

Exercise Report – Exercise Cygnus 18-19 October 2018

Summary of Recommendations:

- Two National Recommendations raised at National Debrief 16 November 2016
- **Four key recommendations to be raised at ERF EPB bold and then monitored by ERF PAG & WOT.**
- **Four further recommendations to be monitored at ERF PAG & WOT**
- Ten recommendations outside of the agreed exercise scope passed to appropriate agency with no further action for ERF WOT.
- Ten further recommendations to be linked to others recommendations and/or to disregard with no further action for ERF WOT

Four Key Recommendations to be raised at ERF EPB

1. Exercise smarter and more often, including scaling up and scaling down. Use the same scenario to exercise each level of response, and aim to activate all relevant plans to the scenario. [Recommendation 1]

Action: To be included as part of the Exercise & Training Strategy Project.

2. Increase top level buy in and participation in exercising with commitment of equipment and resources to maximise opportunities for exercising plans and procedures. [Recommendation 4]

Action: Agreement to be confirmed at ERF EPB for this to occur as part of the planning for large scale national exercises and included in the Training & Exercise Strategy.

3. Capture, for the plan, the options for discharge from hospital that health and social care devised for the exercise. [Recommendation 20]

Action: This has been passed to Health & LA colleagues.

4. Increase knowledge of the risk and improve awareness of the possible impacts and implications from pandemic flu, including preparation for managing information associated with an issue of such magnitude as pandemic flu. [Recommendation 24]

Action: To be included as part of Business Continuity project working alongside RIG

Four Further Recommendations to be monitored at ERF PAG & WOT

1. Consider having mini exercises before National exercises. This could: - summarise pre exercise information; contextualise information to aid understanding; establish s 'battle rhythm' before the National exercise starts. [Recommendation 8]

Action: To be considered as part of the Training & Exercise Strategy for the ERF.

2. Scoping the following Plans; [Recommendation 15]

- a. Contingency arrangements for refrigerated units for bodies when all partners are using similar contractors and resources will be limited.
- b. Is there a stockpile of body bags, hospital beds available to the trusts?
- c. Writing into plans where and what type of support we can expect from other partners in regards to capacity management e.g. transportation support, social care facility support.
- d. Revising the previously collated bed capacity figures across Essex.

Action: To be included as part of ERF WOT plan projects as appropriate; ie. Enhanced BAU Mortuary,

3. Revisit/ review /develop individual organisations BC Plan / Pandemic BC Plan / Pandemic flu plans; with closer working relationships with other organisations to enable dovetailing of plans. Ensure procedures are not reliant on a single post or person, and facilitate individual's potential to wear 'other hats'. [Recommendation 21]

Action: BCM now included on WOT Programme and linked with the RIG Core Group.

4. Improve understanding of the complexity of social care services and the importance of their input and the demands placed on them. [Recommendation 26]

Action: To be explored by ERF WOT

The full exercise Structured Debrief Report and 30 Recommendations is contained below.



STRUCTURED DEBRIEF REPORT

Debrief commissioned by:

ERF

Event:

Exercise Cygnus

Date of Event:

18th and 19th October 2016

Date of Debrief:

8th November 2016

Debrief Location:

Kelvedon Park

Debrief Team:

ECPEM

Emergency Planning Officer,

Debrief Participants:

Exercise Scope & Summary:

All persons were informed of the ethics of the debrief process. All were given a number for ease of cross referencing comments

Exercise Cygnus was a National level pandemic flu exercise dealing with a scenario involving an outbreak of “Swan Flu”. Essex Resilience Forum was one of eight English LRF’s that opted to participate. The agreed level of participation in Exercise Cygnus was down to individual LRF’s to agree, for Essex this was agreed at ERF PAG on 11 February 2016 and then endorsed by the ERF EPB on 2 December 2015, 2 March 2016 & 1 June 2016 that the Essex level of exercise participation was to be:

A team of officers (Planning Assurance Group level) will play in the Exercise with Executive Leadership. The team will have links to key contacts by phone to answer any questions raised by the scenario, with the option for single agency subject matter group’s to play.

A copy of the briefing note approved by the ERF is attached for the readers information:



Exercise Cygnus PAG
Briefing Document v2

Essex Aims & Objectives (as included in national documentation)

Aim

To support the national Exercise Cygnus, through the analysis of the flu pandemic plan and assessment of the impact on Essex’s response capabilities and capacities and responding utilising relevant planning.

