



National Ambulance
Resilience Unit
NARU



ANNUAL REPORT 2013-14





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1.0 Executive Summary

This Annual Report has been prepared for stakeholders by Keith Prior, Director, National Ambulance Resilience Unit (NARU). The report provides a narrative and commentary for the year ending March 2014 with progress in main areas highlighted.



Keith Prior,
NARU Director

The NARU SLA between Department of Health (DH) & West Midlands Ambulance Service NHS Foundation Trust (WMAS) was concluded on 31st March 2013. Tripartite negotiations between DH, NHS England & WMAS to transfer the SLA to a contract between NHS England and WMAS Foundation Trust were completed and the contract for 2013-14 was agreed at the end of March 2013 and commenced on 1st April 2013.

Governance - As part of an improved governance structure, NARU developed an Annual Business Plan (ABP) for 2013-14 that directly linked to the 3 year strategy developed earlier during the year. The ABP and Strategy were approved by the DH/NHSE NARU Resilience Board in February 2013. The ABP detailed how NARU intended to deliver its objectives and work plan for 2013-14. A review of the governance structure will be held during quarter one of 2014-15. NARU has also seconded a full time Compliance Officer to enhance governance and support legal compliance across its work programme.

Finance - The overall financial position at the end of Month 12 is breakeven against plan. It should be noted that NHS England requested that NARU identify funds to provide additional support for the Ambulance Trusts to meet urgent JESIP (Joint Emergency Services Interoperability Programme)

training costs. This was provided through in year efficiency savings and re-prioritisation of spend.

Regular budget meetings with the senior NARU team as well as WMAS management accountant's attendance at the Management Team meetings continue. The detailed analysis of monthly expenditure is reviewed at both meetings. NHS England is provided with this financial information periodically for review.

NARU continues to provide efficiency savings during the 2014-15 financial year. We have identified significant cost savings of 4% against the 2013-14 budget, which we aim to realise during 2014-15. The fact that our budget has not been uplifted to take inflation into account means that we will need to achieve a cost improvement programme of approx 6% during 2014-15.

Work Plan Delivery - NARU has delivered the agreed work plan on time and within budget against a backdrop of considerable change and uncertainty.

Other - Work continued and developments have been made in many areas including, clinical, education, research, interoperability, communications and stakeholder engagement, procurement, capabilities and joint work with Association of Ambulance Chief Executives (AACE).

NATIONAL AMBULANCE RESILIENCE UNIT

Our Mission Preparing for the Future, Protecting Lives Today

Mission





2.0 Introduction

Since July 2011, responsibility for the delivery of national emergency preparedness policy in NHS ambulance services in England has been delegated to the National Ambulance Resilience Unit (NARU), hosted by West Midlands Ambulance Foundation Trust (WMAS) through a SLA/Contract with DH. In April 2013 this transferred to a contract with NHS England.

BACKGROUND

NARU's main aim is to support the resilience objectives of NHS England, the Association of Ambulance Chief Executives (AACE) and Ambulance Commissioners, putting patients and the safety of staff at the forefront of any planned response.

The SLA/Contract detailed the arrangements and expectations for NARU's contribution in support of the UK's Civil Resilience and counter-terrorism (CONTEST) strategies and DH commitments under the UK's National Security Strategy and the National Security Council.

The SLA/Contract was designed to ensure that the management of NARU and the delivery of the Service would be professional, appropriately skilled, experienced and would provide good governance. It was agreed that WMAS would determine the skill-set of resources required to undertake each of the work programmes, including (but not exclusively limited to) programme management, clinical advice, operational management, procurement, finance management, education, training and exercising delivery and that these skills would be delivered within the overall funding envelope agreed.

NARU successfully reduced the budget for 2013-14 by over 50% from 2011 when WMAS took over the SLA/Contract. It is acknowledged that part of this reduction was due to the completion of the HART roll out programme but a significant amount has been saved through efficiencies realised by NARU both in personnel reduction and improvements to procurement and contracting.



3.0 Governance

Regular meetings have been held between the NHS England National Lead for EPRR and the Director of NARU to discuss and resolve any issues.

Regular monthly Delivery Board meetings have been held in accordance with the Terms of Reference, chaired by the NARU Director.

