

Date: 14.4.16 Meeting: Governing Body

Item No. 8.5

Public X Private

Author Julie Killingbeck Senior Commissioning Manager GB Lead: REPORT TITLE: North Lincolnshire CCG Fuel Plan

**DECISIONS TO BE MADE: To be ratified** 

Continue to improve the quality of services	x	Improve patient experience	Х
Reduced unwarranted variations in services		Reduce the inequalities gap in North Lincolnshire	
Deliver the best outcomes for every patient	х	Statutory/Regulatory	Х

## **Executive Summary (Question, Options, Recommendations):**

This NHS NL CCG Fuel Plan outlines the roles and responsibilities of NHS NL CCG in planning for and responding to a fuel crisis; it also highlights what to expect from the government in terms of response to a fuel crisis. The aim of the plan is to ensure that the organisation can, so far as possible, maintain its critical functions in the event of a serious disruption to fuel supply.

Recommendation

The NL CCG Fuel Plan was approved by NL Quality Group in January 2016, the Governing Body is asked to ratify the Plan.

Equality Impact	Y/N	N
Sustainability	Y/N	Y – The NLCCG Fuel Plan supports the sustainability of NL CCG to deliver services /support delivery of services during a pandemic
Risk	Y/N	Υ
Legal	Y/N	NHS organisations have a statutory duty to prepare, plan and respond to incidents that may disrupt services.
Finance	Y/N	N

Patient, Public, Clinical and Stakeholder Engagement to date									
	N/A	Y	N	DATE		N/A	Y	N	DATE
Patient:			n		Clinical: Quality Group		Υ		28/01/
					for approval and				16
					comments				
Public:			n		Other: multi-agency			Ν	
					regional top exercise to				
					test plans.				



North Lincolnshire
Clinical Commissioning Group

NHS North Lincolnshire

**Clinical Commissioning Group** 

**Fuel Shortage Plan** 



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Version 1.0

This plan replaces all previous versions and is a 'live' document. It will be reviewed as further guidance is made available.

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Date:	January 2016
Approved by:	Quality Group
Target audience:	NHS North Lincolnshire CCG staff
Review Date:	January 2019
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## **Version control sheet**

# **Plan Amendments**

Amendments to the plan will be issued from time to time. A new amendment history will be issued with each change.

Version	Issued by	Nature of	Approved	Date on
Number		Amendment	by and date	intranet
1.0	J. Killingbeck	Re-write of		
		existing plan		
		based on latest		
		guidance		

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# **Introduction**

## 1. Disruption to Fuel Supplies

All organisations rely to some extent on fuel and generally the availability of fuel within the UK is very good; however there have been examples within recent years of brief disruptions to supply, both on a regional and national basis.

A disruption could be caused by a number of factors, including scarcity of supply, a technical problem with part of the fuel supply infrastructure, industrial action or public protest. In the event of such a disruption to supply, it is also possible that stocks could be further depleted through increased consumer demand (panic buying). For example, the industrial action taken by tanker drivers in June 2008 had a widespread effect on fuel distribution throughout the UK resulting in some filling stations running out of fuel.

In the most extreme of circumstances petrol stations and commercial supplies could be exhausted within 48 hours of an incident, and it could take up to 10 days before stock levels are fully restored. The Government and downstream oil industry have a range of measures in place which aim to reduce disruption in the event of a significant fuel supply disruption. These range from informal actions such as Demand Calming Measures through to the activation, under the emergency powers of the Energy Act 1976, of the National Emergency Plan – Fuel (NEP-F). However, the decision to implement the NEP-F would only be taken if a very significant disruption to fuel supplies was to occur and Government and industry were unable to resolve the disruption without the use of emergency powers.

Organisations should therefore not expect to rely on the NEP-F for the vast majority of potential fuel supply disruptions. As such, business continuity should be the first and foremost tool for all organisations when preparing for a fuel supply disruption.

#### 2. Planning for a Fuel Disruption

The most effective way to prepare for a fuel supply disruption is to establish robust business continuity arrangements before a disruption occurs. The key aims of business continuity plans in relation to fuel disruption can be summarised as:

Reducing the dependency of the organisation on fuel

- Reducing fuel usage during a fuel supply disruption
- Improving the resilience of supply chains
- Reallocating resources to maintain essential services
- Effective communication with staff, customers, suppliers and other key stakeholders in advance of and during a fuel supply disruption.

In the event of a national fuel shortage NHS North Lincolnshire Clinical Commissioning Group (NHS NL CCG) may need to implement special measures in order to maintain the organisations critical services.

This plan outlines the roles and responsibilities of NHS NL CCG in planning for and responding to a fuel crisis; it also highlights what to expect from the government in terms of response to a fuel crisis. The aim of the plan is to ensure that the organisation can, so far as possible, maintain its critical functions in the event of a serious disruption to fuel supply.

This plan should be read in conjunction with NHS NL CCG Business Continuity Plan.