Objectives

- Exercise the following plans:
- Essex Flu Pandemic Plan
- Excess Death Plan

Themes to be considered:

- Social care
- Acute Hospital Surge
- Excess Deaths
- Prisons
- Voluntary Sector

The ERF exercise delegates convened at Fire HQ on 18 October 2016 0830-1315hrs and 19 October 1245-1730hrs.

As National planning progressed a media element was included in the exercise with a request for expressions of interest from participating LRF's. This was considered by Essex, though due to the relatively short notice of the request and combined with other commitments, it was subsequently agreed at ERF PAG & ERF EPB that Essex would not participate in the media elements of the exercise, but to continue its support as previously agreed.

Essex CC took the opportunity to participate in the exercise and to focus on the Business Continuity impacts and present planning arrangements for a pandemic flu. A small team of tactical level officers meet in the CERC for the same time as the ERF team convened.

The report focuses on areas for improvement and perceptions of what went well; it concludes with a series of recommendations to assist the ERF, and partner agencies, to improve the planning and management of similar future events. The report does not include or comment upon matters identified in other debriefs or post-incident reports.

Where recommendations have been noted outside of the agreed scenario and exercise play, these have been passed to the appropriate agency for their consideration and ongoing planning.

Item	Identified By	Comments
AREAS FOR IMPROVEMENT –		
Exercise Planning and Delivery		
Lack of resilience. No back up, of essential roles, people had to fill in at short notice with limited information. Also lack of resilience in reliance on one individual at the planning stage.	6, 5	It should be noted the entire planning team (min 15 officers) received and had access to all exercise information, including the secure SharePoint area.
Delegates had not read pre exercise material. The information was all there and distributed but was too much for people to read and take in individually. There was no discussion or interaction before the exercise so just reading the material did not have the context to enable starting at week 6/7 to be smooth.	5, 7, 1	The majority of exercise delegates where the exercise planning team. Briefing papers and briefing sessions where also held for non-exercise planning team delegates.
Not much change through the exercise from starting at week 6/7 so the CRIP (common recognised information picture) did not change much from the first one so process was not really tested.	10	Requested for this to be raised at the national debrief 16 Nov 2016.
Far too many documents issued and reissued by National exercise planning team at very short notice in the days leading up to the exercise. It was time consuming printing this material and there was difficulty getting delegates to have read them prior to the exercise. Too many versions of documents, with no version control.	2, 1, 4, 1, 8	Requested for this to be raised at the national debrief 16 Nov 2016.
A single mailbox was provided to National exercise planning team for use before and during exercise but information came into this and another mailbox which used a lot of time checking to see if it was duplicated material or if it required different action.	2	Requested for this to be raised at the national debrief 16 Nov 2016.
Use of SharePoint – had to log in and out to print each document. Very time consuming.	4	Requested for this to be raised at the national debrief 16 Nov 2016.

Item	Identified By	Comments
AREAS FOR IMPROVEMENT –		
Unrealistic position at STARTEX – difficulty jumping straight in to week 6/7 and establishing battle rhythm. In reality the response would have been smoother at this stage than it was on day one of the exercise.	12, 1, 3	Requested for this to be raised at the national debrief 16 Nov 2016. At a local level briefing papers and sessions occurred for exercise delegates.
It was a health lead exercise but there was lack of support from health during exercise planning and lack of attendance at meetings.	4	Health capacity to support planning & exercise events at ERF should be explored.
The exercise was not top level driven enough and no agency really took the lead at top level. There was a lack of commitment for organisations.	9	Level of exercise play agreed by ERF EPB
The decision to play ‘light’ missed opportunities and negatively impacted the exercise delivery on the day as some things had to be ramped up and roles added on the day such as having a loggist and controller.	7, 11	This is outside of the agreed exercise scope
Continuity of people involved in exercise. All those that went to the controller briefing in London were then not available to attend the exercise.	5, 1	All exercise planning team had access to the same information
The exercise did not really test from an ambulance perspective. There was little input for blue light agencies. If injects had given specific figures for example “your service has a 40% reduction in workforce” it would have tested plans more effectively.	10, 15	This is outside of the agreed exercise scope Requested for this to be raised at the national debrief 16 Nov 2016
Lack of media play.	16	This is outside of the agreed exercise scope
Lack of prison participation.	16	This is outside of the agreed exercise scope
Command and Control		
Lack of direction (on the first day) from SCG, communications were disjointed, injects came down to CTG as they were from EXCON without any sifting or direction given on what was expected so were answered by CTG.	5, 4, 12, 13, 15, 6	This is outside of the agreed exercise scope

