

Shetland Community Safety & Resilience Board

8th February 2018

Town Hall, Lerwick

2-4pm

Agenda

1. Welcome & Apologies
2. Previous Minutes & Matters Arising

Scottish Ambulance Service

3. Scottish Ambulance Report

Coastguard

4. Coastguard Verbal Update

Scottish Fire & Rescue Service

5. Performance Against Local Fire & Rescue Plan

Emergency Planning & Resilience

6. Resilience Activity

Police Scotland

- 7.1 Performance Against Local Policing Plan

- 7.2 Additional Paper- Online Safety

For Information

- 8 Road Safety Advisory Panel

AOCB

Dates of Future Meetings:

- 9th May- Bressay Room, Montfield
- 15th August- Coastguard Station, Lerwick
- 7th November- Lerwick Fire Station

Community Safety and Resilience Board

Held at the Coastguard Station, Lerwick, on the 8th November 2017

Present

Alastair Cooper	SIC (Chair)
Vaila Simpson	Community Planning & Development, SIC
Rachel McDill	Community Planning & Development, SIC
Cl Lindsay Tulloch	Police Scotland
Fraser Burr	Scottish Fire and Rescue Service
Iain Macleod	Scottish Fire and Rescue Service
Errol Smith	Coastguard
Ingrid Gall	Emergency Planning & Resilience, SIC
Andy Fuller	Scottish Ambulance Service
Elaine Skinley	Roads, SIC
Bob Kerr	Communications, SIC
Hayley Barnett	Community Safety Division, Scottish Government
Alex Garrick-Wright	Community Planning & Development, SIC (Minutes)

Apologies

Steven Coutts	SIC
Allison Duncan	SIC
Cecil Smith	SIC
Jan Riise	SIC
Catherine Hughson	Voluntary Action Shetland
Mark Boden	SIC
Myles Murray	Scottish Fire & Rescue Service
Dr Susan Laidlaw	NHS
Peter Smith	Scottish Ambulance Service
Cassie Stevens	Coastguard
Rob Priestly	Coastguard

1. Welcome & Apologies

Cllr Cooper thanked everyone for coming and opened the meeting. He introduced Rachel, who has recently started as Community Safety & Justice Officer with SIC.

Fraser introduced Iain, who currently works in the Western Isles but will be taking over from Fraser once he retires in February.

Errol welcomed everyone to the Coastguard Station and notified the meeting of the fire protocols.

2. Hayley Barnett, Improvement and Partnership Manager, Scottish Government

Hayley explained that she works for COSLA, on secondment to the Scottish Government, and is currently looking at community safety at a local level. She has spent the last month speaking to community safety partnerships and agencies about the impact of policy on services, and will be meeting with services while in Shetland.

Hayley noted that Shetland was unique in having community safety under the framework of community planning. Cllr Cooper advised that this has been the case from the outset, and that it works well for our small community. Shetland has been fortunate, he added, in that there have been very few major incidents in the isles.

3. Previous Minutes & Matters Arising

There were no objections or amendments to the minutes. CI Tulloch moved to adopt, Ingrid seconded.

2.4. Identify the staffing baselines for agencies on the board. Ongoing. Action- Alastair Cooper & Jan Riise

Cllr Cooper advised that he and Jan have spoken about this, and agreed that this action is no longer relevant or necessary. To be removed from Action Tracker.

4. CI Tulloch & Ingrid to discuss table top exercise regarding UHA. Action- CI Tulloch & Ingrid Webb.

CI Tulloch has spoken to Ingrid and the UHA Committee about this. The exercise will take place in the first week of December 2017, and will provide a chance to test the risk assessments of both the agencies involved and the UHA Committee. Police Scotland colleagues from the mainland will be coming up to help run the exercise. Cllr Cooper asked if they were adequately prepared for what UHA is, CI Tulloch said that they will be properly briefed, it was generally agreed that UHA cannot be fully understood without seeing it in real life.

CI Tulloch to update on this at the next meeting.

5.1 CI Tulloch to discuss MARAC funding with the Cabinet Secretary Michael Matheson and report back. Action- CI Tulloch

CI Tulloch discussed this with the Cabinet Secretary. The MARAC is not statutory, and not every local authority has one, however the Cabinet Secretary had said that they are looking into changing this. As it is not statutorily underpinned, the MARAC is not funded by the Scottish Government- CI Tulloch hoped that if legislation is introduced to make MARAC a statutory obligation, the Scottish Government will begin funding it.

There is a strong feeling that the MARAC has been beneficial to Shetland, and the model we are using is a good example for other areas.

Action to be removed from the Action Tracker.

6 CI Wright to look at bringing Dundee Control Room supervisors to Shetland, to meet with resilience staff and visit key sites such as Sullom Voe.

CI Tulloch advised that the move from Inverness to Dundee Control Room is still ongoing, as there have been issues with building control. Some of the Dundee staff have been shadowing the Inverness staff to get better acquainted with handling calls from the isles.

CI Tulloch will follow up with CI Wright's offer to arrange for supervisors to come up and see Shetland.

14.2 Report to be distributed on Shell's large-scale exercise in Aberdeen. Action- Ingrid Gall

Ingrid advised that the report was finished, but there was some confusion about whether it had been sent. It will be distributed following the meeting.

14.3 SFRS to liaise with SAS and CP&D on the location of and responsibility for defibrillators on the Isles. Ongoing. Action- Myles Murray

Fraser reported that the SFRS has distributed 7 defibrillators across 14 fire stations in consultation with SAS- these have all been registered.

Vaila said that CP&D have been working with Peter and Myles to compile a comprehensive list of the defibrillators across Shetland. Community Councils have been contacted to ask them to try to ensure local defibrillators are registered with SAS.

Defibrillators are becoming more common, and it will be ongoing work to ensure that they are all correctly registered with the SAS in order to be effective. To be left on Action Tracker.

4. Coastguard

The Coastguard is currently at 80% of full staffing- three members have left but three have been recruited. Two have already been inducted, with one expected to complete their induction in January so then rising to 85%, at which point there will be three vacancies remaining.

Across the UK, the Coastguard has dealt with 30,000 incidents with 1480 in the Shetland area (which includes Shetland and Orkney). The Coastguard Station is part of a national network and can conduct operations in any area of the UK's waters. The Shetland station has recently conducted operations in Essex, which Errol noted has very different kinds of incidents than are common here. This allows the staff to encounter a much wider variety of incidents than when the stations were all largely independent and focussed on their own area.

There have been seven fatalities, an increase of 1 from 2016 but three less than in 2015.

Errol advised that the Coastguard has put two officers on Traumatic Incident Management (TRIM) Training, which allows the officers to support people dealing with traumatic incidents and signpost them to appropriate help. Errol added that these officers are not allowed to perform this on people from within their own department, but they are available to all partner agencies. CI Tulloch said the Police have TRIM trained officers, but that they are allowed to work with colleagues so long as they were not directly involved with the incident themselves. Errol said he would look into why the Coastguard was given different restrictions on who the officers can and cannot work with.

Fraser said that the SFRS does not use TRIM but has a similar system in place that works well; Andy added that the SAS also has their own system. Ingrid said that this role in the SIC would be filled by the Staff Welfare Officer and counsellors.

Errol said that four Coastguard officers (one each from Scotland, England, Northern Ireland and Wales) were sent to National Interagency Liaison Officers training. This training is designed to give each service a trusted point of contact who has received special government vetting and training, for other agencies to discuss issues with confidentially. Errol is the coordinator for Scotland. Fraser advised that the SFRS does not have any NILO trained officers in Shetland. Andy said that the closest NILO trained officer in the SAS is situated in Aberdeen.

5. Scottish Fire and Rescue Service

5.2 Performance against Local Fire & Rescue Plan

Fraser reminded the meeting as to the volatility of the data, and that given how low the number of incidents are in Shetland, the percentage increases and decreases, paint a disproportionate picture. The figures show that Shetland remains a safe place to work, live and visit.

Priority 1- Local Risk Management and Preparedness

The biggest challenge is adequately staffing some of the established stations, such as Sumburgh and Brae, and keeping them functionally operational 24 hours per day. This is especially difficult during the day when many people leave the area for work and cannot respond.

The SFRS has invested a lot of time in trying to recruit in these areas, and meeting with Community Councils to try to encourage locals to come forward into these roles. The 2 weeks of training on the mainland is off-putting for most people, and considerable work is being done to allow the training to take place on-island to make it less of an obstacle.

Fraser noted that this challenge also faces Orkney and the Western Isles; however, positive targeting has been producing promising results in Orkney.

SFRS continues to work closely with HIAL at Sumburgh Airport.

Priority 2- All Accidental Dwelling Fires

Fraser advised that this is at the top of the agenda and will be heavily focussed on in the 2017-2020 plan.

There have been three such fires in the reported quarter, a significantly low amount that gives no cause for concern.

Priority 3- All Accidental Fire Casualties

There were four casualties, 3 from a single incident. Fraser felt that this is not a cause for immediate concern.

Home Fire Safety Visits continue to be carried out, with homes being visited in terms of potential fire risk and vulnerability. The targets are being 'massively exceeded', with 69 visits to high-risk properties, 39 to medium-risk and 1 to low-risk. Fraser thanked partner agencies for identifying vulnerable people for the SFRS to target for these visits to help ensure their safety.

Priority 4- All Deliberate Fires

There has been only one deliberate fire in the period.

This is not an area of serious concern in Shetland, and very rare. Fraser said that this is similar in Orkney and the Western Isles, and that the figures for deliberate fires in Shetland would be exceeded on the first hour of the first day of the reporting period in many other areas of Scotland.

Priority 5- Non-domestic Fires

The SFRS proactively has teams of officers performing audits, with particular focus on buildings which people sleep in (hotels, care homes, etc.).

Priority 6- Special Service Casualties

There has been a reduction of two over the previous report's figures. Nationally, these figures have been going up as a result of closer and more collaborative working with partner agencies, who are now more likely to call in the SFRS for help in certain circumstances, like gaining entry into a locked premise.

Priority 7- False Alarms (UFAS)

This forms the biggest part of emergency fire response for both Shetland and the UK as a whole. The SFRS is working with the occupiers of buildings to reduce the number of UFAS. Formal proceedings start when a 'trigger point' is reached- Fraser noted that no premises in Shetland has come anywhere near this trigger point.

Cllr Cooper asked if any SFRS officer have been attacked while performing their duties, as this is something increasingly common across the UK. Fraser was not aware of any such incidents, possibly because officers here are closer to the community than in many places.

Cllr Cooper observed that there are issues with retaining inter-island flights to some of Shetland's islands, and that this is complicated by the lack of fire officers on the isles. Without sufficient fire officers, the flights will not be safe to operate to the isles; Cllr Cooper suggested that these problems are interlinked and that the solution to one may lead to the solution to the other.

