

NHS Shetland

Meeting:	Shetland NHS Board Meeting
Meeting date:	23rd September 2025
Agenda reference:	Board Paper 25/26/39
Title:	Resilience and Business Continuity Annual Report 2024-25
Responsible Executive/Non-Executive:	Dr Susan Laidlaw, Director of Public Health
Report Author:	James McConnachie Business Continuity and Resilience Officer

1 Purpose

This is presented to the Board/Committee for:

- Awareness

This report relates to:

- Local Policy (Resilience and Business Continuity)

This aligns to the following NHS Scotland quality ambition(s):

- Safe
- Effective

2 Report summary

2.1 Situation

This report provides Board Members with information on Resilience and Business Continuity activity during 2024-25.

2.2 Background

Resilience and preparedness are outcomes that are achieved over time by adopting a range of best practices to deliver business improvement by building capability across all aspects of the organisation, and making the most of opportunities to learn from experience. Resilience requires recognition and mitigation of risks; the implementation of means to bounce back from disruptive events; and active processes to adapt to change in the short and long term.

Areas of work include business continuity planning for all board teams; major incident preparedness including dealing with CBRN (Chemical, Biological, Radiological and Nuclear) incidents, supporting the Health Protection Team in planning for high consequence infectious diseases and pandemics; preventing and responding to terrorism and other security threats; planning for and mitigating weather related and climate change threats. We also work with colleagues in other Shetland organisations (through the Shetland Emergency Planning Forum), and on a regional and national level.

This Annual Report presents some of the key areas of work during 2024-25 and a summary of some of the work planned for 2025-26.

2.3 Assessment

This Annual Report presents some of the key areas of work during 2024-25 including the development of a Business Continuity Management System Dashboard; a re-write of the Major Incident Plan, CBRN decontamination kits and a transport and logistics project; along with exercises and training.

2.3.1 Quality/ Patient Care

Good business continuity and resilience planning is essential to ensure maintenance and continuity of services in the event of adverse incidents.

2.3.2 Workforce

NHS Shetland employs one full time Business Continuity and Resilience Officer and the DPH has responsibility as Executive Lead for Resilience. The team is therefore fragile and essentially reliant on one person. However, all managers have responsibility for business continuity planning, and a range of staff have roles to play in a major incident. It is difficult to maintain skills, hence the importance of training and exercising of plans.

2.3.3 Financial

There is no dedicated budget for Resilience and Business Continuity work other than the staff costs. All equipment and the MIMMS training were funded through Public Health Directorate underspend. Non-pay costs will continue to be a pressure within the Directorate whilst there is no dedicated budget.

2.3.4 Risk Assessment/Management

There are significant risks to the Board if we do not have a robust business continuity and resilience planning process in place. A key risk at present is the lack of decontamination facilities and trained staff in the event of a CBRN incident.

2.3.5 Equality and Diversity, including health inequalities

NA

2.3.6 Other impacts

NA.

2.3.7 Communication, involvement, engagement and consultations

NA

2.3.8 Route to the Meeting

This report was not considered by other NHS Shetland committees prior to submission to the Board.

2.4 Recommendation

- **Awareness**

3 List of appendices

The following appendix is included with this report:

- Appendix 1 : Resilience and Business Continuity Annual Report 2024-25



Resilience and Business Continuity

Annual Report
2024-2025

Introduction

Resilience and preparedness are outcomes that are achieved over time by adopting a range of best practices to deliver business improvement by building capability across all aspects of the organisation, and making the most of opportunities to learn from experience. Resilience requires recognition and mitigation of risks; the implementation of means to bounce back from disruptive events; and active processes to adapt to change in the short and long term.

Business Continuity Management (BCM) is an essential component of resilience and preparedness and a requirement of the Civil Contingencies Authority (CCA). The implementation of effective Business Continuity Plans (BCPs) in a crisis situation is seen as an invaluable step in making sure critical services are maintained for as long as possible, or if lost, can be recovered as quickly as possible.

Areas of work include business continuity planning for all board teams; major incident preparedness including dealing with CBRN (Chemical, Biological, Radiological and Nuclear) incidents, supporting the Health Protection Team in planning for high consequence infectious diseases and pandemics; preventing and responding to terrorism and other security threats; planning for and mitigating weather related and climate change threats. We also work with colleagues in other Shetland organisations (through the Shetland Emergency Planning Forum) , and on a regional and national level.