Item	Identified By	Comments
AREAS FOR IMPROVEMENT –		
The SCG was not strategic enough. It did not assign actions or timeframes to specific organisations; there was no agenda on day one, though introduced on day 2; the exercise controller ran meetings rather than the Chair.	17	This is outside of the agreed exercise scope
No controller was appointed in the CERC (although one stepped up on day 2) highlighted that a Controller is required in the CERC to lead discussion.	12	This is outside of the agreed exercise scope This was not a CTG exercise, but an opportunity to focus on BC and service impacts
Health became more tactical at strategic meetings.	3	As agreed in exercise planning
There was a lack of planning to support/ guide an SCG Chair coming from an organisation other than Essex Police, who would in most situations hold this position.	12	This is outside of the agreed exercise scope
Information flow		
There was no system in place for accessing live information on critical factors like bed capacity in care homes, waiting times for cremations and other resources we might need.	18	This is outside of the agreed exercise scope This was an area identified during exercise planning and an opportunity for ECC to explore
There was difficulty getting information from Southend social care prior to the exercise.	6	This is outside of the agreed exercise scope This was also noted during the planning
Information flow up and down from National government. The representative from DCLG RED made changes to the Essex SITREP and sent it up to central without sharing the final version with the SCG.	3, 12, 6	Requested for this to be raised at the national debrief 16 Nov 2016.
There was difficulty getting information from some services to feed the SITREP.	12	This is outside of the agreed exercise scope
It was time consuming compiling ERF SITREPs from multiple organisations information	7	This is outside of the agreed exercise scope This has been previously identified, with a project focusing on this exact matter

Item	Identified By	Comments
AREAS FOR IMPROVEMENT –		
Information requests from central government sent SCG were then sent to CTG without being broken down, so the CTG were attempting to answer some of the strategic level issues.	5	This is outside of the agreed exercise scope
Facilities		
There was an issue with teleconferencing on day one at the SCC.		This has been raised with IT Support at KP
Awareness		
There was a lack of awareness of the pandemic flu risk and implications which needed the scenario to reach the point of schools closing to force the issue of staff availability.	12	Requested for this to be raised at the national debrief 16 Nov 2016.
Regarding Social Care and Health. There was a lack of realism around discharge from hospital and what the voluntary sector can do.	14	Suggest this should be picked up by Health & LA
Understanding of pandemic flu, as Essex top risk, was not adequate in view of the likely impacts.	4	BC to be reintroduced to ERF activity
Capacity and Capability		
Social care is currently close to or at its limits. The capacity to respond to significant increase in demand is not present.	18	Requires to be explored in greater detail
Capacity issues possibly for attendance at SCG – consider virtual SCG.	3	This is outside of the agreed exercise scope
Plans		
The exercise highlighted difficulty in the plan consultation process, getting partners to read plans and so be familiar with them prior to the event.	5, 4	This is outside of the agreed exercise scope Majority of exercise delegates where the exercise planning team

Item	Identified By	Comments
AREAS FOR IMPROVEMENT –		
The Media Plan, although not activated for the ‘light touch’ exercise, would possibly not have been adequate to manage the required response to the scenario in terms of achieving synergy of messages and coordination of media response.	11	This is outside of the agreed exercise scope
The ERF Pandemic plan is too long and not easy to follow. It requires actions; options on who should be Chair; and suggested SCG Agenda.	11, 12, 8	This is outside of the agreed exercise scope. The plan has been condensed (10 pages only) and other comments stated are contained within COPE and the Police SCC Generic Guide
The Excess Death plan, although tested at a tactical level was not fully tested at a strategic level by this scenario. The Excess Death Management Group was not set up.	7, 14	This is outside of the agreed exercise scope
There are too many plans. There are National, local ERF and individual organisations flu plans and BC Plans. There is a question as to how up to date all the plans are and whether there are any contradictions/ confusions between plans.	9, 1	This is outside of the agreed exercise scope