As part of an improved governance structure, NARU developed an Annual Business Plan (ABP) for 2013-14 that directly linked to the 3 year strategy developed earlier during the year. The ABP detailed how NARU intended to deliver its objectives and work plan for 2013-14. It also provides a narrative and information on:

- **Strategic Direction.**
- **Governance & Structure.**
- **Financial Management.**
- **Risk Management.**
- **Annual Planning Cycle.**
- **Development Programme.**
- **Review of Performance 2012/13.**
- **2013-14 Objectives and KPI's**

The 2014-15 ABP has now been published and work is ongoing to develop an Integrated Performance Report to enable easily identifiable evidence to be provided to the board and stakeholders of performance against a number

of pre-determined elements derived from the objectives. In January, NARU seconded a Compliance Officer to support effective governance and risk management across its work programme. A project is now well underway to confirm and challenge the national capabilities coordinated by NARU against legal, regulatory and professional standards.





4.0 Finance

The overall financial position at the end of Month 12 is breakeven against plan. It should be noted that in 2013 NHS England requested that NARU identify funds to provide additional support for the Ambulance Trusts to meet urgent JESIP (Joint Emergency Services Interoperability Programme) training costs. This was provided for through in year efficiency savings and re-prioritisation of spend.



All outstanding accruals from 2012-13 have been cleared and the balance of cash held relating to the accounting periods up to 31 March 2013 has been returned to DH. The return was in line with the estimates submitted in April 2013.

A 2014-15 budget was prepared for discussion with NHSE in line with the Budget Setting principles agreed by the WMAS Trust Board, and a final Budget has been agreed with NHSE which reflects their requirement to identify a 4% CIP reduction in costs compared with 2013-14. With no inflation uplift this equates to Cost Improvement Programme of approximately 6% during 2014-15.

Regular budget meetings with the finance department and the attendance of the appointed management accountant at the management team meetings continue. The detailed analysis of monthly expenditure is reviewed at both meetings and NHS England is sent financial information for review. Final accounts have been provided to NHS England and the WMAS Director of Finance.

5.0 Work Plan Delivery

NARU has delivered the agreed work plan. The work plan has been delivered on time and within budget against a backdrop of considerable change and uncertainty in light of the change in commissioning arrangements from DH to NHS England.

EDUCATION

The Education Centre has continued to deliver training and education with a total of 2295 candidates attending resilience related courses, exercises, workshops or other events coordinated and delivered either by or with significant input from the Education Centre team. Courses have included: Incident Response Unit, Assurance, HART Team Leader, Personal Respirator Protective Suit (PRPS) Instructor and Command courses plus many others. Exercises have included Exercise Amber 2, which was the biggest exercise and capability demonstration of its type ever held with almost 600 participants and over 200 observers.

In line with the NARU strategy and to meet future demands the Education Centre has now been reconfigured, this has involved realigning staffing to provide less training staff on a full time basis but with the ability to surge as and when required. Also as part of the NARU strategy, consultation has taken place with Trusts to determine demand and course types required for future delivery. The training infrastructure (buildings and equipment) has been maintained and enhanced and new training equipment includes human patient simulators in pre-hospital care.

The HART roll out is now concluded and the final site at Great Notley in East of England Ambulance Service was officially opened on 11th October 2013. The HART programme has delivered 15 English HART teams plus a team in Wales. Maintenance of HART continues with regular scheduled IRU (Incident Response Unit) and USAR (Urban Search and Rescue) courses on-going as well as those previously mentioned. New HART Team Leader courses have been designed and delivered following a full training needs analysis. It is essential that these courses continue to ensure all newly recruited team members are trained as required.

The MTFA training has been designed and continues to be delivered across all three blue light services during 2013-14 including command and control and this has had significant input and lead from the NARU Education Centre staff. NARU chairs the on-going multi-agency MTFA training subgroup and workshops have been conducted with input from all model response sites. Future training is being designed ready for implementation.

