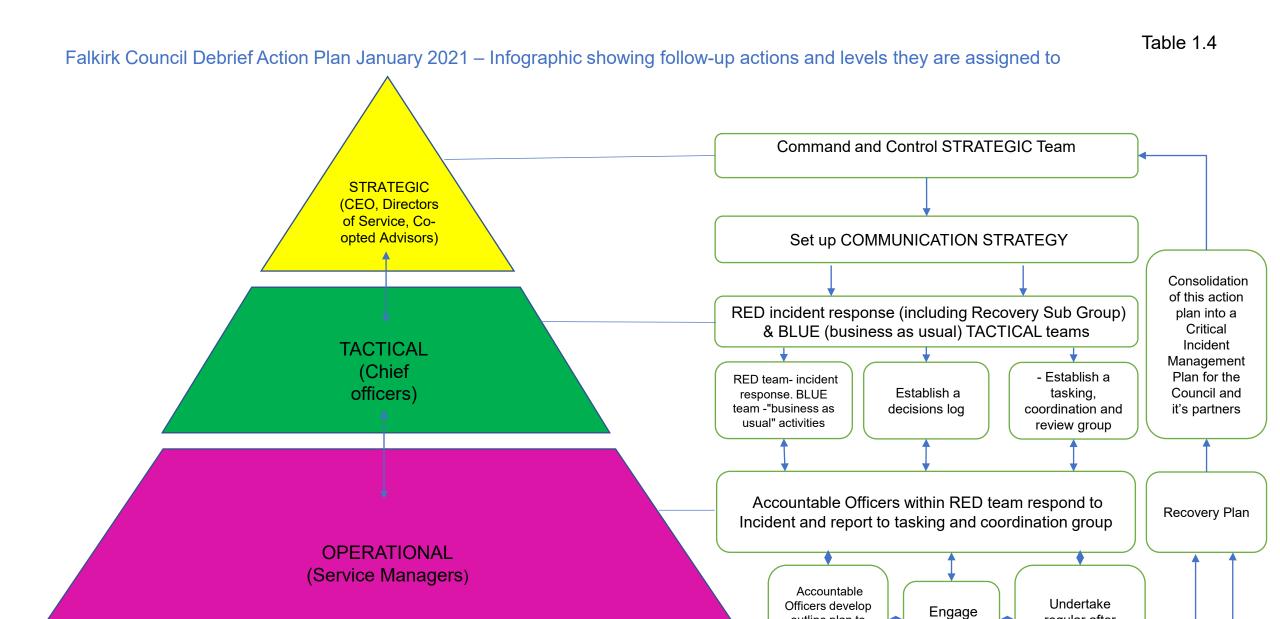
Category	Summary of Action(s)/ Considerations from Service Debriefs	Link to Recommendation (in main reports – Service with Rec in brackets)	Tasked to	Progress Report	R A G
СМТ	Set up STRATEGIC command and control team comprising of CEO, Directors & Co-opted Advisers.	CS (47)	CMT	This process was operated successfully and is now being incorporated as BAU through the review of the Corporate Incident response Plan	
	2. Set up communication strategy toset out plans in relation to the STRATEGIC, TACTICAL and OPERATIONAL response to an incident and related key information.	CS (45)	CMT Comms lead	As above	
Member Services	2a. Create a link to advise Elected Members of ongoing work to alleviate individual enquiries by them to particular Services.	CS (20) C+HS (SfP)	СМТ	A weekly update was provided to elected members by Council Comms  Further updates will be provided to elected members where required.	
СМТ	3. Directors set up RED & BLUE TACTICAL teams at Chief Officer level to implement the corporate response e.g. PPE, Support for People, ICT, Business Support, Communications, Facilities RED – Incident Response BLUE - Business as usual	CS (12, 13, 14, 17, 18, 28, 46, 48)	Directors,	This process was operated successfully and is now being incorporated as BAU through the review of the Corporate Incident response Plan	
	4a. BLUE team will oversee the management of the "business as usual" activities that need to continue. RED team will oversee the management of the incident response and include the Recovery Sub-Group.	CS (1, 2, 7, 21, 22, 31, 33, 43, 54)	Heads of Service, Service Managers	This process was operated successfully and is now being incorporated as BAU through the review of the Corporate Incident response Plan  Recovery Plans have been established and approved by Executive as appropriate.	
	4b. Maintain a decisions log noting what has been decided and providing an audit trail. This should be reviewed regularly.	C+HS (SfP), CS (39, 51)	Directors	This process was operated successfully and is now being incorporated as BAU through the review of the Corporate Incident response Plan	
	4c. Maintain a tasking, coordination and review process where at each	DS (Q), CS (39)	Heads of Service Service Managers	This process was operated successfully and	