ITEM	Identified By	Comments
Areas of Good Practice		
Exercise Planning and Delivery		
Health was represented well at the Exercise.	1	
Administrative support to SCG developed a cover sheet to summarise and speed up assimilation/understanding of messages into and out of the SCG.	2	
Good administrative support for CTG to take notes / minutes and manage teleconference equipment.	18	
The work carried out by [REDACTED] before planning the exercise was helpful for all organisations involved.	9, 5	
Networking strengthening partnership working and resilience.		
Strengthened knowledge and understanding of the risk, potential solutions and identified shortfalls.	2,10, 4	
Greater involvement from all agencies as the scenario progressed.	14	
Highlighted/reiterated areas of concern around response capabilities up to the regional and national teams i.e. refrigeration units, body bags, hospital beds, escalation areas, swabbing, contracts, logistics, staffing, transport support.	17	
Communications		
The teleconference that Health held with system partners on both days was particularly useful with discussion on capacity, mitigating actions and the plans themselves.	17	

ITEM	Identified By	Comments
Areas of Good Practice		
The information provided from CTG to SCG on the second day was exceptional in both quality and format, it was copied and pasted into information sent up to central government from SCG, and information from COBR was complementary specifically about this information from Essex.	6, 7, 2	
Plans		
The Exercise emphasised/highlighted the importance of business continuity planning and identification of critical services. This went well.	1,10,11	
Flexibility of plans and procedures allowed adaptability – especially the plan to train people in new roles.	11	
Had plans in place to refer to and follow a formula.	10	
Faith needs were considered at SCG and appropriate information was in the plan.	7	
Multi Agency Working		
SCG Multi-agency cooperation, working and discussion; sharing knowledge and information; task division, and good will to make it work.	1, 6, 10, 19, 13, 14, 2	
There was reflection on what did not go well at SCG on day one and amendment of proceedings for the next day to ensure that the SCG had a much better strategic direction.	3, 6, 16, 14, 8	
Confident and subject knowledgeable Chair allowed the SCG to flow and work well together, and offered opportunity for relevant organisations to articulate their concerns and issues.	19, 16, 15	

ITEM	Identified By	Comments
Areas of Good Practice		
County Tactical Group (CTG) worked well together and there was a lot of knowledge in the room. They used the plan and there was good feedback on the teams work. Good leadership on day two with great work together and good learning from the scenario. Good focus on problems in hand and disciplined way of working.	12, 11, 4, 18, 5	
ECC CTG Business continuity. There were responses from all the groups that agreed to take part. The exercise confirmed that the structure in place works, the response roles work.	12	
Relationship and discussion between health and social care were much improved on the second day with good options for discharge from hospitals.	7	
Facilities		
The SCC facility at Kelvedon Park was good.	6	
Learning		
Good learning from exercise.	11, 4, 8	

Ref.	Recommendations	Interpretation of Action Required	Passed To	ERF WOT Assessment/Comment
Recommendations for Exercise Planning and Delivery				
1.	Exercise smarter and more often, including scaling up and scaling down. Use the same scenario to exercise each level of response, and aim to activate all relevant plans to the scenario.	ERF to look at how they plan for exercises	ERF PAG	Recommendation to be raised at ERF EPB and included as part of the ERF WOT Training & Exercise Project.
2.	Plan for resilience in key roles during planning and delivery of exercises, with continuity of people attending key briefings being present at the exercise.	ERF to look at how they plan for exercises	ERF WOT	Due to the level of exercise play by the ERF and the need for key role resilience, the entire ERF Ex Cygnus planning team received the same level of information throughout as per the Controller & Evaluator Roles, including access to the restricted Share Point area. The need for exercise planners to be prepared and willing to step up at short notice is required.
3.	For SCG and CTG - Build into the exercises a mechanism to help with acceptance of any scenario artificiality from the start, enabling players to immerse in the scenario.	ERF to look at how they plan for exercises	ERF WOT	Briefing packs, briefings and news clips were shared with all planners and delegates prior to the exercise. This refers to ECC and therefore has been passed for ECPEM to proceed as required.
4.	Increase top level buy in and participation in exercising with commitment of equipment and resources to maximise opportunities for exercising plans and procedures.	ERF to look at how they plan for exercises	ERF PAG	Recommendation to be raised at ERF EPB and included as part of the ERF WOT Training & Exercise Project.
5.	Top down action to ensure that the key people are present and involved in the exercise.	ERF to look at how they plan for exercises	ERF WOT	This occurred via EPB. Health capacity noted and raised at EPB & PAG throughout by Health.
6.	Training for exercise players to aid understanding of the ground rules for exercises, include importance of taking responsibility to come prepared, reading pre exercise information.	Training need identified –Training for Exercise Players	ERF WOT	Exercise planners formed majority of delegates. This also links to Rec. 3 and passed to ECPEM.
7.	Explore how information pre exercise can be shared in digestible chunks. Summary sheets for pre national exercise	Procedure	ERF WOT	This occurred as part of the exercise planning, with an officer from ECPEM conducting exactly what has been