The NARU Education Centre have continued to deliver multi-agency courses at CoP (College of Policing), FSC (Fire Service College) such as MAGIC (Major Incident Gold Incident

Other training designed and delivered during the year includes:

- **Operational Assurance courses - significant learning, especially clinical skills, has been identified and has been incorporated into local training programmes combined with national interoperability refresher training.**
- **Operational CBRN / major Incident command courses - these have been re designed and delivered at increased frequency resulting in increase in candidates trained.**
- **Critical Incident Debrief course - utilising Lessons Identified Debriefing system in design phase.**





National Ambulance Resilience Unit

NARU

Commanders), PNCBRNC (Police National CBRN Centre), NILO (National Inter-agency Liaison Officers) initial and refresher training and is continuing to play a key role in the JESIP Operational and Tactical command training modules that are being designed. Again in line with the NARU strategy, international links have been strengthened with input to various EU workshops and requests from Netherlands to deliver IRU style courses, from India to support on going training and from Gibraltar to provide bespoke CBRNE training.

The NARU Education Centre has hosted various International visits including from Canada, Netherlands, India and the USA. Discussions are continuing with regard to accrediting or affiliating the NARU Education Faculty with a Higher Education Institute (HEI) and the achievement of the Skills for Health Quality Mark. Work continues to source new funding opportunities for example NARU has been in discussion with Gibraltar with regards to providing an EPRR audit and gap analysis.

In addition other key milestones this year include;

- Entering final stages of the Skills for Health Quality Mark for the Education Centre, we will be the first NHS organisation to gain this important standard.
- Embedding all areas of JESIP and IOR into existing courses and benchmarking courses, delivered courses on behalf of AACE.
- Maintaining high standards of delivery and high throughput of candidates, including development of training facilities such as multi-use PPE training facility.

- Conducted various high profile workshops and exercises such as DH EPRR strategy event, Delphi study and Exercise Amber 2. Engaged at various levels in planning for JESIP final exercise.
- Designed and conducted workshops and events including exercises enabling the embedding of IOR in to NHS training including leading on the development of centralised IOR training products for wider NHS.
- Faculty members received Chief Ambulance Officers commendations for Exercise Amber 2.
- Education centre won the Advancing Healthcare Special Achievement Award for delivery of high quality resilience education courses and exercises.
- Maintained International links including two visits to US Department of Homeland Security CBRN training centre, team member assisted RUSI with visit to India and we hosted visit from Holland.
- Maintained MTFA assurance exercise programme including 3 bespoke dip sample events and attendance at 6 MTFA exercises.
- Delivered a variety of educational products for use in Trusts locally including Ketamine, MTFA and updates to 'Train station' immersive exercise and workshop software.
- Maintained close links with JESIP including participation in training design pilot and delivery, additionally managed the central registration of all JESIP delegates try service on a national basis.
- Worked with the Preparedness work stream to develop and bring to pilot stages the HSCA programme.

RESEARCH, EVALUATION AND MONITORING

In association with Zeal Solutions, NARU has delivered the following during the year to date:

Resilience and capability assessment - NARU conducted the resilience and capability assessment of HART personnel across England and Wales. This achieved just under a 90% response rate. A new benchmark report has been produced that is now being used to help assess the preparedness of each HART Unit. All sites have received face to face feedback and received coaching on how to make best use of their results. A national report has been prepared and feedback sessions have also been scheduled with the National Directors of Operations group and the Directors of Human Resource group.

Stakeholder engagement - We have conducted a review of all stakeholders and submitted a report on stakeholder perspectives. This process has identified areas of strength as well as areas for development/focus. NARU will work with stakeholders throughout 2014-15 to implement the recommendations.

Resilience commander research - We are currently conducting a piece of research looking at 'what makes for an effective commander' as well as what influences commander resilience. This work will continue throughout 2014-15 and will provide the ambulance services with required evidence in this area that can then be used to support the selection and development of commanders.

PROCLUS National Asset Register - We have developed and implemented the first phase of the PROCLUS national asset register. This register is now ready for use by ambulance services and can be used to support major incidents and mutual aid.

PROCLUS Lessons Identified Sharing Tool - We have trained all ambulance services on the PROCLUS lessons sharing tool. This will provide NARU with the platform to share lessons and monitor change on a national basis.

PROCLUS training centre - We have developed and implemented the PROCLUS training centre which enables all HART Units to record and monitor skills and capabilities.

MTFA - We have supported in the selection of MTFA personnel and have now designed a process that can be used to monitor the confidence in personnel that have been selected for this role.

Evaluation of NARU training - We have evaluated the NARU IRU and USAR training and established the impact and effectiveness of this training. A report has been submitted into the NARU education centre.