	meeting tasks are allocated and progress recorded and performance reporting requirements agreed.  5. Consider a review of communication lines to staff who are working from home and in offices to allow a parity of information.	DS (V), CS (1,3)		is now being incorporated as BAU through the review of the Corporate Incident response Plan  Council Intranet site was used as a means of corporate communication which has now been developed into the Yammer system and seen as best practice. Bespoke briefings were also cascaded out through various departments
	6. Consider a review of authoring rights to the Council website to allow information to be updated easier and quicker to the general public.	DS (W, X), CS (3, 45,47)		Access was granted as appropriate .
Operations Team for Incident	7. Set up OPERATIONAL leads (role & remit) to implement new provisions and response plans.	CS (10, 23, 24, 25, 27, 28, 47)	Service Managers	This process was operated successfully and is now being incorporated as BAU through the review of the Corporate Incident response Plan
HR	8. Consider a review of work / life balance supporting mental health issues and addressing issues arising from working from home	C+HS (SfP), DS (N, U, AK) CS (1, 23)	HR/ Service Managers	<ul> <li>Audit of Wellbeing activities undertaken by internal audit with substantial assurance.</li> <li>Wellbeing Group in place and chaired by the Chief Executive which considers the activities required to support wellbeing.</li> <li>Web pages developed for , which provide a wide range of support on wellbeing.</li> <li>SeeMe mental health survey undertaken to gain feedback from workforce</li> <li>Further SeeMe focus groups held to supplement the survey</li> <li>General employee survey and listening events undertaken to get feedback from workforce.</li> <li>Pulse survey undertaken on Working from Home</li> <li>Action plan developed and being implemented by all Services/Managers to respond to the points raised by employees</li> <li>Hybrid Working Policy developed to support employees Working from Home</li> </ul>

HR	9. Consider a review of the model of delivery, role requirements and contracts of volunteers so they can be mapped to job profiles.	C+HS (SfP), DS (AH, AI) CS (14)	HR/ Service Managers	Volunteering arrangements developed and webpages set up to promote areas we needed volunteers. Co-ordination undertaken to match up volunteers to critical roles required in response to Covid. The pages have now been withdrawn as the nature of support required has changed. Specific support and volunteer arrangements still in place for the HSCP.
	10. Consider a full review of Staff contact details on 'MyView' in order that information can be passed timeously, and the staff can be easily contacted.	C+HS (SfP), CS (2)	HR/ Service Managers	Communications issued to encourage all employees to actively use MyView which requires them to provide email contact details.
	11. Consider how to identify staff with underlying health issues which may impact on the delivery of their role.	DS (AD)	HR/ Service Managers	<ul> <li>Recording arrangements put in place through MyView to enable employees with underlying health conditions/who were shielding to notify the Council of this.</li> <li>All managers have access to this information for their own teams.</li> <li>Employees were also encouraged to raise any relevant underlying health conditions with their manager to enable individual risk assessments to be undertaken.</li> <li>Guidance was issued to managers on the 1-1 discussions they should have with employees, questions to ask and support to provide, irrespective of whether an employee highlighted an underlying health condition or not.</li> <li>Given the changing situation, and the pausing of shielding arrangements, the MyView recording has now changed and the shielding/health categories have been removed.</li> </ul>
	12. Consider a review of how temporary staff are recruited where aPVG certificate is required.	DS (AH), CS (12, 14)	HR/ Service Managers	This was undertaken through national discussions with Disclosure Scotland who put in place a process for essential posts during the Covid pandemic.
	13. Consider identifying staff who have skills where they could assist colleagues in the continued delivery of critical functions.	DS (AH), CS (12,14)	HR/ Service Managers	See response to point 9