Fraser advised that they have had applicants from Fetlar; while this is positive, it is still not enough to be effective.

Hayley asked if the Home Safety Visits are performed by retained officers- Fraser said that they were. He noted that, ironically, people are more willing to let someone they don't know into their homes during one of these visits, as opposed to a known face.

5.1 Draft Local Fire & Rescue Plan 2017-2020

The Local Fire & Rescue Plan is required by statute- Fraser said it is not presented here for approval but for comments and feedback. A previous draft of the plan said that the consultation will end on 18/12/17. This is not the case; the consultation actually ends on 11/12/17.

The plan outlines the priorities of the SFRS over the next 3 years, and they have some discretion as to how these are formed.

Priority 1- Promoting Personal Safety and Wellbeing

This gives the service more freedom to be involved in other areas locally, beyond fire risk. Fraser gave the example of dealing with slips, trips and falls, which are a major cause of injury- this could fall under the same priority.

There have been trials in Scotland of fire officers acting as first responders in cases of cardiac arrest, with the SFRS' fast response time enabling them to reach sufferers faster and keep them alive until the SAS arrives. Fraser suggested that this, too, could fall under the same priority. Cllr Cooper remarked that, given Shetland's geography, the SAS would be unable to meet its response time target by the time an ambulance made it to Eshaness or somewhere similarly remote, and that a fire officer from Brae would be able to be on scene much faster.

Priority 2- Non-Domestic Fire Safety

Fraser observed that this is not a major issue in Shetland, but the SFRS are statutorily required by the Fire Scotland Act to keep this as a significant priority.

Cllr Cooper asked what role the SFRS has at Sullom Voe or the gas plant- Fraser advised that the SFRS works with other agencies, but is superseded by COMA in these locations.

Priority 3- Unwanted Fire Alarm Signals

UFAS make up 35% of calls attended by the SFRS in Shetland, which Fraser said was probably the average for Scotland. The danger of false alarms is- if they keep occurring in the same place, people become inured to them and do not react appropriately- and safely- when an actual fire occurs.

Priority 4- Emergency Response Preparedness and Community Resilience

SFRS will continue to ensure that they can respond to emergencies as efficiently as possible. The current response model is decades old and no longer appropriate for the modern world. As such, a new approach will be needed.

Fraser said there is new technology coming online that will hopefully allow the SFRS to change the way it works. This priority gives the scope to adopt new technologies and ways of working in order to find new, innovative ways to respond to emergencies.

Fraser drew attention to the fact that 'deliberate fires' no longer feature as a priority. He said that this does not mean the SFRS are ignoring deliberate fire-raising, but that this is not a priority to focus on at this point.

Cllr Cooper commended the plan for reflecting local needs, as opposed to being a carbon copy of a standard plan for Scotland. He asked if there was scope for greater cooperation with SAS, especially in light of the recent issue of a fire officer driving an ambulance to hospital following an emergency, which generated significant press attention. Fraser advised that the services always cooperate at incidents, and that the casualty is the centre of the response. The issue raised has been discussed at the highest levels in terms of how it impacts on the delivery of service, and Fraser assured Cllr Cooper that the unique situation and challenges of the isles have been recognised.

6. Police Scotland

6.1 Draft Local Policing Plan 2017-2020

CI Tulloch said that he was delighted with the new draft plan, which focusses heavily on local issues and was developed to fit in with the upcoming Local Outcome Improvements Plan (LOIP) in order to be relevant and effective for Shetland's communities. The plan reflects the enhanced partnership working and resource sharing between agencies.

CI Tulloch asked for comments on the plan, as the CSRB's support is necessary before it is presented to the Council, in December.

Cllr Cooper said that CI Tulloch was an active partner in the Community Planning Partnership, and was glad to see the plan fitting so well with the LOIP. He asked if Police Scotland were happy with the plan- CI Tulloch advised that the Divisional Commander was not only happy with it, but has put his name to it.

6.2 Performance against Local Policing Plan

Priority 1- Road Safety

CI Tulloch reported that there was one fatality in April- September, an increase of one on the previous quarter. There was reduction in serious injuries and drink driving offences, but a slight increase in speeding offences.

Cllr Cooper observed that speeding is a big issue for many individuals and Community Councils, and it never seems to be tackled. CI Tulloch said that Shetland has a good road structure, with well-maintained highways and a lot of vehicles, so the roads are busy and fast. The best action is for the Police to be seen out on the roads as much as possible, and to work with the SIC's Roads department, especially in terms of educating drivers. There is always more that can be done.

Priority 2- Supply, Abuse and Misuse of Drugs

The figures are slightly decreased from last year, but drugs are still an issue. The Police are working closely with the Alcohol and Drugs Partnership on education in order to reduce the market for drugs in the isles. Dogs Against Drugs are very active, and very proactive in terms of visiting schools to educate children on the dangers of drugs.

Cllr Cooper observed that despite there being a drugs problem in Shetland, there has not been an associated increase in theft. CI Tulloch agreed, citing the close community as a possible reason for this.

Priority 3- Protecting People

Sexual offences have decreased, while domestic abuse reports have increased by 15. CI Tulloch advised that this is probably due to an increased knowledge of MARAC and a greater awareness of, and confidence in, support services.

Hate crime levels are still extremely low, and CI Tulloch noted that Shetland has not seen the increase in hate crimes that has occurred across the UK.

Priority 4- Antisocial Behaviour & Alcohol Related Disorder

The Police are working with licensees and conducting premises visits in order to maintain a visible presence. There has been a reduction in offenses, and no incidents of breach of the peace.

There has been an increase in the number of assaults, although this is following a notable dip that occurred last year, so there is no significant cause for concern at this. There was a slight increase in vandalism.

Priority 5- Emergency/ Major Incident Response & Resilience

CI Tulloch advised that there are currently three vacancies- for two sergeants and one inspector that have been advertised. He hopes to manage the vacancies through internal recruitment.

There are still challenges in terms of recruiting Special Constables. There are events being held in Yell, Unst and Whalsay during November to try to increase awareness and interest. The 2 weeks training period at the Scottish Police College, Tulliallan, can be off-putting for islanders. CI Tulloch said that if they can get half a dozen people to sign up, they can try to organise training to be held on-island.

Cllr Cooper raised the issue of closing and selling police property on the isles. CI Tulloch said that the Police are in possession of properties that are rarely used and deteriorating because of this, which could be put to far better use by other community groups or agencies. Selling them will allow for considerable savings on maintenance without compromising operational effectiveness. Cllr Cooper agreed that a realistic and practical approach needs to be taken; CI Tulloch noted there has been no significant reaction, although one councillor has expressed concerns, which CI Tulloch will discuss with them.

7. Scottish Ambulance Service

The SAS responds to nearly 2500 calls per year in Shetland. Andy said that over the last 12 months, they have changed the way they categorise calls. The former 8-minute response target was not fit for purpose; immediate life threatening calls still have this as a target, but less serious calls have longer response windows as required. Andy noted that some calls evolve over time, and their status can be changed as appropriate.

Immediately life-threatening calls (ILT) make up only 10-20% of ambulance call outs- Andy said the focus was on reaching these as fast as possible. The SAS has multiple ways to respond, including first responders, paramedics, and patient transport, which allows them to send the appropriate response for the patient's disposition and condition.

Andy said he has fought for extra resources for Shetland, and has managed to put six extra staff in place. The SAS is developing a matrix for working in Shetland, which Andy will be able to produce for the CSRB in the future. He noted that most calls come from Lerwick, and response performance in Lerwick and the surrounding area is very good.

The SAS is at the early stages of a trying a new response model, where the patient is treated for the initial crisis by community responders before waiting on a second responder to arrive. The SAS resilience department has been visiting areas of Shetland to train and develop community responders. This model has been successful on the mainland.

A&E staff are fully recruited; one part-time member of staff has recently left but a replacement has been recruited.

A large number of calls are to do with falls; the SAS is working with the Health Board on the best way to handle these incidents in order to avoid clogging up beds in hospital.

Cllr Cooper said that a community councillor at the North Mavine Community Council had raised the issue of having a first responder in Hillswick- he will pass Andy's details onto the CC's clerk.

8. Resilience Activity

SSEN Resilience Fund

Ingrid explained about Scottish and Southern Energy Network's community resilience fund, which gives grants to community resilience projects, using money from OFGEM. This year there were three Shetland groups that received funding, out of five applying. The SSE are sending staff to conduct training as a condition of these grants, for the groups to create a resilience plan. Ingrid said that the successful projects were all concerned with severe weather, but noted that projects down south have included the purchase of defibrillators.

Ingrid recommended that all community councils, hall associations and boating clubs should be made aware of the training.

CI Tulloch said he was not really aware of it, although cautioned that the emergency services would need to have access to any resilience plans that were drawn up as part of this. Fraser said that SFRS had been approached by community groups in the Western Isles to assist in applications for this fund, and would be able to similarly help any groups in Shetland.

Threat Levels

The threat level for the UK has been raised from 'severe' to 'critical' a number of times this year, although Shetland has not been directly affected by any incidents.

Activities

Ingrid reported on running a workshop on the joint SIC/ NHS graduated security plan, which needs to be proportional. She also spoke about Project Griffin, a PREVENT event held at the start of November.

July's Operation Opus looked at how authorities would manage in the case of mass death, and Exercise Border Reiver also focussed on a large-scale incident. One of the key points from these exercises was that many hospitals are already at capacity, and would be unable to handle a massive influx of casualties.

Ingrid also reported on Exercise Odette held with the Western Isles on 07/11/2017 using the University of the Highlands and Islands network, which focussed on a flu pandemic. 22 people in Shetland took part. Ingrid reported that the exercise highlighted several areas that would be significantly affected by a pandemic outbreak, such as obtaining sufficient fuel for the power station and collection of refuse to run the waste-to-energy plant that the district heating relies on, and how to obtain medical supplies.

Staffing would also be severely affected, as bereaved staff would require support, departments needing to continue after colleagues had been lost, and how to help staff in preparation of the second wave of illness (many pandemics have come as two waves, some months apart). Issues such as the minimum number of staff required to run ferries will need to be looked at, as this is a vital function that will need to continue even after loss of staff.

Ingrid said the exercise was very useful. Cllr Cooper suggested the learning from this should be incorporated into the UHA table top exercise, as a contagion introduced to Shetland would have ample opportunity to spread at such an event.

9. Road Safety Advisory Panel

Elaine reported that there has been no RSAP meeting for some time. She summarised the points of the distributed report. She clarified that 'Play on Pedals' bikes are balance bikes designed to help 2-3 year old children feel comfortable in a bike before progressing. She added that the department is working on a new Road Safety Strategy.