JESIP's stated aim is:

“To ensure the blue light services are trained and exercised to work together as effectively as possible at all levels of command in response to major or complex incidents (including fast moving terrorist scenarios) so that as many lives as possible can be saved.”

THE JOINT EMERGENCY SERVICES INTEROPERABILITY PROGRAMME (JESIP)

In times of emergency, the ‘blue light’ services of ambulance, police, and fire and rescue must be able to work together effectively and seamlessly to contain and tackle the crisis and protect the public. However, reviews following the July 2005 London bombings, the destructive floods across the UK in 2007, and the shooting of 12 people in Cumbria by Derrick Bird in 2010, all reported gaps and failings in the levels of interoperability between the services.

JESIP was established following a report by the Association of Chief Police Officers, Chief Fire Officers Association (National Resilience) and Association of Ambulance Chief Executives (AACE), which was sent to the Home Secretary in April 2012. The programme is run by the three blue light services, funded by the Office for Security and Counter-Terrorism (OSCT), and supported and overseen by a cross-departmental Ministerial Oversight Board.

JESIP is time-limited to deliver its stated objectives by September 2014 and has now moved into the delivery phase with the development of its products and deliverables. The programme has developed 2 key modules for Multi-Agency on Scene and Tactical Command; these cover the interoperability principles and Joint Decision Making. There is also a full exercise programme associated to the training products. A communication strategy has been developed and this has been utilised to ensure Ambulance Trust involvement. Transition and legacy plans are currently being developed to ensure the JESIP principles are continued following the end of the planned programme.

NARU provide co-ordination of the JESIP training through an MOU and the NARU Director is a member of the JESIP Programme Board and attends Strategic Board meetings. NARU have also provided Subject Matter Experts to provide input to various JESIP sub groups. The embedded NARU SME has:

- Led the multi-agency team in the development of Tactical and Operational Commander Courses, which has so far be delivered to over 6000 commanders across the emergency services.
- Delivered National Train the Trainer Package which has produced a network of over 350 interoperability trainers across Ambulance, Fire and Police.
- Led on development and provided SME input for the e-learning package which is available to every Ambulance, Fire and Police responder as well as all Category 2 agencies with the purpose of embedding interoperability at all levels. The NARU lead is currently developing a commander specific e-learning package.
- Leading on the development of Control Room training which will be rolled across all emergency services in the summer of 2014.

CLINICAL

NARU has reviewed the content of the IRU and USAR courses increasing the clinical component to reflect HART's role in providing clinical care within the warm and hot zones. Dr John Stephenson (NARU Medical Director) has also developed a clinical session for the bronze commander course to give an introduction to CBRNE.

The NARU Medical Director is a member of the NHS England EPRR Clinical Reference Group and is also providing support to NHS England in pandemic flu planning (surge) and other miscellaneous projects.

NARU involvement with the group preparing a response to large E-coli outbreak continues as does the NARU discussions with the National Ambulance Service Medical Directors (NASMeD) group and commissioners to try and establish a unified view of MERIT and how they can work to provide mutual aid; this is now being taken forward in conjunction with NHS England. In addition NARU have now achieved a National agreement on the use of Ketamine and Midazolam by HART Paramedics and the NARU Medical Director has also been assisting NHS England by supporting the operational response to a number of NHS Resilience Issues. Other notable clinical achievements include:

- Mass Casualty Equipment Vehicles Delphi Study completed and results currently being collated into report and recommendations.



- Training and exercising programme for MTFAs has been further refined, with emphasis on clinical care delivery.
- Clinical element included in all the NARU training programmes, delivered when possible by the NARU Medical Director or another doctor from the clinical subgroup.
- Clinical content of all training courses reviewed and updated.
- New Triage algorithm for Mass Casualty Incident developed and agreed with NASMeD.
- Continued membership of Military CBRN Training Faculty to try and work to same protocols using same scientific research.