Ref.	Recommendations	Interpretation of Action Required	Passed To	ERF WOT Assessment/Comment
	information, either request Government to summarise information or ERF develop summary template and task someone pre exercises to read and summarise information to disseminate.			raised. It should be noted, due to the amount of information distributed by central, even following an officer summarising the information received, the briefing information distributed to ERF planners/delegates was still more than ideal.
8.	<i>Consider having mini exercises before National exercises. This could: - summarise pre exercise information; contextualise information to aid understanding; establish s 'battle rhythm' before the National exercise starts.</i>	<i>ERF to look at how they plan for exercises</i>	<i>ERF PAG & WOT</i>	<i>Ex CORVUS and the delay in Cygnus should be taken into account. To be considered by the WOT Trg & Ex Project.</i>
9.	Consider use of Resilience Direct for sharing information rather than using SharePoint.	Feed up through DCLG RED	ERF Coord	This was raised during the planning and again at the national debrief by the ECPEM officer attending on behalf of the ERF. It should be noted SharePoint was the Government Specified System
10.	Use version control on pre exercise information and minimise changes to documents just before the exercise.	Feed up through DCLG RED	ERF Coord	This was raised during the planning and again at the national debrief by the ECPEM officer attending on behalf of the ERF.
11.	Maximise opportunity in future to play National exercises at a level to test all levels/facilities, have more senior people involved, exercise handovers and local injects.	ERF to look at how they plan for exercises	ERF WOT	Link to Rec 4
12.	Establish criteria for enabling ERF Board decision making on how to play National exercises – either 'top down' by a Board member attending a national meeting; or 'bottom up' through a criteria for advising.	ERF to look at how they plan for exercises	ERF WOT	Link to Rec 4
13.	Appoint a CTG controller in advance rather than relying on participants volunteering or nominating one at the time.	CERC procedure / ECPEM to look at how they plan	ECPEM	This is outside of the agreed exercise scope and has been passed to ECPEM.

Ref.	Recommendations	Interpretation of Action Required	Passed To	ERF WOT Assessment/Comment
		exercises		
14.	Establish SCG protocols and practices at a very early stage in order to embed structure so that participants are clear of expectations and timescales that they have to work within and deliver to.	Look at SCG procedures	ERF WOT	This is outside of the agreed exercise scope. It should also be noted that SCG procedures are contained in COPE and this was noted tested as part of this exercise.
Recommendations for ERF Plans Procedures and Preparedness				
15.	<p>Scoping the following;</p> <ul style="list-style-type: none"> ✓ Contingency arrangements for refrigerated units for bodies when all partners are using similar contractors and resources will be limited. ✓ Is there a stockpile of body bags, hospital beds available to the trusts? ✓ Writing into plans where and what type of support we can expect from other partners in regards to capacity management e.g. transportation support, social care facility support. ✓ Revising the previously collated bed capacity figures across Essex. 	Health & LA to scope	ERF PAG & WOT	Excess Death - Tactical Options. ECPM LA & Health agencies will need to scope the four matters raised.
16.	Exercise our (Health) multi-agency command, control and response arrangements to ensure that partners are competent in their roles and are aware on the expectations on them e.g. SITREP reporting, telecoms, action plans etc.	Exercise requirement identified	All	This is outside of the agreed exercise scope. To be considered as part of the ERF Trg & Exercise Strategy.
17.	Exercise/test SCC facilities, including teleconferencing, at both Fire HQ and Police HQ regularly, and before use in exercises.	Facilities testing / exercising	Essex Police & ECFRS	Should form part of ongoing maintenance
18.	Consider ERF Plan structures to aid speed of access of essential information – utilise introductions/ quick start guides; have	ERF Plan template review	ERF WOT	This is outside of the agreed exercise scope.