Cllr Cooper said that many communities would like to see more speed counters (cables which lie across the road to measure the speed of cars as they pass over) in order to see if speeding is an issue. This had previously been carried out in Brae and proved to be eye-opener, and it is Brae that is currently asking for this again. He said that this would be worthwhile whether it proves or disproves the common perception that speeding is a major issue, and suggested acquiring more sets of speed counters if necessary. Elaine noted that the staff resources to put out and monitor the counters is more the issue than the counters themselves. She will look into who deals with this.

10. AOCB

Cllr Cooper said that he was amazed by the quality of information about the Police Scotland Volunteers and the good work they have been doing. CI Tulloch advised that this scheme has been

going on for 18 months, and they have raised a considerable sum of cash for charity. There are currently 24 volunteers but there are more who are keen to join.

Cllr Cooper asked if the SFRS had anything similar, as they used to operate the High Fliers programme. Fraser said that they are looking at establishing youth groups across the isles, and have been speaking to the Police about this. It will be for anyone who wants to get involved, and may not be situated in Lerwick. Iain advised that the High Fliers scheme is actually still available; it was initially developed in conjunction with community development departments of local authorities. The scheme is dependent on external funding.

Fraser wanted to thank the members for their cooperation, and added that he had not had a more fulfilling role than this work with the CSRB in Shetland. Cllr Cooper commended Fraser for his work in the isles, and thanked him on behalf of the CSRB for his service and his 'greatly appreciated' work.

The proposed dates of future meetings were agreed upon- 8th February, 9th May, 8th August and 7th November 2018.

Cllr Cooper thanked everyone for coming and closed the meeting.

No	Action	Responsible Officer	Deadline
4	CI Tulloch & Ingrid to update on UHA table top exercise.	CI Tulloch/ Ingrid Gall	08/02/17
6	CI Tulloch to speak to CI Wright about control room supervisors visiting Shetland.	CI Tulloch	08/02/17
9	Elaine to follow up on Brae speeding concerns.	Elaine Skinley	08/02/17
14.3	SFRS to Liaise with SAS and CP&D on the location of and responsibility for defibrillators on the Isles. Ongoing.	Myles Murray	Ongoing



Scottish Ambulance Service

Shetland

Community Safety & Resilience Board February 2018

1.0 A&E Performance:

The New Clinical Response Model (NCRM) was launched in late 2016 as a 12 month pilot. NCRM was developed and modelled with an extensive clinical data set, allowing for a focused review of patients' clinical need and matching this to the Service response, resource and skill. Since going live the model has proven to accurately identify patient groups as predicated, based on their clinical acuity.

NCRM aim is to save more lives and improve outcomes. This was demonstrated with an increase in Return of Spontaneous Circulation (ROSC) in the first quarter launch in comparison to the same quarter in the previous year. For patients who require access to an acute pathway i.e. Acute Myocardial Infarction or Acute Stroke Patients, this has been approached in the NCRM by sending the right conveying emergency ambulance resource first time; this has been achieved 93.7% of the time.

There has been a steady volume of staff feedback to a dedicated email address which has allowed themes to be identified and improvements to operating practice to be made. Since going live there have been no reported Significant Adverse Events.

Phase 2 involved the upgrade to the latest version of our triage software, MPDS. Introduction of dispatch on disposition with resources sent once the clinical coding in MPDS went live with an implementation date of October 17.

I am hoping to be able to report on location specific data soon but this has not yet been developed nationally to sub regional level

1.1 Actions being taken to improve the ILT Performance

- Continue to review shift patterns. Implementation of 6 new staff into Lerwick is now complete with the development of a shift to accommodate the staff that maximises shift cover has now been agreed and will be implemented over the next few weeks.
- Progress with new Community First Responder Schemes. This is a phased approach due to the resources required to implement these.
- Ongoing dialogue with NHS Boards and NHS24 around the reasons for increasing SAS Demand and the need to put in place alternative pathways of care to reduce inappropriate admissions to hospital. This is being progressed through the NHS Boards Unscheduled Care Work Streams.
- Continue the development of Specialist Paramedics to increase see and treat and reduce inappropriate admissions to hospital. One locally for Shetland this year currently on their post grad cert at Glasgow Caledonian University, new equipment and medicines are currently being purchased for this staff member to go live once graduated. Hopefully within the next few months.
- Continue to work with NHS Boards to fully utilise Profession to Profession lines
- Working with partners to fully develop falls pathways for A&E Crews to access along with access to rapid response teams and hospital at home teams with responsive care packages where available. Discussion through Ambulance liaison group.
- All daily Immediate Life Threatening calls Out Of Performance are monitored daily for any notable delays in response where reflection and learning can take place. Main delays are still reported as through 'location always out with performance response time / surge demand. Delays in mobilising are still mainly due to staff responding from home locations when on call.

1.2 Actions being taken to improve the YTD Cardiac Arrest Performance

- As outlined in the ILT Performance Section
- Developing new community first responder schemes and working with local communities to install Public Access defibrillators and map these onto the C3 System
- Targeting another resource to attend all Cardiac Arrest calls as well as the initial response

1.3 Actions being taken to improve the Urgent Performance Target

- Implementing revised shift patterns
- One staff member in Lerwick undertaking quality improvement methodology training and looking at topics for future projects including conveyance rates to the hospital.
- Progression of new Community First Responder Schemes. This is a phased approach due to the resources required to implement these.
- Ongoing dialogue with NHS Boards and NHS24 around the reasons for increasing SAS A&E Demand and the need to put in place alternative pathways of care to reduce inappropriate admissions to hospital. This is being progressed through the NHS Boards Unscheduled Care Work Streams.
- Continuing to work with NHS Boards to fully utilise Profession to Profession lines
- Working with partners to fully develop Falls pathways for A&E Crews to access along with access to rapid response teams and hospital at home teams with responsive care packages where available

- Working to improve service delivery through See and Treat figures

1.4 Actions being taken to improve the YTD Hyper Acute Stroke to Hospital < 60 mins Performance

- As outlined in the ILT/Urgent Performance Section
- Crews to take less time at location if they can achieve getting the patient to hospital within 1 hour from the call.
- Return from call under blue lights to hospital.
- Profession to profession support

SAS Context

- 888,000 calls to ACC = 686,500 ambulance responses
- Typical response outcome:
 - 2 patients in every 10 are life threateningly ill and/or injured
 - 1 patient is seriously unwell
 - 6 patients have an exacerbation of an existing condition or minor injury/illness
 - 1 patient will not require or will refuse assistance
- Current Model
 - Circa 30% of SAS responses require hospital A&E
 - Circa 80% end up there! (82.5% in Shetland)

2.0 SAS/NHSS Liaison Group

2.1 Background

Our clinical partnership working between the Scottish Ambulance Service and NHSS is an integral part of the health service activity on Shetland. Before the Ambulance Liaison Group was set up the discussions between NHS Shetland and SAS were undertaken at a front line level and through a Commissioning team route. It was decided to try and widen the involvement of other stakeholders to ensure that discussions and decisions were as representative as possible, and were able to be fed back into the governance structures of both organisations. The Ambulance Liaison Group started meeting monthly from September 2012.

2.2 Membership and roles on group

Co Chaired by Andy Fuller SAS Head of services for the Islands and Kathleen Carolan Director of Nursing NHS Shetland the group consists of representatives from both NHSS and SAS.

2.3 Reviewing Ambulance Liaison incidents

Both SAS and NHS Shetland have an incident reporting system and some incidents which are reported involved the other organisation and so require some partnership investigation and learning. The Ambulance Liaison group have overseen the investigation and outcome of a number of incidents since it started and the group has proved a useful forum to discuss incidents in detail and agree learning outcomes.

3.0 Shared Governance

The Ambulance Liaison meeting allows both organisations to look at governance issues that cross the boundary between them.

Liaison incidents can be raised by either organisation and are investigated by one or both of them, depending on the circumstances. The investigation reports are then reviewed by the group and learning and actions identified. An ongoing Action Log monitors the progress of actions arising from incident investigations.

4.0 Ambulance Liaison Incidents

4.1 Changes/ outcomes from these incident reviews include:

- Shared understanding where there has been a poor patient journey so we can learn and improve.

4.2 Current Actions from the Group:

- Island specific ambulances delivered to Skerries and Fetlar for SAS/NHSS use
- Ongoing training and development of the retained service with new members in the recruitment process

5.0 Outer Islands SOF Update:

Fetlar Basic Spec 4x4 VW Caravelle (A shared resource with NHS Shetland is now in place, this will serve as patient transport/mobile clinic/nurse transport).	Two available to respond with more to refresh their training, training officer trying to secure personnel and dates
Skerries Basic Spec 4x4 VW Caravelle (A shared resource with NHS Shetland is now in place, this will serve as patient transport/mobile clinic/nurse transport).	We have a team of 5 here, and training is complete. They have been trained and Completed Driving assessments with all 5 plus some Moving & Handling, infection control, entonox and FPOS Intermediate Delivered.
Unst A&E Spec 4x4 VW Caravelle	A team of 8 working and available to respond to calls
Whalsay	A Contractor scheme with a pool of 5 volunteers

A&E Spec 4x4 VW Caravelle	and a coordinator. A couple are ready to train when resources are available
Yell A&E Spec 4x4 VW Caravelle	The team are trained to FPOS intermediate or the equivalent. Vehicle now housed at the SFRS station Mid Yell.
Foula	We intend a joint visit to Foula and contact the Community Council at the earliest opportunity.
Fair Isle	Fair Isle visited on the 22 nd June 2016 and held a meeting in the fair isle hall with about 26 residents. No one showed any interest and Peter and Edna were told that they have an arrangement with the SFRS as they are first responder trained that the nurse calls them if she requires any help. SAS and SFRS will try and formalise this arrangement
Bressay	Advertised locally for recruits with one person to date expressing an interest. Utilising local newsletter to advertise. Possible co responder scheme with SFRS

5.1 Retained

There are currently two members of the retained team available with a need to recruit and train more. The current gaps in cover are filled by qualified staff.

5.2 Community First Responders

There have been 3 public meetings recently in Brae, Bixter and Sandwick.

Brae: Although a scheme currently operates here with 3 volunteers one is about to leave. At the meeting 8-9 locals attended showing interest in becoming responders.

Bixter: A good turnout saw about 15 locals attend this meeting with interest in becoming a volunteer, applications have been sent out.

Sandwick: An excellent turnout saw about 20 locals attend this meeting again with interested parties being sent application forms to complete

5.3 Station update:

SFRS have submitted the Building Warrant. The tenders go out tomorrow (27/10/17) as the fire Service decided to take out their alterations to the attic which meant a slight delay; however, they are still confident on getting the works completed before end of March 2018. They have 3 companies they are going out to tender to. FEB update: Work due to start this month with a completion date of March/April 2018.