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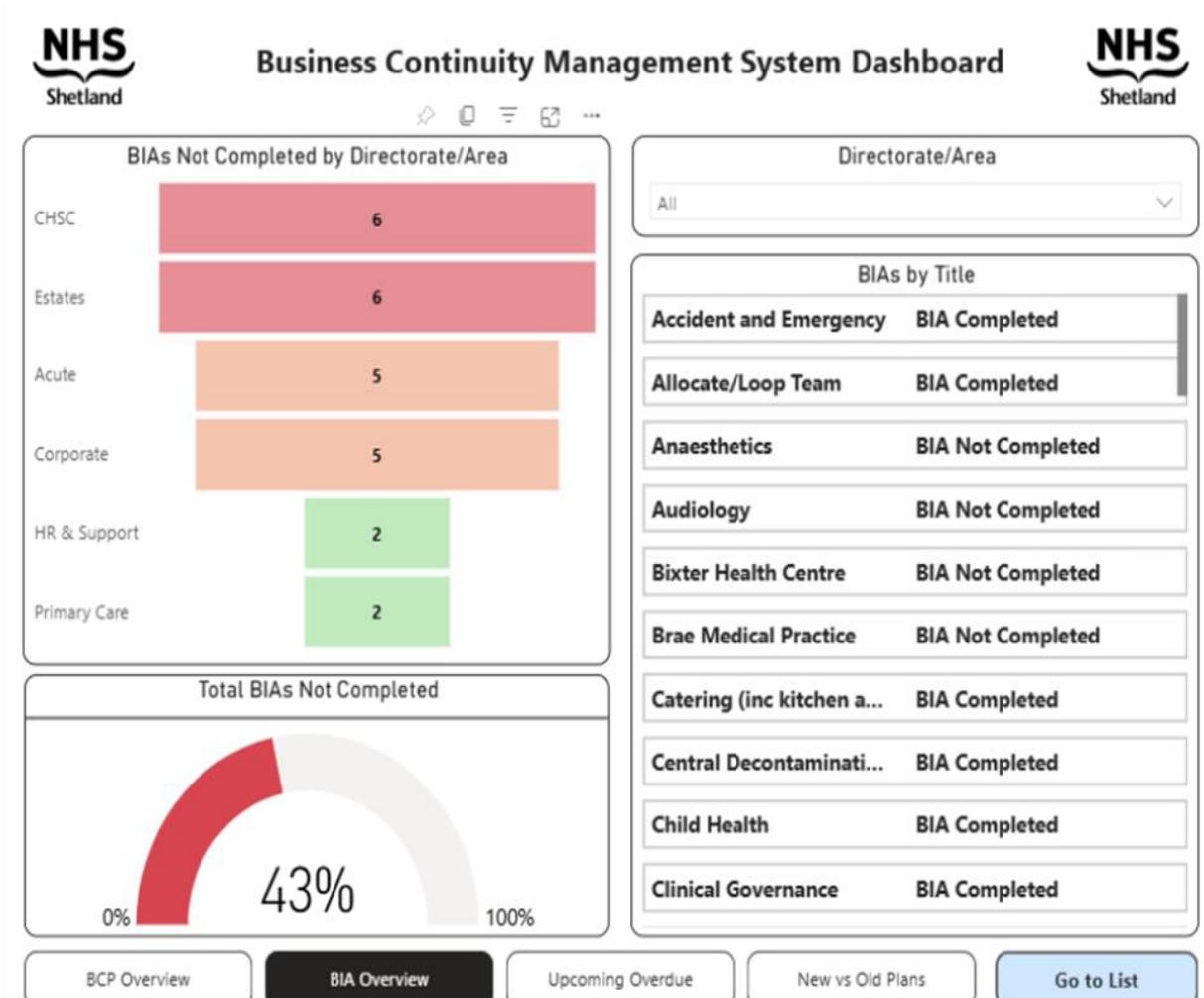
Business Continuity Planning

Work has continued to support individual departments to develop their Business Impact Analysis (BIA) and Business Continuity Plans, with the Business Continuity and Resilience Officer providing individual support to managers.

Business Continuity Management System Dashboard

Working in conjunction with the Information Department, a Business Continuity Management System was developed using Microsoft 365 automation to produce a dashboard that provides information relating the compliance rate of business

continuity plans and impact analysis. This system is in the process of being embedded on the intranet and means that performance will be visible to the whole organisation.