COMMUNICATIONS & STAKEHOLDER ENGAGEMENT

Key achievements last year:

- Established strong website presence and developed social media strategy that has placed NARU at the heart of the online EPRR community.
- Delivered high quality presentations at a number of National and International conferences and exhibition events held in England including CBRNE Europe (London), JESIP Engagement (various locations) and the Emergency Services Show (NEC), in order to get key messages about NARU to key stakeholders.
- Held a briefing presentation of NARU to Key Stakeholders.
- Introduced NARU news stakeholder update magazine and developed a user database.
- Produced several high quality NARU publications, including Major Incident Action Cards and Command & Control Guidance.
- Worked with Trust communications teams to ensure NARU mission and values are communicated across ambulance services and to institute an agreed media handling protocol.
- Delivered a bespoke booklet and DVD to Ambulance commissioners outlining the legal responsibility on Clinical Commissioning Groups in the commissioning of EPRR and HART.
- Involved in the production of several films designed to deliver key messages to staff and the wider Emergency Planning community. These have included the Initial Operational Response (IOR) video and various training films for MTF, CBRNE, Ketamine Risks and Benefits, and Mass Casualty events.

EMERGENCY PREPAREDNESS, RESILIENCE AND RESPONSE GROUP (EPRRG)

During 2012/13 significant changes were delivered within the EPRRG and in its relationship with NARU as the two organisations merged.

It has been agreed by all parties that these changes have universally been for the better and very close links have now been forged between the different work streams of the EPRRG and NARU with this being reflected in the new NARU structure. The result has been an increase in productive work during 2013-14 and outputs of value to both the Ambulance Service nationally and its individual Trusts.

EPRRG achievements include:

- Ambulance Service EPRR Specification completed and included in Ambulance Service section of NHSCB 'EPRR Core Standards'.
- Ambulance Service Guide to 'Preparing an Emergency Plan' completed and included in the NHS England EP Framework.
- The National Ambulance Coordination Centre (NACC) Plan and National Mutual Aid plan, produced by NARU for the Olympics have been reviewed in light of lessons learnt from the 2012 Games. The new plans have now been implemented and utilised during Fire & Rescue Service Strike of 2013-14.
- Ambulance Service HART Audit completed and report published.

- Work continues to develop the Training Centre.
- Major Incident Action Cards completed and distributed to Trusts and put in use by all Trusts during first quarter of 2013-14.
- IOR Guidance delivered and currently being implemented IOR implementation plan for 2014-15 completed.
- Ambulance Service element of Lexicon finalised.
- Planned change for Business Continuity Plans from BS 25999 to ISO 22301 and the implications.

CAPABILITIES

NARU personnel have continued with on-going involvement in various initiatives such as:

- Development of a MOU between Ambulance Services and Police Forces for the provision of nerve agent antidotes during CBRN incident.
- Development of a MOU between Ambulance Services and Police Forces for the provision of safe undressing procedure during CBRN incidents.
- Development of a MOU between Ambulance Services and the MOD Technical Response Force (TRF) for the provision of command, advice and medical cover in the event of a TRF deployment – currently in draft form.
- Development of a MOU between NARU and Scottish Ambulance Service for the provision of pre-planned mutual aid of commanders and specialist assets to the Commonwealth Games 2014 (ongoing).
- Delivery of a standardised NARU log book to all Trusts.



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- Delivery of the Ambulance Service Hazmat / CBRN guidance to all Trusts.
- Specification development of the next generation of HART vehicles and technology based on operational experience and learning.
- Procurement of new generation DIM equipment.
- Support to the EPRR Response work stream in the development of Ambulance CBRN / Hazmat guidance.
- Maintenance of a robust NARU central stores facility at Winterbourne Gunner.
- Support to the development of the National Asset Database.
- Establishment of a 'quarantine' area within NARU stores for defective equipment thus reducing the risk of redistribution.
- Support to the PN CBRN C Operations Room.
- Chairmanship of the National HART Co-ordinating Group.
- Chairmanship of the National HART Vehicle & Equipment Group.
- Standing member of Police CBRN National Practitioners Group.
- Standing member of Fire & Rescue Service CBRN National Users Group.
- Standing member the Emergency Services CBRN National Working Group.
- Standing member of MoD Technical Response Force Co-ordinating Group.
- Standing member of DSTL Armour and Protection Cross Government Community of Interest Group.
- Standing member of the Home Office PPE replacement Programme Board.
- Standing member of the Home Office PPE replacement Project Board.
- Standing member Emergency Services DIM Working Group.
- Standing member of the IOR / SOR Health Group.
- Standing member of the IOR Programme board.
- Standing member of the Multi Agency Decontamination Group.
- Standing member of the EPRRG.
- Co-ordination of the deployment of pre-planned mutual aid of commanders and specialist assets to the Commonwealth Games 2014.
- National Inter-Agency Liaison Officer Co-ordination.
- Development of plans and support to DCLG and Ambulance Trusts before and during Fire & Rescue Service industrial action.
- Achievement of Capabilities activity within set budgets. Development of a number of bespoke procurement frameworks for Ambulance HART specific equipment e.g. new DIM equipment – Procured initially by NARU on behalf of Trusts resulting in significant cost savings to Trusts through economies of scale.
- Review of national stockpiles of PRPS suits in conjunction with NHSE and DH.
- Stock replenishment of consumable items and service of ventilators on 24 mass casualty vehicles across England.
- Review of contract with regard to logistics to ensure value for money (on-going).