6.0 PTS (Patient Transport Service)

We have recruited to three part time posts unfortunately one has resigned and we are out to advert to replace this post.

The North Division Scheduled Care Delivery Team meets regularly on a six weekly basis to review performance against the agreed North Scheduled Care Action Plan.

Only patients with a clinical need for ambulance assistance will be conveyed by the SAS.

	Demand		Difference	
	Period 1 - 03/04/2017 - 31/12/2017	Period 2 - 01/04/2016 - 30/12/2016	Demand	Demand Variance
Registered Journey Count	1015	828	187	22.58%
Journey Count	738	701	37	5.28%
Medical Escort Count	14	9	5	55.56%
Relative Escort Count	13	10	3	30.00%
Cancel Count	277	127	150	118.11%
Abort Count	17	7	10	142.86%
W (C)		2	-2	-100.00%
W1, WT1, WC1 (C1)	478	551	-73	-13.25%
W2, WT2, WC2 (C2)	89	77	12	15.58%
Stretcher	171	71	100	140.85%
A&E				
Admission	5	10	-5	-50.00%
Day Patient				
Discharge	130	145	-15	-10.34%
House to House Transfer	17	3	14	466.67%
Out Patient	584	537	47	8.75%
Transfer	1	6	-5	-83.33%

Although Shetland has a low number of requests for the service the large area in which the ambulance covers has its own challenges. The vehicle is responsible not only for servicing mainland Shetland it also covers the small islands involving ferry trips.

Shetland is experiencing significant increases in Outpatient activity and demand which is not in line with the national framework where reductions were expected. This will continue to be monitored and explored with the Health Boards.

Staffing has been challenging in terms of vacancies and sickness absence, however at recent liaison group meetings a small increase in the number of renal patients which was discussed in terms of eligibility etc. We have now recruited 3 out of 4 PT staff for PTS this will alleviate the pressure and make more journeys possible.

The reasons for PTS Punctuality for Pickup after appointment

- Patients requiring to be picked up from outpatient clinics with different outpatient appointments finishing at different times impacting on the pick up after appointment time

Actions being taken to improve

- AutoPlan and Shift Reviews, Working with Health Boards to streamline outpatient appointment time processes

The reasons for PTS SAS Cancelled No Resource

- Accepting all bookings and having to cancel journeys 24 hours prior to appointment time due to lack of resources
- Limited resources with Vacancies, sickness or leave having an impact on capability

Actions being taken to improve

- Fill vacant PTS Posts, Reviewing & Monitor Sickness / Absence levels, Different ways of working and engaging with Health Boards around appointment times, Working with alternative transport providers for patients who do not meet the Patient Needs Assessment (PNA) freeing up capacity for patients that do meet the PNA

Contacts:

Andrew M Fuller Divisional Head of Services

Malcolm Macleod Area Service Manager, Islands

Peter Smith Paramedic Team Leader, Lerwick

Appendix 1

Glossary

Scheduled Care – PTS

Punctuality for appointment at hospital - Target 75%

Punctuality after appointment (uplift) - Target 80%

Journeys cancelled - Target <0.5%

The categories are:

W - The patient can walk unaided and requires no assistance.

W1 - The patient can walk and requires steadying assistance only.

W2 - The patient can walk and requires the assistance of two crew members.

WT1 - The patient has their own wheelchair but can transfer to a seat with minimal assistance. There is suitable access at their home and requires the assistance of a single crew member only.

WT2 - The patient has their own wheelchair and requires the assistance of two crew members to transfer to/from the vehicle.

WC1- The patient has a medical need to travel in their own wheelchair and cannot transfer to/from vehicle. There is suitable access at their home and they require the assistance of a single crew member.

WC2- The patient has a medical need to travel in their own wheelchair and cannot transfer to/from vehicle. Access at their home and/or their condition requires the need of a two crew members.

SAS Clinical Model

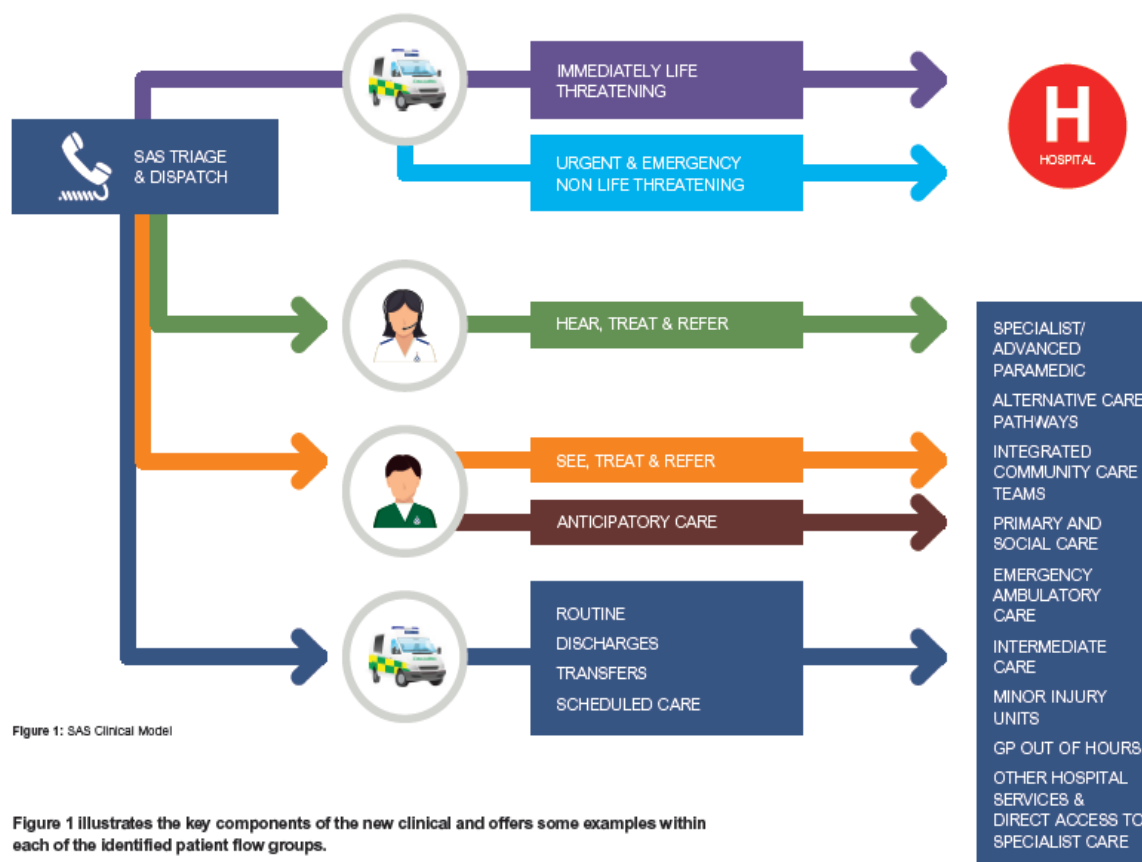


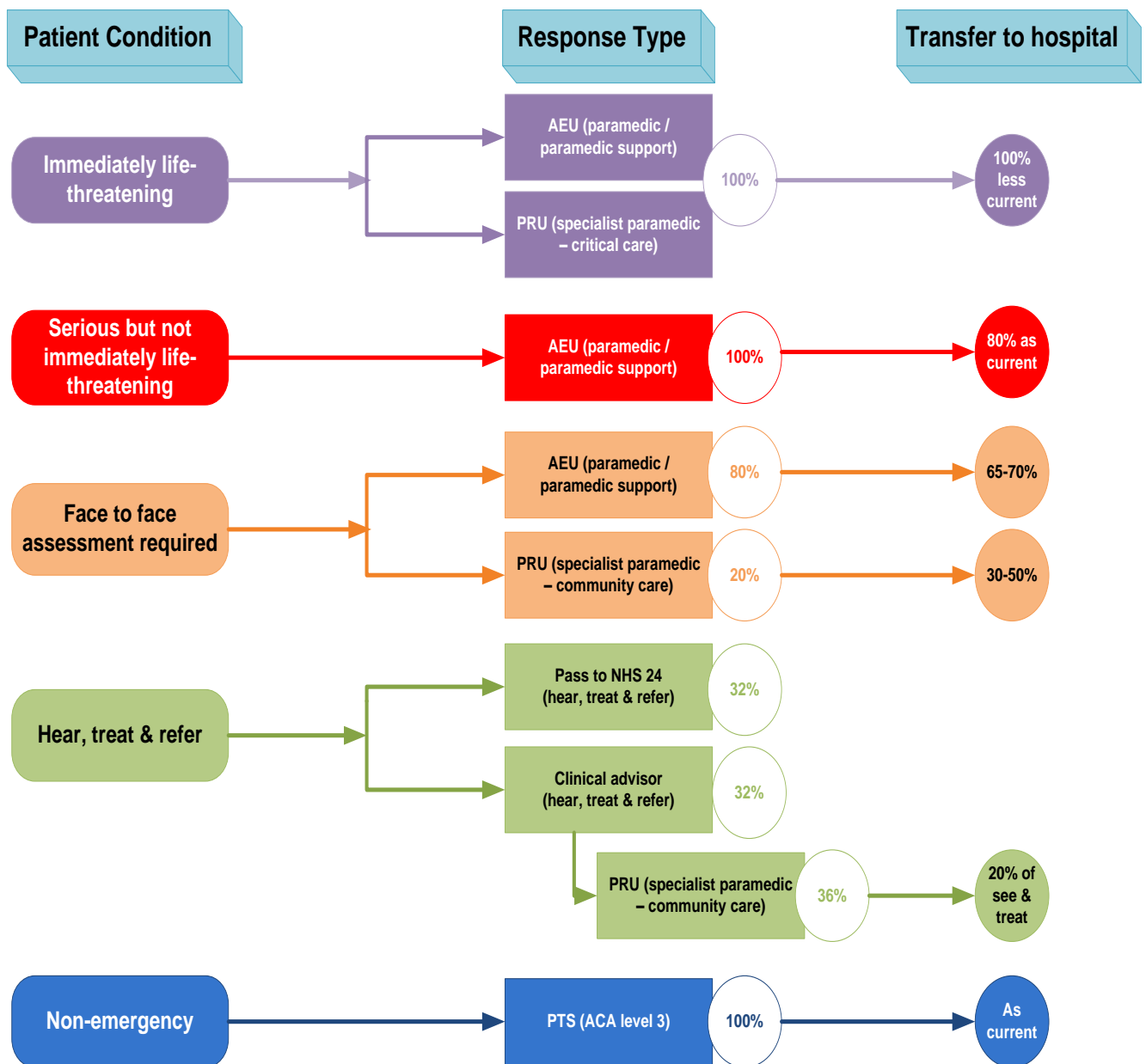


Figure 1 illustrates the key components of the new clinical and offers some examples within each of the identified patient flow groups.