#### 3. Staff

It is envisaged that the main obstacle to be overcome in the event of a fuel shortage is that of human resources, including staff getting to work and community service delivery.

The Government (Department of Energy and Climate Change – DECC) has developed a national emergency plan for fuel shortage. This plan details 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.

In the event of a fuel disruption NHS NL CCG will ensure and expect flexibility surrounding staff transport to and from work.

- In the event of a minor fuel disruption the CCG will advise staff on responsible purchasing
  of fuel and fuel conservation, including car sharing and using public transport (as well as
  cascading central government messages to staff).
- In the event of a **major** fuel disruption the government may introduce emergency powers and put in to action various schemes in order to both conserve fuel and ensure that priority services and infrastructure are maintained. Within these schemes are contingencies to evenly distribute limited amounts of fuel to the public and also to ensure that the emergency services are supplied with fuel to provide their services.

A limited number of priority user fuel passes may be issued. These will be to maintain essential clinical/critical services.

## 4. Potential / Minor Fuel Disruption

In the event of a potential/minor disruption to the supply of fuel NHS NL CCG will communicate with staff, advising them of responsible actions. This will ensure that staff are prepared and also reinforce the message of responsible fuel purchasing which will potentially prevent a minor disruption becoming significant.

The messages given to staff in this type of scenario would 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 sensibly to conserve fuel use.
- If possible avoid using the car, use public transport, walk, cycle or car share where possible.
- Prioritise car use to have enough fuel to get to and from work if necessary.

Messages need to be communicated sensitively to avoid panic fuel buying.

## 5. Major Fuel Disruption / NHS NL CCG Emergency Fuel Shortage Group

In the event of a major fuel disruption the government may be forced to implement emergency powers under the Energy Act. Special measures will need to be put in place by the CCG in order to manage during the disruptions. Once a major fuel disruption is imminent the EPRR lead for the CCG will convene an **Emergency Fuel Shortage Group**, to be chaired by the Chief Officer. The Emergency Fuel Shortage Group will lead and direct the organisations response during the period. The group will include:

- Chief Officer (Chair)
- Emergency Planning lead
- Director of Quality
- Director of Commissioning
- Director of Finance
- Business Manager
- Communications Manager



The group will meet on a frequency proportionate to the level of disruption, as decided by the AO/EPRR lead.

The group's main objective will be to ensure that NHS NL CCG delivers its essential/critical services during the fuel shortage.

The group will also manage and oversee (through the EPRR lead) the Emergency Service Scheme and oversee flexible working practices.

#### 6. National Maximum Purchase Scheme (MPS)

The Government may implement a scheme to limit the public to **15 litres of fuel per visit** to a fuel station. General advice will be to cut down on journeys that are non-essential. Staff will be encouraged to conserve fuel as far as possible and make arrangements for getting to and from work.

## 7. Emergency Service Scheme (ESS)

Under emergency powers the Government may implement the Emergency Service Scheme (ESS). In this scheme, designated petrol stations will supply fuel to vehicles with an emergency service logo, including NHS vehicles. This will allow ambulances and other vehicles displaying a logo to obtain fuel.

Temporary logos may be issued for use by critical service staff that 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. It will be necessary to utilise this scheme in order to ensure key staff are available to provide essential services.

In the event of the ESS being implemented NHS NL Emergency Fuel Group will oversee the response

#### 8. Temporary Logos for NHS NL CCG

- Directors/EPRR lead will activate the organisations Business Continuity Plan to ensure essential/critical functions are maintained.
- Temporary logos will be issued to the on call Director for staff who require fuel to carry out essential functions
- A temporary logo will be issued to the staff member for the purpose of one visit to the designated fuel station.
- The temporary logo will be returned to the on call manager after fuel has been obtained.
- A log will be maintained re temporary logo use stating why it was required.

### 9. Car Sharing / Base Change

During a major fuel disruption the CCG will encourage essential staff to car share. Each Director should arrange for car sharing to take place wherever possible and practical. In addition, the NHS NL

Communications lead will set up an Intranet car sharing site. A degree of flexibility on start and finish times may be needed to facilitate this.

It may be necessary for staff to work from home or from a different site than their usual base. The process with be overseen by NHS NL Emergency Fuel Group on an individual basis.

## 10. Flexible Shifts and Working from Home

During a severe fuel disruption, flexibility with regard to working patterns will be needed. Directors/Managers will need to be sensitive to problems staff have regarding being at work at certain times due to transport arrangements.

Temporary changes to working hours 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.

Where possible staff may be able to work from home, however, sufficient site cover should be maintained at NHS NL CCG headquarter premises as far as possible. IT departments may be required to provide increased support for offsite access for email, etc.

#### 11. Communications

In the event of a fuel dispute the Communications Lead will provide timely and accurate staff briefs with regard to local and national information/developments that is in line with that of the government in order to maintain consistency and public confidence.