ICT	14. Consider classing ICT staff as a priority service and as critical workersto allow a readily available solution to any ICT issues.	C+HS (SfP), DS (I) CS (8)	ICT	This was implemented throughout the pandemic and is still in place.
	15. Consider a review of how council supplied mobile telephony is accessed, and review the video conferencing facilities operated by thecouncil.	C+HS (SfP), DS(J, M), CS (7, 9)	ICT	O365 was rolled out very quickly across the Council during the early stages of the pandemic in 2020. This enabled video conferencing and call facilities. Technology was also installed to enable desk based phones to be transferred to mobile phones. Conference calling was also enabled on mobile phones, although it is now rarely used given the installation of O365.
	16. Progress the roll out of the Microsoft 365 platform and consider other aspects of corporate work thatcan be digitised.	C+HS (SfP), DS (K, Z, AA) CS (4)	ICT	O365 installation is now complete. Further work is however, being done to continually enhance digital technology in line with the Council's Digital Falkirk strategy which as agreed in September 2020,
	17. Consider a full review of the Bring Your Own Device (BYOD) initiative to ascertain if working from home has the appropriate standard of equipment and training required all to promote a safe working environment.	C+HS (SfP), DS (L), CS (1,25,30)	ICT / Service Managers	BYOD was made available to all employees to ensure access to systems. Since its introduction, and as a result of capital funding being made available to support remote access and working from home, all employees were asked to confirm what additional IT equipment they required to undertake remote/home working successfully. IT equipment has been provided to employees in response to this and employees are regularly encouraged to raise any additional support they require in this regard.
	18. Consider a review of all databases used by the council to see if they are fit for purpose, capability is understoodand can focus on service delivery.  This should include training modules.	C+HS (SfP), CS (11,48)	ICT / Service Managers	Work was undertaken to ensure employees could work from home during the pandemic. The review of all IT systems including databases is part of the on-going work under the Digital Falkirk strategy and development of the Council's digital ambitions. Training modules for employees are all online via OLLE, the Council's online training system, and available to use at home.
	19. Consider a review of how national documents are promulgated with a foreword from the CMT	C+HS (SfP), CS (3,5)	ICT / Service Managers	This process was adopted and delivered by Corp Comms and services such as environmental health

Business Support	20. Consider returning Business Services to each service as opposed to it being a Corporate resource	C+HS (SfP), DS (P), CS (10,27)	СМТ	Business support is already a Council wide resource and delivered locally across services. The management of the business support teams is undertaken by Corporate & Housing Services. This has enabled significant efficiencies to be achieved across the years, since the establishment of this team working across the Council in a consistent way to support the delivery of Council services.	
Business Continuity Planning	21. Consider developing detailed BCP's on all aspects of the crisis butin particular the new provisions that were created during Covid-19.	C+HS (SfP), DS (B,C,U, AM), CS (31, 32, 33, 34, 35, 37, 38, 43, 44)	Resilience Team	Resilience Planning are overseeing this piece of work and are currently having staff trained in BC Management through an accredited course	
	22. Consider carrying out exercises forall new BCPs that were created during Covid-19	DS (AL)	Resilience Team/ Service Managers	Resilience Planning are overseeing this piece of work and are currently having staff trained in BC Management through an accredited course	



outline plan to

deliver new

provisions

Partners.

regular after

action debriefs