 Scottish Ambulance Service <i>Taking Care to the Patient</i>  'Taking Care to the Patient' The Response Model		
Patient Flows	Acuity	Response/skills
Immediately Life Threatening	Immediately life threatening 8 minute response	Paramedic/Specialist paramedic Conveying resource
Serious but not Immediately Life-Threatening	Time-critical Urgent GP admissions and hospital transfers	Conveying resource Paramedic plus support
See, Treat & Refer	Non time-critical Face-to-face assessment	Specialist paramedic/Paramedic Enhanced minor injury/illness
Hear, Treat & Refer	Low acuity 999 calls Calls passed to NHS24	Clinical advisor in Ambulance Control Centres Paramedic level
Non-Emergency	Scheduled care Low acuity urgent-discharge/transfers	Conveying resource Enhanced Ambulance Care Assistant, Basic Life Support, oxygen, Automated External Defibrillator





Scottish Ambulance Service

Shetland

Community Safety & Resilience Board Feb 2016

1.0 A&E Performance:

In **Shetland**, there has been an overall decrease of 66 (4.3%) incidents compared with the same period last year. **April - Nov 14, April – Nov 15**

- 2.2% Decrease (4) in Cat A Incidents
- 15 Cat A's less in performance this year (93/108) as the same period last year
- 5.5% Decrease (23) in Cat B Incidents
- 18.4% Decrease (14) in Cat C Incidents
- 17.0% Decrease (134) in Urgent Incidents
- 141.6% Increase (109) in Routine incidents increase since Aug 2015

However over the last three years there has been a steady increase in the overall incident count:

The location of incidents on Shetland can extend response times. Work is ongoing to increase community first responder and emergency responder schemes.

The North Division Management team are continuing to work with internal and external stakeholders to discuss ways to address demand particularly around urgent and routine work and to continue to explore alternative pathways of care. Any increase in urgent and routine work directly impacts on our availability for Cat A life threatening calls

Call category	2013/14	2014/15	2015/16 YTD (predicted)
Cat A	243	282	225
Cat B	596	638	492
Cat C	112	114	74
Urgent	788	1188	801
Routine	49	116	218
Total	1838	2338	1810 (2778)

1.1 Actions being taken to improve the YTD Cat A Performance

Sector	YTD	Last Year
Shetland	52.5%	58.2%
Target 75%		

- Continue to review shift patterns.
- Progress with new Community First Responder Schemes. This is a phased approach due to the resources required to implement these.
- Ongoing dialogue with NHS Boards and NHS24 around the reasons for increasing SAS Demand and the need to put in place alternative pathways of care to reduce inappropriate admissions to hospital. This is being progressed through the NHS Boards Unscheduled Care Work Streams.
- Continue to support the use of Community Paramedics to increase see and treat and reduce inappropriate admissions to hospital.
- Continue to work with NHS Boards to fully utilise Profession to Profession lines
- Working with partners to fully develop falls pathways for A&E Crews to access along with access to rapid response teams and hospital at home teams with responsive care packages where available. Discussion through Ambulance liaison group.

1.2 Cat A Cardiac Arrest Performance

Sector	YTD	Last Year	Comment
Shetland arrival within 8 mins	38.5%	76.9%	Target 80% YTD figure only 3 months so far with cardiac arrests one at 33% two at 100%
Return of Spontaneous Circulation (ROSC)	20.0%	27.3%	Target 20%
VF/VT ROSC	33.3%	No figure	Target 30%

The reasons for YTD Cat A Cardiac Arrest Performance are outlined in the Cat A Performance section.

1.3 Actions being taken to improve the YTD Cat A Cardiac Arrest Performance

- As outlined in the Cat A Performance Section
- Developing new community first responder schemes and working with local communities to install Public Access defibrillators and map these onto the C3 System
- Targeting another resource to attend all Cardiac Arrest calls as well as the initial response

1.4 Cat B Performance

Sector	YTD	Last Year
Shetland target 95%	66.3%	73.4%

The reasons for YTD Cat B Performance are outlined in the Cat A Performance Section and also include

- Increase in A&E Demand
- Changes to Key Performance Indicators (KPIs) for responding to Cat B Calls from 21 minutes during 2011/12 to 19 minutes from 2012/13 has had an impact on Cat B Performance in the North Division
- The continual increase on demand

1.5 Actions being taken to improve the Cat B Performance Target

- Implementing revised shift patterns
- Progressing new Community First Responder Schemes. This is a phased approach due to the resources required to implement these.
- Ongoing dialogue with NHS Boards and NHS24 around the reasons for increasing SAS A&E Demand and the need to put in place alternative pathways of care to reduce inappropriate admissions to hospital. This is being progressed through the NHS Boards Unscheduled Care Work Streams.
- Continuing to work with NHS Boards to fully utilise Profession to Profession lines
- Working with partners to fully develop Falls pathways for A&E Crews to access along with access to rapid response teams and hospital at home teams with responsive care packages where available
- Working to improve service delivery through See and Treat figures

1.6 Hyper Acute Stroke to Hospital < 60 mins

Sector	YTD	Last Year
Shetland	75.0%	100%
80% Target to hospital in <60 mins		

1.7 Actions being taken to improve the YTD Hyper Acute Stroke to Hospital < 60 mins Performance

- As outlined in the Cat A Performance Section
- Crews to take less time at location if they can achieve getting the patient to hospital within 1 hour from the call.
- Return from call under blue lights to hospital.
- Profession to profession support

SAS Context

- 888,000 calls to ACC = 686,500 ambulance responses
- Typical response outcome:
 - 2 patients in every 10 are life threateningly ill and/or injured
 - 1 patient is seriously unwell
 - 6 patients have an exacerbation of an existing condition or minor injury/illness
 - 1 patient will not require or will refuse assistance
- Current Model
 - Circa 30% of SAS responses require hospital A&E
 - Circa 80% end up there! (83.9% in Shetland)

2.0 SAS/NHSS Liaison Group

2.1 Background

Our clinical partnership working between the Scottish Ambulance Service and NHSS is an integral part of the health service activity on Shetland. Before the Ambulance Liaison Group was set up the discussions between NHS Shetland and SAS were undertaken at a front line level and through a Commissioning team route. It was decided to try and widen the involvement of other stakeholders to ensure that discussions and decisions were as representative as possible, and were able to be fed back into the governance structures of

both organisations. The Ambulance Liaison Group started meeting monthly from September 2012.

2.2 Membership and roles on group

Chaired by Andy Fuller SAS Head of services for the Islands the group consists of representatives from both NHSS and SAS.

2.3 Key pieces of work undertaken or supported so far

2.3.1 Landing lights on Outer Isles

Following an incident on an outer isle where there was a delay evacuating a patient overnight SAS undertook a full review of landing lights on outer island landing sites. Although the Coastguard, in an emergency, can fly under Search and Rescue (SAR) rules and land anywhere they deem safe, JIGSAW (a subcontracted service medical helicopter service) cannot fly under SAR rules (unless it is specifically acting as a SAR resource) and so could not land in darkness on a landing site without proper lights. This meant that for urgent cases that didn't meet Coastguard emergency criteria, options for evacuation overnight were limited, and sometimes led to delays for the patient.

All the landing site surveys have been now completed by SAS and procedures are in place to light them at night so now patients needing urgent evacuation overnight from the outer isles have an improved service as the JIGSAW resource can also be used.

2.4 Memorandum of Understanding

Medical evacuation from the outer isles is co-ordinated by the SAS Air Desk. There are occasions when medical evacuation is needed for a patient who is 'walking wounded' but there is no scheduled transport service in an acceptable time frame. A Memorandum of Understanding has been agreed locally whereby the SAS can charter the Islander plane to collect such a patient to avoid the unnecessary use of the Coastguard helicopter. This ensures that the Coastguard helicopter is not tied up unnecessarily and is also a much cheaper option for transfer.

2.5 Air Evacuation flow chart

Ordering an Air Ambulance has historically been a complex process. SAS have put considerable resource into agreeing a flowchart for medical evacuation which covers routine, urgent and emergency categories. This work has included agreeing an enhanced set of situations that JIGSAW can be used for and improving clarity on how to order an air ambulance for transfer in from the outer isles and how to update the Air Desk if the patient's condition changes. This flow chart has been signed off by the Ambulance Liaison Group and has now been implemented. The flowchart covers all steps for both SAS Air Desk staff and requesting clinicians and is expected to resolve a number of issues that have been identified through incidents reported to the group.

2.6 Outer Isles Standard operating procedures

Calls to the Air Desk are unlikely to be handled by anyone with firsthand knowledge of Shetland geography and landing site arrangements. SAS have undertaken a piece of work to update the guidance for the Air Desk staff on the arrangements and specific issues for each of our outer islands. In conjunction with the Air Evacuation Flow Chart this will provide the Air

desk staff with the most up-to-date and detailed knowledge they need to plan air evacuations from the islands. This information has been provided by staff on the outer isles and is now in use.

2.7 Reviewing Ambulance Liaison incidents

Both SAS and NHS Shetland have an incident reporting system and some incidents which are reported involved the other organisation and so require some partnership investigation and learning. The Ambulance Liaison group have overseen the investigation and outcome of a number of incidents since it started and the group has proved a useful forum to discuss incidents in detail and agree learning outcomes.

3.0 Shared Governance

The Ambulance Liaison meeting allows both organisations to look at governance issues that cross the boundary between them.

Liaison incidents can be raised by either organisation and are investigated by one or both of them, depending on the circumstances. The investigation reports are then reviewed by the group and learning and actions identified. An ongoing Action Log monitors the progress of actions arising from incident investigations.

4.0 Ambulance Liaison Incidents

4.1 Changes/ outcomes from these incident reviews include:

- Shared understanding where there has been a poor patient journey so we can learn and improve.
- The agreement on the Air Evacuation Flow Chart
- Completed landing light surveys on the outer islands and protocols implemented.
- Resolution of equipment issues.
- Making sure that all the air ambulance staff in Shetland knows who they can talk to about timings and delays.
- Audit of delays at Aberdeen has not identified a pattern. All staff knows how to upgrade calls if deteriorating patient. SAS looking at introducing a category of request for onward transfer to minimise delays.
- Re-issued guidance on when mothers can fly, and what documentation they need.