#### 12. Roles and Responsibilities

#### **Chief Officer (or deputy)**

 Chair NHS NL CCG Emergency Fuel Shortage Group in the event of emergency powers being invoked.

### **Emergency Planning Lead**

- Update the executive team and managers in the event of a potential fuel disruption
- If appropriate, convene NHS NL CCG Emergency Fuel Shortage Group
- In conjunction with the executive team, co-ordinate NHS North Lincolnshire CCG's response
- Oversee the implementation of the ESS
- Close communications with the CGG communications manager
- Collate staff travel information

#### **Directors/Managers**

- Ensure there are business continuity plans in place for critical/essential services during a fuel shortage
- Cascade communications messages to staff
- Identify staff who may work from home.

Identify staff who may work from a base near to their home

### **Business Manager**

- Ensure contingencies are in place to heat/power the trust premises.
- Consider transport for staff (Hire minibus).

### **Communications Manager**

- Co-ordinate media correspondence.
- Co-ordinate communications to trust staff.
- Set up a car sharing site on the Intranet

#### Staff

- Prioritise journeys, avoiding unnecessary journeys, taking into consideration fuel needed to attend work.
- 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 line manager/head of department giving as much notice as possible.

# 13. Recovery after a Fuel Shortage

Once fuel supplies are restored NHS NL CCG Emergency Fuel Shortage Group will undertake comprehensive de-brief and ensure that lessons learnt are incorporated into a review of the Fuel Plan.

The EPPR lead will produce a report for the Quality Group/Governing Body, detailing lessons learnt and any reviews to the Fuel Plan.

NHS NL CCG Fuel Plan will be reviewed in line with the publication of new national guidance, or immediately following the recovery of a national fuel shortage.

Appendix 1: Summary of tools in the National Emergency Plan for Fuel

Triggers for the implementation of the NEP-F will inevitably depend on the circumstances at the time, but will take into account the impact fuel shortages are having, or may have, against a range of indicators from industry, government and responder organisations. As with all decisions concerning the use of Emergency Plans, there are clear objectives which lie behind it and which the possible measures are designed to address, namely to:

- protect human life and, as far as possible, property
- Alleviate suffering
- uphold the rule of law and democratic process.
- support the continuity of everyday activity and the restoration of disrupted services at the earliest opportunity

Should it be necessary to use emergency powers, under the Emergency Powers of the Energy Act 1976, the Government would prioritise fuel to the emergency services and other essential service providers such as utility companies to make the best use of reducing quantities of fuel to minimise the impact on emergency and other essential services that underpin daily life. If there is sufficient diesel to supply emergency and other essential service providers then the surplus will be prioritised to truck stops and HGV motorway filling stations to help keep supply chains operational.

Any remaining fuel would then be allocated by the oil industry to retail filling stations where it would be likely that motorists would be limited to a maximum purchase of fuel per visit to the forecourt.

The main tools within the NEP-F are:

 Maximum Purchase Scheme which would limit the general public to 15 litres of fuel per visit (though this is variable). This is designed to ensure that all motorists have access to some fuel;

- Designated Filling Stations (DFS) would provide priority access to road transport fuels for defined customers requiring them for a priority use. The Department of Energy and Climate Change (DECC) would implement the scheme designating a number of filling stations for the provision of fuel for Emergency Service Scheme,
- Utilities Fuel Scheme and Temporary Logo Scheme priority use only. Fuel suppliers/distributors will be instructed to give priority deliveries of fuel to these sites
- Commercial Scheme which prioritises diesel supply to commercial filling stations and truck stops to support the continuation of critical supply chains;
- The Emergency Services Scheme under which fuel would be prioritised to Designated Filling Stations and would allow unlimited fuel to blue light emergency vehicles
- Utilities Fuel Scheme under which fuel would be prioritised to Designated Filling
   Stations for use by logoed vehicles in the delivery of pre-identified essential services
- Temporary Logo Scheme under which some vehicles delivering essential services will be able to access fuel at Designated Filling Stations;
- Bulk Distribution Scheme which enables oil companies and distributors to prioritise fuel products to supply retail filling stations, truck stops, depots and commercial storage sites
- Mutual Aid Scheme under which the DECC has encouraged organisations to develop voluntary mutual aid arrangements to support the delivery of essential services.

Further details on the NEP-F can be found on the DECC website.https://www.gov.uk/government/organisations/department-of-energy-climate-change

Appendix 2: T	emplate for	recording	staff travel

The template below should be completed by all CCG staff members and reviewed annually.

Recording how staff travel to work and any alternative means of transport will inform business continuity planning processes.

Directorate:	
Name	
Home Town / City	
**Primary Mode of Transport:	
Car	
Motorbike	
Bus	
Bike	
Foot	
Rail	
Rail operator	
Key Role In Organisation	
**Alternative mode of transport	
<del></del>	

<sup>\*\*</sup> essential

North Lincolnshire Clinical Commissioning Group