PROCUREMENT

Work continued this year to ensure that NARU improved its procurement processes.

This was led by the dedicated WMAS NARU procurement lead and overseen by the WMAS Head of Procurement who is a member of the Delivery Board. The current procurement process instigated by NARU through WMAS has produced a number of cost savings within this domain.

All contracts managed by NARU are open for all Ambulance Services to procure from if they so wish and in addition many are also available cross government to support the interoperability agenda.





6.0 Past Year Performance

Last year's Annual Business Plan set out the strategy, objectives and delivery mechanism and was the first Annual Business Plan developed by NARU.

NARU has delivered the agreed work plan and set of objectives. The work plan has been delivered on time and within budget against a backdrop of considerable change and uncertainty in light of the change in commissioning arrangements from DH to NHS England.

Also the 2013-14 NARU objectives have also been delivered. These were set against four Strategic developments goals:

- 1. Achieve Quality & Excellence**
- 2. Always Learning, Innovating and Developing**
- 3. Ensure Effective Stakeholder Relationships**
- 4. Provide Sound Governance, Value for Money and Financial Control**



During 2013, NARU commissioned a stakeholder engagement review. This review established a genuine and positive need for NARU. In brief, stakeholders were in agreement and supported the fact that NARU:

- Coordinates resilience nationally.
- Helps to promote the importance of resilience nationally (and internationally).
- Acts as a specialist point of contact, and provides advice, best practice and guidance.
- Acts as a strategic link between government departments and the services.
- Provides access to high quality, high impact training on matters associated with resilience.
- Although there is still more work to be done with stakeholders, these results demonstrate the positive outcomes of the steps that have been taken to professionalise the NARU service.

(See Table opposite)

1. Strategic Goal - Achieve Quality & Excellence	Delivery Risk	Year End Outcome
1.1 Full delivery of the 2013-14 agreed Work Plan	Amber	Green
1.2 Continued achievement of agreed on-going objectives in the NARU Strategy	Green	Green
1.3 Work towards aligning NARU contract to CSR timescales	Red	Green
2. Strategic Goal - Always Learning, Innovating and Developing	Delivery Risk	Year End Outcome
2.1 Active progression of the development objectives in the NARU strategy	Red	Green
2.2 Improve the engagement with and the well being and safety of the NARU workforce	Green	Green
2.3 Deliver Service Improvement and increased efficiency	Amber	Green
3. Strategic Goal - Ensure Effective Stakeholder Relationships	Delivery Risk	Year End Outcome
3.1 Build and maintain positive relationships with Stakeholders	Green	Green
3.2 Ensure a successful transition to NHS England	Red	Green
4. Strategic Goal - Provide Sound Governance, Value for Money and Financial Control	Delivery Risk	Year End Outcome
4.1 Ensure financial break even	Amber	Green
4.2 Ensure good governance is embedded within NARU	Green	Green
4.3 Ensure WMAS procurement processes are embedded within NARU	Green	Green
4.4 Design the NARU commissioning arrangements with NHS England	Amber	Green





7.0 Other Information

As Stakeholders may be aware, following a review in 2013, NARU successfully reorganised it's management structure reducing the number of Senior Ambulance Advisor and Ambulance Advisor posts, appointing a Compliance Officer and redesigning the delivery structure.