4.2 Current Actions from the Group:

- Discussions to invite a lay person onto the group
- SAS National team proposals to standardise all contractors training and Education
- Island specific ambulances delivered to Skerries and Fetlar for SAS/NHSS use
- Ongoing training and development of the retained service with new members in the recruitment process

5.0 Outer Islands SOF Update:

<p>Fetlar</p> <p>Basic Spec 4x4 VW Caravelle (A shared resource with NHS Shetland is now in place, this will serve as patient transport/mobile clinic/nurse transport).</p>	<p>2 recruits were trained to FPOS Basic April 7th 2014</p> <p>Visited on 15/7/14 & 26/8/14 carried out some Moving & Handling, driving assessments and completed a refresher session for them.</p> <p>Also undertook training and driving assessments with 4 new recruits 23-25th March</p> <p>Unfortunately one of the "new" recruits has resigned due to getting a full time job in Unst.</p>
<p>Skerries</p> <p>Basic Spec 4x4 VW Caravelle (A shared resource with NHS Shetland is now in place, this will serve as patient transport/mobile clinic/nurse transport).</p>	<p>We have a team of 5 here, and training is complete. They have been trained and Completed Driving assessments with all 5 plus some Moving & Handling, infection control, entonox and FPOS Intermediate</p> <p>Delivered. A refresher was completed on the 11th June 2015</p> <p>PS gave Nurse familiarisation session on IBEX chair as they have had a vehicle swap (Nov 15)</p> <p>Next refresher Dec 15</p>
<p>Unst</p> <p>A&E Spec 4x4 VW Caravelle</p>	<p>A team of 8 working</p> <p>Revisited in Jan 2015 delivered more training assessed 3 for fpos BASIC.</p> <p>Scenario run with the team and GP</p> <p>July 2015 – Met with 5 of the team for a refresher</p> <p>Refresher due in Feb 16</p> <p>Plans are well established to garage the Ambulance in the Fire station at Baltasound</p>
<p>Whalsay</p> <p>A&E Spec 4x4 VW Caravelle</p>	<p>A Contractor scheme with a pool of 7 volunteers and a coordinator.</p> <p>The existing team are trained to FPOS intermediate.</p> <p>They have completed Moving and Handling, driving assessments and Infection control.</p> <p>NP delivered a refresher session 3/2/15</p> <p>Have been trained to use Entonox</p> <p><u>Were given Paper datix forms sept 2013</u></p> <p>Refresher training completed in Dec 2015 including a M&H refresher</p>
<p>Yell</p> <p>A&E Spec 4x4 VW Caravelle</p>	<p>A Contractor scheme with 5 volunteers</p> <p>The team are trained to FPOS intermediate or the equivalent.</p> <p>Two new recruits were trained to FPOS intermediate in December. They also completed Driving assessments and M&H plus infection control</p> <p>BH delivered a refresher session 8/12/14</p> <p>Refresher delivered 7/7/15</p> <p>Currently due a refresher</p>
<p>Foula</p>	<p>We intend a joint visit to Foula in Feb and contact the Community Council at the earliest opportunity.</p>

Fair Isle	We intend a joint visit to Fair Isle in Feb and contact the Community Council at the earliest opportunity.
Bressay	Advertised locally for recruits with one person to date expressing an interest. Utilising local newsletter to advertise.

5.1 Retained

The retained team in Lerwick are undergoing training we have two that have completed their GCU initial training and are now on station to complete their mentored hours and practice placements. We have a further three students that are completing SVQ level 3 and are ready to take up SVQ level 4 at the beginning of April 2016 which when completed will be equivalent to technician level

5.2 West Mainland – Aith

There is an intention to set up a community responder scheme in west Mainland and we have a couple of contacts that the team intend to follow up.

6.0 PTS (Patient Transport Service)

One part time Vacancy in Shetland

The North Division Scheduled Care Delivery Team meets regularly on a six weekly basis to review performance against the agreed North Scheduled Care Action Plan.

Only patients with a clinical need for ambulance assistance will be conveyed by the SAS.

Shetland Health Board Sector Comparison

	Demand		Difference	
	Period 1 - 01/04/2015 - 31/12/2015	Period 2 - 02/04/2014 - 31/12/2014	Demand	Demand Variance
Registered Journey Count	713	499	214	42.89%
Journey Count	573	346	227	65.61%
Medical Escort Count	9	24	-15	-62.50%
Relative Escort Count	23	37	-14	-37.84%
Cancel Count	140	153	-13	-8.50%
Abort Count	10	12	-2	-16.67%
W (C)	0	20	-20	-100.00%
W1, WT1, WC1 (C1)	460	190	270	142.11%
W2, WT2, WC2 (C2)	73	74	-1	-1.35%

Stretcher	40	62	-22	-35.48%
A&E				
Admission	1	7	-6	-85.71%
Day Patient				
Discharge	129	127	2	1.57%
House to House Transfer	5	3	2	66.67%
Out Patient	425	197	228	115.74%
Transfer	13	12	1	8.33%

Although Shetland has a low number of requests for the service the large area in which the ambulance covers has its own challenges. The vehicle is responsible not only for servicing mainland Shetland it also covers the small islands involving ferry trips.

As we are seeing with many other areas there have been significant increases in W Category and patients who require support and assistance from one. It is currently being explored why W Category patients are increased and is more suitable transport solutions available to meet the individuals need.

Like Orkney, Shetland too is experiencing increases in Outpatient activity and demand which is not in line with the national framework where reductions were expected. This will continue to be monitored and explored with the Health Boards.

Staffing has been challenging in terms of vacancies and sickness absence, however this has not unduly affected PTS performance locally. Small increase in the number of renal patients which was discussed at a recent liaison group meeting in terms of eligibility etc. It is anticipated that further recruitment for PTS will be required in the near future

6.1 Punctuality for Pickup for Appointment

Sector	YTD	Last Year
Shetland 75% Target	88.0%	81.4%

6.2 PTS Punctuality for Pickup after Appointment

Sector	YTD	Last Year
Shetland 80% Target	98.1%	96.5%

The reasons for PTS Punctuality for Pickup after appointment

- Patients requiring to be picked up from outpatient clinics with different outpatient appointments finishing at different times impacting on the pick up after appointment time

Actions being taken to improve

- AutoPlan and Shift Reviews, Working with Health Boards to streamline outpatient appointment time processes

6.3 PTS SAS Cancelled No Resource

Sector	YTD	Last Year
Shetland Target <= 0.5%	5.4%	6.7%

The reasons for PTS SAS Cancelled No Resource

- Accepting all bookings and having to cancel journeys 24 hours prior to appointment time due to lack of resources
- Limited resources with sickness or leave having an impact on capability

Actions being taken to improve

- Fill vacant PTS Posts, Reviewing & Monitor Sickness / Absence levels, Different ways of working and engaging with Health Boards around appointment times, Working with alternative transport providers for patients who do not meet the Patient Needs Assessment (PNA) freeing up capacity for patients that do meet the PNA

Contacts:

Andrew M Fuller Divisional Head of Services

Malcolm Macleod Area Service Manager, Islands

Peter Smith Paramedic Team Leader, Lerwick

Appendix 1

Glossary

Emergency Calls

Category A – Life threatening call response Target of 8 Minutes for 75% of calls

Category B – Emergency call response target of 19 minutes for 95% of calls

Category C – Emergency call that could be responded to in a given timeframe or passed to another service provider i.e. NHS24

Urgent Call - Unplanned call from NHS 24, Doctor, midwife that has a timescale for admission to hospital. 91% target

Routine Calls- Are on the boundary between A&E and PTS operations. They include non-urgent transport for patients who require paramedic intervention en-route and patients who could travel by PTV but for unusual factors. Future bookings and retrievals are often planned using Routine Calls.

Scheduled Care – PTS

Punctuality for appointment at hospital - Target 75%

Punctuality after appointment (uplift) - Target 80%

Journeys cancelled - Target <0.5%

The categories are:

W - The patient can walk unaided and requires no assistance.

W1 - The patient can walk and requires steadying assistance only.

W2 - The patient can walk and requires the assistance of two crew members.