Major Incident Planning

The Major Incident Plan has received a ground up rewrite, reflecting the modern working practices of NHS Shetland in Primary and Secondary Care settings. This involves widening the scope of the Plan away from being a purely hospital focused mass-casualty plan into something that more encapsulates the community and the services that are delivered in it.

The Plan includes an escalation process to incorporate both hospital mass casualty incidents (which was the focus of the previous plan) and Board wide incidents such as communications failure and terrorism threats. A main feature of the Plan is a



series of Action Cards for staff who would be involved in potentially new or unfamiliar roles during a major incident.

The Plan is based on the Scottish Government’s [‘Preparing for Emergencies – Guidance for Health Boards in Scotland’](#)

and is currently in draft format with aspects of it being developed to reflect emerging needs.

The development of the Plan has identified a range of training needs for different teams of staff that are being addressed.

Five Medical Incident Officers have been trained in major incident medical management and support (MIMMS) - a systematic and practical approach to field medical management at disasters.

Chemical, biological, radiological, nuclear and explosive incidents (CBRN)

The ability to respond to chemical, biological, radiological, nuclear and explosive incidents, as well as those involving hazardous materials remains a Board responsibility. The 'Initial Operation Response' involves removing contaminated clothing and dry decontamination and is the most readily available response. This is being achieved via the provision of 'first-strike' decontamination kits in publicly accessible locations. However, it has been acknowledged that the current wet decontamination response is insufficient and impractical.



As such, an application has been made to the Capital Assets Management Group to repurpose the disused testing pod into a fixed decontamination site at the rear of Gilbert Bain Hospital.

Transport and Logistics

Through the Transport and Logistics Committee a project was commissioned to analyse the movement of staff, patients, equipment, medicines and even blood products throughout NHS Shetland. Working with the Procurement Officer, the objective was to drive cost reduction, improve overall resilience and provide a better service to patients. The process was lengthy and iterative, resulting in a report containing several findings and recommendations. Previously, arrangements were ad-hoc, fragile and depended on the goodwill of staff.

Some of the recommendations have been fully implemented and have fully redesigned how samples are collected from Primary Care and delivered to the laboratory. This involved various departments integrating working practices and communication to streamline logistics. As part of the redesign, two NHS drivers have been employed to bolster resilience and ensure effective coordination and collection of blood products and chemotherapy medicines from Sumburgh Airport. A review of fleet use and mileage claims has been undertaken, and Mental Health have been supplied with a Crown car as it was identified as a requirement to support staff. This area of work is continuing to provide tangible benefits.

Exercises and Incidents

Participating in exercises is an essential process for testing plans and to enable staff to gain experience in a range of scenarios. Learning from such exercises (as well as incidents) is incorporated into plans, and used to identify training needs.

During 2024-25:

- We participated in Exercise Safe Hands 3 and Recovery Symposium - to test the NHS Scotland Major Incident with Mass Casualties National Plan.
- Members of EMT and IT teams participated in 'Ransomware Exercise in a Box' (Cybersecurity) in May 2024

- A number of staff members from community services and public health participated Exercise Waypoint in November 2024 – a local MCA led exercise focused on evacuating large numbers from a passenger vessel.

Whenever there is a significant incident requiring business continuity or escalation plans to be implemented, there should be a review and any learning points again incorporated into plans and any training needs identified. During the early part of 2025, there had been significant late winter pressures on the hospital in particular, requiring BCPs to be implemented and escalated. Learning from this will be incorporated into the winter planning process for 2025-26.

Training

Staff have taken part in the following training during 2024-25:

- MIMMS training (major incident medical management and support) for medical incident officers - undertaken by 5 AHPs on the on call rota.
- Crisis Management Training (Chief Executive)

Actions for 2025-26

Key actions for 2025-2026 include:

- Completion of Major Incident Plan
- Implementation of Business Continuity Management System Dashboard
- Progress fixed decontamination site at GBH
- Participation in Saxavord Spaceport Emergency Planning Exercise (Exercise Lorday) in July 2025
- Participation in the UK wide Pandemic planning exercise (Exercise Pegasus) in autumn 2025
- Provision of loggist training for administrative staff
- Further Crisis Management Training for Gold and Silver Command
- Development of Winter Preparedness Plan and exercising of plan
- Planning a live hospital major incident exercise