This has resulted in significant cost savings within the pay budget. The Compliance Officer post is designed to conduct a comprehensive review of the statutory and regulatory requirements and to review the existing service specification applicable to NHS Hazardous Area Response Teams (HART) across the UK. The purpose is to ensure there is a safe and effective service for patients and NHS staff responding to high-risk incidents. The post was initially for a fixed six month secondment, however after a reassessment, the post has now been extended to the end of 2014-15.

NARU On-Call was implemented during 2012 and various improvements have been made to its capability. The On-Call Officer provides support, guidance and action if necessary, in the event of an untoward incident or disruptive challenge that may impede the daily operations of NARU; this includes staff and national assets. The On-Call Officer will also provide support to the wider ambulance service / NHS networks on a national basis, as well as to partner agencies for example the Technical Response Force. The system ensures two NARU Officers are available 24/7 for telephone calls or response as required. Specific equipment, criteria, skill sets, remuneration and standards of competency have been identified in line with national guidance and Skills for

Justice National Occupational Standards (NOS) for Ambulance Commanders. The On-Call Officers are also available to provide expertise and support to the NHS England Command Centre and the National Ambulance Coordination Centre as required.

The NARU On-Call system has already proved its worth, supporting National Ambulance Resilience during such high profile events as the Somerset floods, the National Fire & Rescue disputes and a challenging decontamination incident.

Support continues to be given to NARU by WMAS FT in areas such as Procurement, Information Technology, Human Resources, Information Governance, Finance, Fleet and Logistics, Special Operations and the Chief Executive and his office.

NARU SHOWS INTEROPERABILITY AT ITS BEST WITH SUCCESSFUL DELIVERY OF EXERCISE AMBER

Feedback from observers at the National Ambulance Resilience Unit (NARU)-organised Exercise Amber 2 has revealed it to be one of the largest and most significant ambulance-led exercises ever held in the UK, with its success referred to by one Government department official as ‘showing interoperability at its best’.

Exercise Amber 2 was one of the largest exercises ever undertaken by the NHS Ambulance Service on a national basis, and involved over 500 people to test the combined emergency service response to a highly complex major mass casualty incident. It took place in May 2013 at a closed army base in Staffordshire.

In addition to staff and equipment from all 10 English NHS Ambulance Services plus the ambulance service of the Isle of Wight, the military, several police forces, fire & rescue services, air ambulances and voluntary groups, Exercise Amber 2 also included around 130 people acting as ‘casualties’ at the event – most being paramedic and nursing students from regional universities in the Midlands. Almost 200 observers from various Government departments and other emergency services backgrounds attended to view the exercise.



Dr Anthony Marsh OAM, Chair of the Association of Ambulance Chief Executives and Chief Executive of West Midlands Ambulance Service NHS Foundation Trust said:

“It is the most significant exercise that NHS ambulance services have ever conducted with our partner agencies in this country. This event was about assessing and demonstrating our joint working procedures, in making sure that in the event of a highly challenging, large scale untoward incident, the ambulance services can integrate quickly to respond effectively to treat the casualties and save as many lives as possible under the most extreme circumstances.”

“Of course, we all hope that situations such as the scenario we exercised today will not happen in real life, however the reality is that as part of the emergency services we are mandated to deal with a wide variety of incidents so it is vital we are prepared.”

Exercise Amber 2 was developed and led by the ambulance service’s National Ambulance Resilience Unit (NARU) – which is hosted by West Midlands Ambulance Service NHS Foundation Trust. It was a ‘live-play’ exercise that clearly demonstrated the complex response required by the ambulance service and their partner agencies to deal with a mass casualty incident.

Keith Prior, the National Director of NARU said:

“The feedback we have had from observers, officials within Government departments and politicians right up to the Home Secretary, has been that Exercise Amber 2 was an extremely well organised event which gave a lot of people their first real taste of what it actually means when we talk about interoperability and about emergency services organisations genuinely working together.”

“As a national body delivering high quality training and exercising to the NHS, NARU was perfectly placed to run an exercise of this magnitude and we hope to be running more of these in future. The hard work and dedication of the whole team who worked on this event cannot be underestimated and I am proud they are part of my team here at NARU.”