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SAS Clinical Model

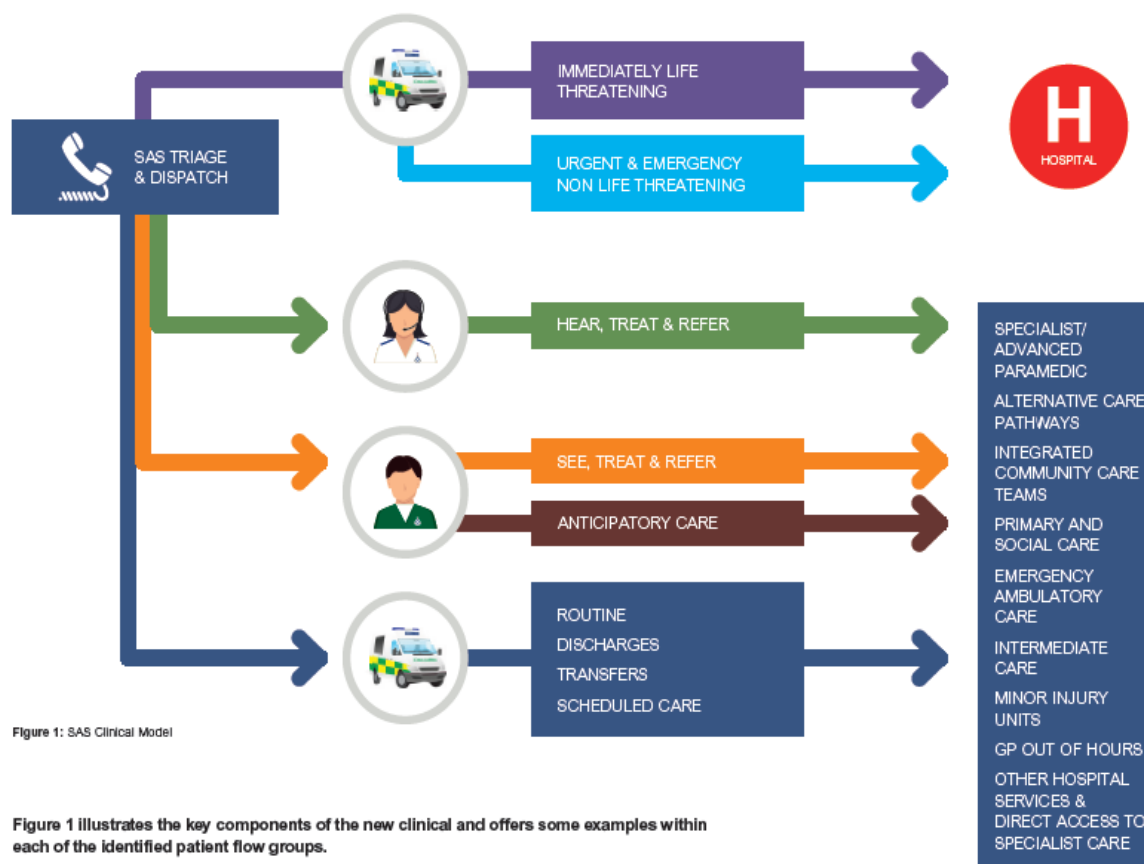


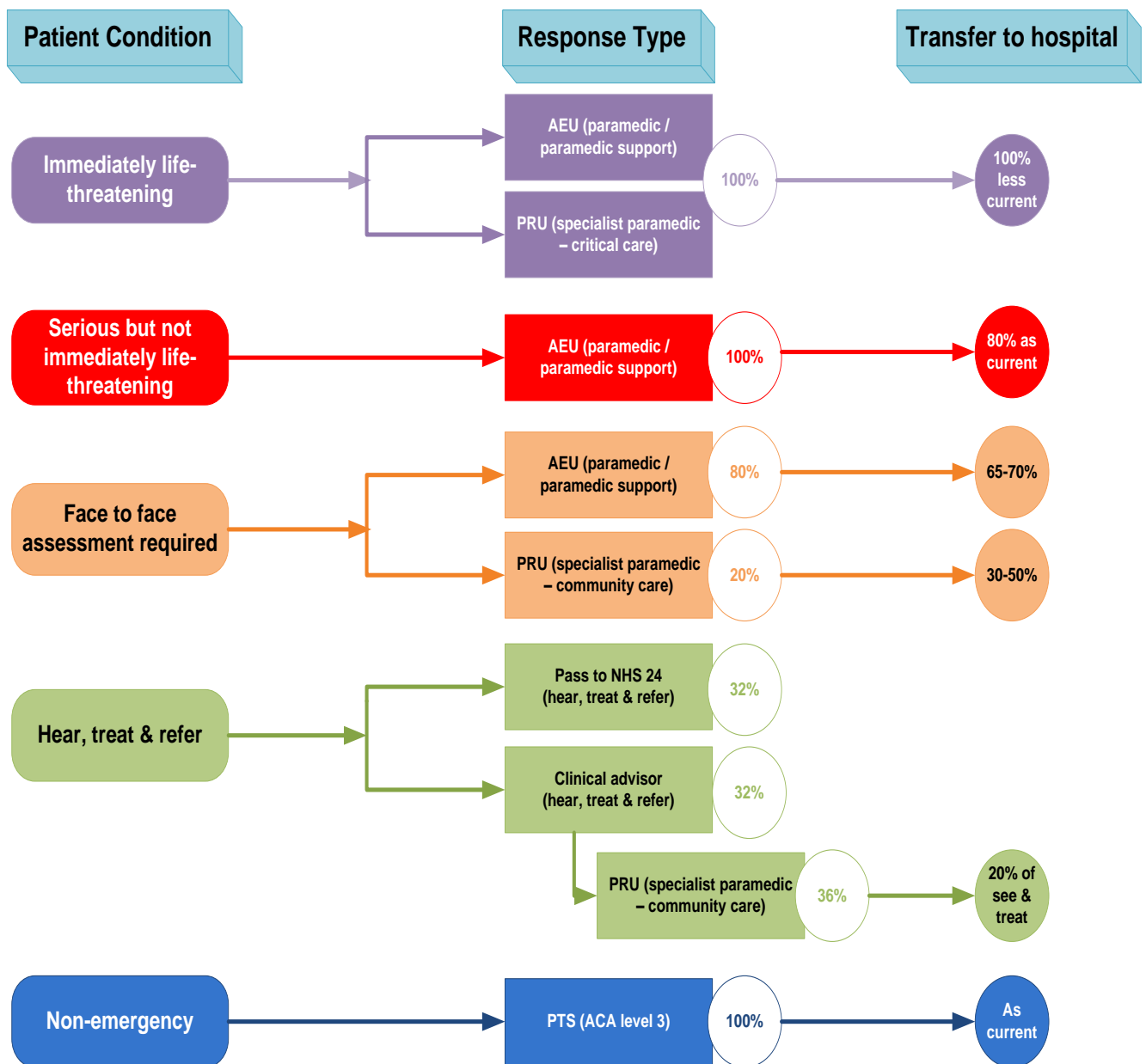


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Hear, Treat & Refer	Low acuity 999 calls Calls passed to NHS24	Clinical advisor in Ambulance Control Centres Paramedic level
Non-Emergency	Scheduled care Low acuity urgent-discharge/transfers	Conveying resource Enhanced Ambulance Care Assistant, Basic Life Support, oxygen, Automated External Defibrillator



Community Safety & Resilience Board

Item
5

Report Title:	Performance against the Local Fire & Rescue Plan for Shetland
Presented By:	Area Manager Iain MacLeod, Local Senior Officer for Shetland

1.0	Overview/Introduction
1.1	To provide an update on performance against the SFRS Local Plan for the second quarter of 2017-18.
2.0	Background Detail & Content
2.1	The Quarterly Performance Report, attached as Appendix 1 to this report, reflects the performance outcomes outlined within the Fire and Rescue Plan for the Shetland Islands, and provides performance information for the period 1 July to 30 September 2017.
3.0	Proposal/Expected Outcome
3.1	Members note the updated and verified Quarterly Performance report for the period 1 July 2017 to 30 September 2017; as outlined in section 2 of this report.
	<hr/>
	For further information please contact: Name: Iain MacLeod, Local Senior Officer for Shetland Contact information: 01851 705051 E-mail Iain.MacLeod4@firescotland.gov.uk Date: 10.01.2018
	<hr/>
	END



Quarterly Performance Report

Quarter 2 2017-2018 (1 July to 30 September)



Shetland Islands Council



SCOTTISH
FIRE AND RESCUE SERVICE

Working together for a safer Scotland

DISCLAIMER

The figures included in this report are provisional and subject to change as a result of quality assurance and review. The statistics quoted are internal management information published in the interests of transparency and openness.

The Scottish Government publishes official statistics each year which allow for comparisons to be made over longer periods of time.

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INTRODUCTION

This performance report provides information on our prevention, protection and operational response activities within the Shetland Islands over the period Quarter 2 2017-2018, (July-September 2017).

The Scottish Government provides an overarching vision for public services. This vision is supported by 16 National Outcomes which demonstrate commitment to creating a more successful country, with opportunities for all of Scotland to flourish, through increasing sustainable growth. The Scottish Fire and Rescue Service (SFRS) can make a significant contribution to improving these outcomes in the Shetland Islands by contributing to the Community Planning arrangements across the area.

The national priorities for the SFRS are set out in the Fire and Rescue Framework for Scotland 2013.







The SFRS Strategic Plan 2016-2019 outlines how the SFRS will deliver against these priorities and the outcomes against which this delivery can be measured.




The priorities contained within the Shetland Islands Local Fire and Rescue Plan 2014-2017 reflects the Community Planning Partnership & Single Outcome Agreement (SOA). The SOA includes a range of key themes focused on delivering improved outcomes for the communities in the Shetland Islands.

The aims of the Local Fire and Rescue Service in Shetland are to reduce deaths, injuries and damage to property from fires and other emergency events. We aim to achieve this by working in partnership, being pro-active and targeting our prevention and protection activities to where they are most required, based on evidence.

Performance Summary

We measure how well we are meeting our priorities using 6 key indicators, depicted below

	Apr to (& incl.) Sept					RAG rating
Key performance indicator	2013/14	2014/15	2015/16	2016/17	2017/18	YTD
All accidental dwelling fires	6	3	6	2	5	
All accidental dwelling fire casualties (fatal & non-fatal)	0	0	2	0	4	
All deliberate fires	1	1	1	3	1	
Non domestic fires	3	7	2	5	1	
Special Service Casualties - All	6	2	4	8	6	
False Alarm - UFAS	38	39	28	43	42	

RAG rating - KEY		
	RED DIAMOND	10% higher than the previous YTD period, or local target not achieved.
	AMBER TRIANGLE	Up to 9% higher than the previous YTD period, or local target not achieved.
	GREEN CIRCLE	Equal to or improved upon the previous equivalent quarter (or YTD period), or local target achieved.

Progress on local fire & rescue plan priorities

Priority 1 – Local Risk Management and Preparedness

Operational Risk Intelligence Gathering and Review

Operational Risk Intelligence is a key factor in safeguarding both Firefighter and Community safety. The Control of Major Accident Hazards is a series of regulations which control the activities on high risk use or storage of certain chemicals or compounds. All of the SFRS Site Specific Plans (SSPs) for sites on Shetland have been reviewed and are in place. These have now been updated and communicated to relevant personnel with the documents having been uploaded onto the onboard computer system on each fire engine.

These plans are being enhanced by the addition of digital mapping and three dimensional views of the sites to assist attending fire and rescue crews.

Major Incidents

Shetland staff prepares for major incidents through our contribution to the Shetland Emergency Planning Forum Executive and our joint training to deal with specific risks. During this reporting period Shetland Area staff participated in a modular exercise at Sumburgh Airport. RDS crews from Sumburgh and Sandwick formed part of an overall response to an incident at the airport involving multiple agencies.

Fire Appliance Availability

The following bar graphs indicate the operational availability of fire appliances across Shetland during July, August and September 2017. The lower half of each bar indicates the average day-time availability of a fire appliance from 6am to 6pm across the month.

The upper half of each bar indicates the average night-time availability of a fire appliance from 6 pm to 6am across the month. Blue portions of a bar indicate the percentage of time when a fire appliance was operationally available. Red portions of a bar indicate the percentage of time when a fire appliance was operationally unavailable.

To ensure Safe Systems of Work; SFRS policy stipulates that an appliance cannot mobilise with less than 4 suitably competent firefighters.

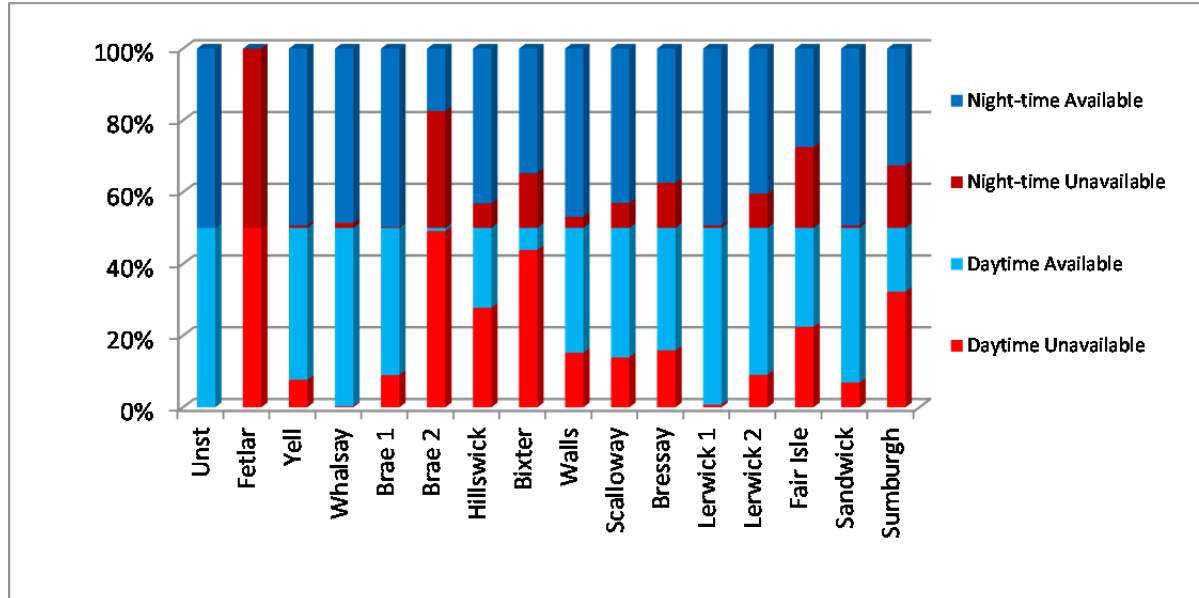
The key factor affecting appliance availability in Shetland is the low staff establishment at a number of stations, therefore as soon as any individual from a unit becomes unavailable, the appliance availability is affected.