Ref.	Recommendations	Interpretation of Action Required	Passed To	ERF WOT Assessment/Comment
	strategic Actions section at the front; include options on who could Chair and suggested SCG agenda; include core roles; include media messaging and communications suggestion. Build flexibility into plans to allow them to adapt to the situation. Ensure procedures are not reliant on a single post or person, and facilitate individual's potential to wear 'other hats'.			SCG & Chair info is contained in COPE. WOT project to review plan template To be considered as part of the ERF Trg & Exercise Strategy.
19.	Encourage individuals across the ERF to familiarise themselves with plans outside of their normal working areas	Culture change	ERF WOT	This is outside of the agreed exercise scope. The ERF WOT are conducting a series of plan validation sessions. It is proposed to invite officers who have not been part of the plan progress.
20.	Capture, for the plan, the options for discharge from hospital that health and social care devised for the exercise.	Input to pandemic flu plan	ERF PAG	Recommendation to be raised at ERF EPB and for Health and Social Care to explore this matter. Copied to ECPEM.
21.	<i>Revisit/ review /develop individual organisations BC Plan / Pandemic BC Plan / Pandemic flu plans; with closer working relationships with other organisations to enable dovetailing of plans. Ensure procedures are not reliant on a single post or person, and facilitate individual's potential to wear 'other hats'.</i>	<i>Plan review</i> <i>Partnership working</i>	<i>ERF PAG & WOT</i>	<i>BC now on WOT programme and linked to the RIG.</i>
22.	Regarding Business Continuity plans there is a recommendation to share with staff how important their engagement is. There could be an intranet message summarising the exercise and how the BC plan was used effectively.	Internal communications requirement	ECPEM	This is outside of the agreed exercise scope. Passed to ECPEM to consider.
23.	Exercise the ERF Media Plan for major incidents using the Cygnus scenario.	Exercise need identified	ERF WOT	This is outside of the agreed exercise scope. Passed to Police for consideration as part of the media exercise planning. Media Ex planned for Oct 2017
24.	Increase knowledge of the risk and improve awareness of the possible impacts and implications from pandemic flu, including preparation for managing information associated	Training need identified	ERF PAG	Recommendation to be raised at ERF EPB and included as part of a RIG & BC Project

Ref.	Recommendations	Interpretation of Action Required	Passed To	ERF WOT Assessment/Comment
	with an issue of such magnitude as pandemic flu.			
25.	Incorporate the understanding of the roles and responsibilities of each organisation and their capacity and capability in the event of a pandemic, to tailor the national PHE plan to what's realistically possible locally.	Research need identified	PHE	This is outside of the agreed exercise scope. ERF Coord to raise with PHE
26.	<i>Improve understanding of the complexity of social care services and the importance of their input and the demands placed on them.</i>	<i>Training need identified</i>	<i>ERF PAG & WOT</i>	<i>WOT to consider how best to achieve this with ECC & Unitary Social Care Services. To also be considered as part of the Training & Exercise Project.</i>
27.	Develop a procedure for compiling ERF SIREPs from individual organisations SITREPs.	Develop SCG procedure	ERF WOT	This is outside of the agreed exercise scope. Procedures for SITREPs are contained in COPE and also held by the Police as part of the SCC planning.
28.	Develop mechanism for supporting an SCG Chair when Essex Police are not holding this position.	Develop SCG procedure	ERF WOT	This is outside of the agreed exercise scope. Procedures for SITREPs are contained in COPE and also held by the Police as part of the SCC planning.
29.	Explore how the ERF can improve the plan consultation process so as to engage but not overwhelm consultees with information. Consider targeted consultation highlighting issues as relevant to each consultees organisations	ERF procedure review	ERF WOT	This is outside of the agreed exercise scope. This should also be linked with Rec.18 ref Plan Template
30.	Incorporate task division and team working into ERF training and exercising. Also incorporate into WOT meetings through increase in workshopping sessions and sharing input to tasks.	ERF training exercising and WOT procedure	ERF WOT	Link to rec 1