Exercise Director **David Bull** OAM, the NARU Head of Education, said:

"The Ambulance Service response capabilities for mass casualty incidents have developed significantly over the past ten years, in terms of equipment, infrastructure and staff, and it is the same for our partners in fire and police. So it is vital that we run exercises like Amber 2 with our colleagues across the emergency services spectrum, helping us really emphasise the patient as the primary focus for emergency services staff who find themselves on-scene at particularly challenging incidents. There is no doubt these exercises help us to learn more about working with each other to save lives in a dynamic and highly realistic environment and therefore help us remain better prepared if the real thing happens."

Exercise Amber 2 provided an excellent opportunity for observers to see how all parts of the ambulance service would work together during the response to a mass casualty incident and gave observers the opportunity to get to grips with the intricacies at very close quarters, including:

- Multi agency on scene command
- Specialist response capabilities
- Patient treatment in challenging environments
- Casualty Clearing Station procedures
- Ambulance Mutual Aid and Coordination

The Exercise follows a year on from the original Exercise Amber event which took place in London to test preparedness and resilience in advance of the Olympic Games in 2012.

Even the paramedic and nursing students who were involved in the event acting as casualties contacted NARU afterwards to say how much it had helped them with their studies. Staffordshire Paramedic students Georgina Henry, Caroline O'Neill, Nikola Tomlinson & Kate Hawcroft wrote to say

"Thank you for such a brilliant day! We had such a great experience, one we will never have an opportunity to do again and it was all down to your kindness to allow us take part in the day. We were astonished how well the day ran, the police, fire and paramedics were all very friendly and approachable and never made any of us feel an outcast. We shared our experiences with our colleagues within the university and I cannot thank you enough for the experience and knowledge which it gave us!"

Kevin Armstrong, Course Leader of the Staffordshire University paramedic course said:

"The day was a fantastic opportunity to observe the capabilities of UK emergency services to a complex attack. This exercise demonstrated how the services, especially the ambulance service, have developed and evolved over recent years to the ever growing threat of attack on the UK. The success of the exercise is testimony to the hard work and determination of the National Ambulance Resilience Unit and partner organisations."

"The collaboration between multiple agencies seemed flawless from an observational perspective and the organisation and management of the exercise was extremely professional - members of staff from the university commented how much they enjoyed, and learned from, the experience."



8.0 Conclusion

In terms of achievements, NARU has continued to improve governance arrangements, provided further in year cost reductions and efficiency savings and has developed an enhanced profile with stakeholders.

NARU has provided credible Clinical leadership to the Health EPRR community and agenda and have improved clinical standards and patient care in Mass Casualty scenarios. It has trained and exercised a large number (approximately 2300) Ambulance and other staff in HART, USAR, MTF, CBRNE and Command techniques and has significantly improved staff safety and patient care in a number of different environments. NARU has delivered the Ambulance requirements and supported the resilience objectives of NHS England, the Association of Ambulance Chief Executives and Ambulance Commissioners. In addition NARU have also provided support to the UK's Civil Resilience and Counter-Terrorism (CONTEST) strategies and the DH & NHS England's commitments under the UK's National Security Strategy and the National Security Council and continues to provide a wealth of subject matter expertise, leadership and support both to stakeholders within the health community as well as across partner agencies and other government departments.

NARU has successfully managed a number of procurement contracts reducing costs in the process. Delivered cost savings for the Mass Casualty Vehicles and is in the process of delivering more savings. NARU has reduced the cost of the strategic national PRPS reserves and delivered huge improvements to the safety of staff in areas such as Safe

Working at Heights equipment and Water rescue. NARU is continuing work in all these areas to further reduce costs for 2014-15.

NARU has also provided an evidence base to influence future training, decision making, staff competence and safety and provided an environment for Lessons Identified to be shared and assessed and finally the NARU education centre won a special achievement award for their work training paramedics for specialist duties at the Advancing Healthcare Awards 2014 and is working towards the achievement of the Skills for Health Quality Mark in 2014-15.



The NARU Education Centre won the Advancing Healthcare Special Achievement Award for delivery of high quality resilience education courses and exercises.

The NARU Education Centre also won a special Outstanding Achievement Award from the West Midlands Ambulance Service in March 2014 for the excellent organisation of Exercise Amber 2 in May 2013, one of the largest and most significant ambulance-led exercises ever held in the UK.



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For further information please contact:

National Ambulance Resilience Unit (NARU)

Website: www.naru.org.uk