As can be seen from the table below, this continues to have the greatest impact on Brae, Sumburgh, Bressay, Bixter, Hillswick, Walls and Scalloway.

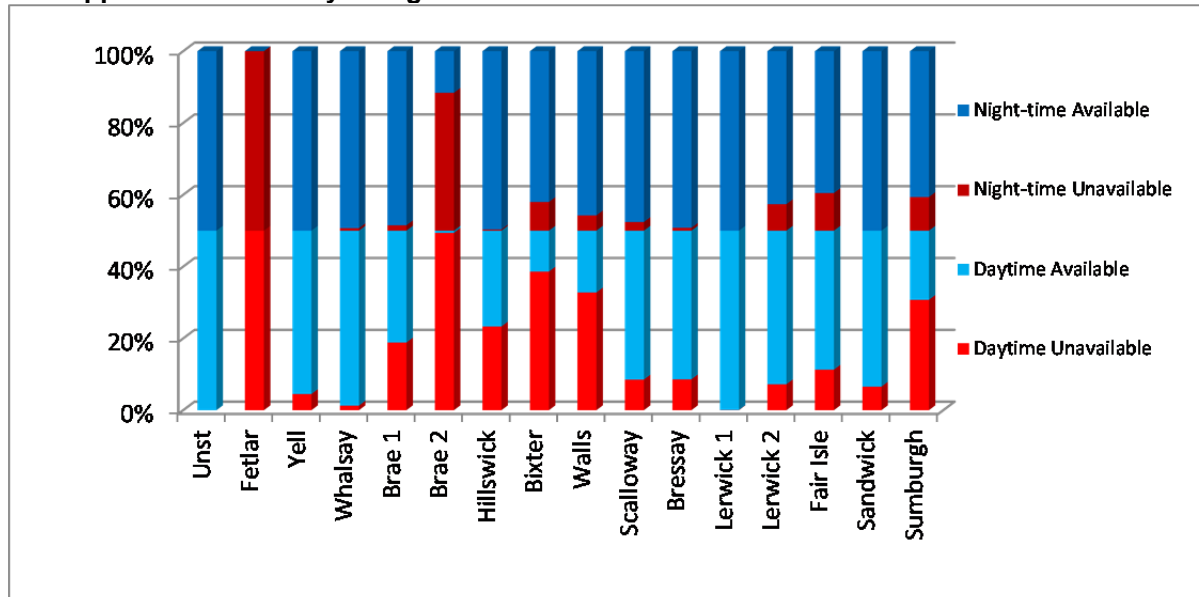
Maintaining 100% fire appliance availability at these stations is currently proving a challenge due to the station establishment numbers and firefighters main employment requirements, which takes personnel out with the station turnout area for periods of time.

Fetlar remains unavailable due to recruitment issues and low staffing levels. Work is still ongoing to try and remedy this problem, but with the limited pool of potential applicants on the island, it is a challenge for SFRS to attract people into the retained fire service. Shetland Area Staff will continue to work to find a solution to the recruitment challenges, by speaking to residents, associated groups and other partner agencies.

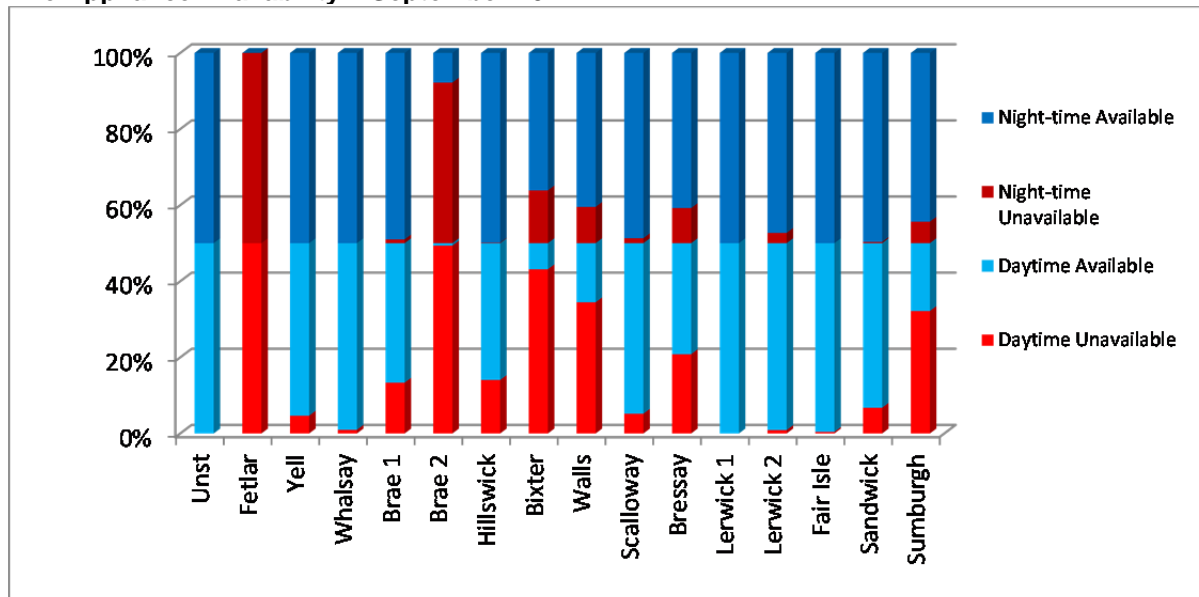
Fire Appliance Availability – July 2017



Fire Appliance Availability – August 2017



Fire Appliance Availability – September 2017



Fire Station Staffing & Recruitment

Historically recruitment within Shetland has been challenging. The Service is confident that improvements to the recruitment process will provide for a more positive experience for potential candidates and that this will have an overall impact on station crewing levels.

As part of this new approach, SFRS has engaged with Local Councillors, Community Councils and local media. We have also actively undertaken additional awareness by utilising banners and visiting households and businesses at local station level in an effort to encourage members of the community to join the service.

It is encouraging to note the number of persons now applying to join the Retained Fire Service within Shetland. Area staff will continue to work with partner agencies, Community Councils and others in promoting the need for locally based retained firefighters.

Fire Station Staffing and Recruitment July to September 2017

Council Ward	Fire Station	Staffing Jun 2017	Staffing Sept 2017	Staffing Change	Full Staffing Compliment	Difference from Compliment	Recruit Applicants
North Isles	Unst	10	10	→	12	-2	0
	Fetlar	1	1	→	12	-11	1
	Yell	8	8	→	12	-4	0
	Whalsay	10	10	→	12	-2	0
Shetland North	Brae	9	9	→	20	-11	0
	Hillswick	8	8	→	12	-4	1
Shetland West	Bixter	6	6	→	12	-6	0
	Walls	9	8	↘	12	-4	0
Shetland Central	Scalloway	10	9	↘	12	-3	0
Lerwick North & Lerwick South	Bressay	5	5	→	12	-7	0
	Lerwick	21	21	→	20	+1	0
Shetland South	Fair Isle	8	7	↘	12	-5	0
	Sandwick	12	12	→	12	0	0
	Sumburgh	9	8	↘	12	-4	0

Priority 2 - Reduction of 'All accidental dwelling fires'

The tables below represent the number of accidental dwelling house fires that occurred in Shetland. Tolerances are set in context of the number of previous incidents by reporting period and, where there has been an increase in overall incidents, the colour coding is identified with the application of the red, amber and green (RAG) system.

Trend lines also identify the number of incidents over the reporting 5 year period, both by month and by reporting quarter.

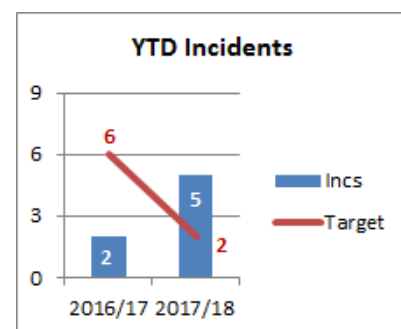
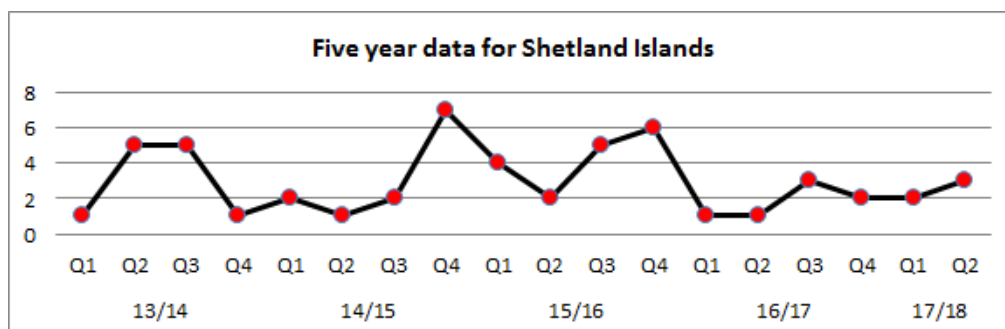
Accidental dwelling fires can have devastating effects on our community. The SFRS is committed to keeping people safe in their homes. We share information with partners to make sure that the right people get the right information they need, particularly those who are vulnerable due to age, isolation or addiction.

Domestic Dwelling Fire Safety Partnership Working

Our local CSA continued to engage with partner organisations to help in driving down the risk from fire to those most vulnerable in the community.

Domestic Dwelling Fires

There has been an increase in accidental dwelling fires for the year to date compared to 2016/17. Although Shetland fire stats are lower than the national average on all aspects, we must and will, ensure that we continue to promote fire safety within the home.

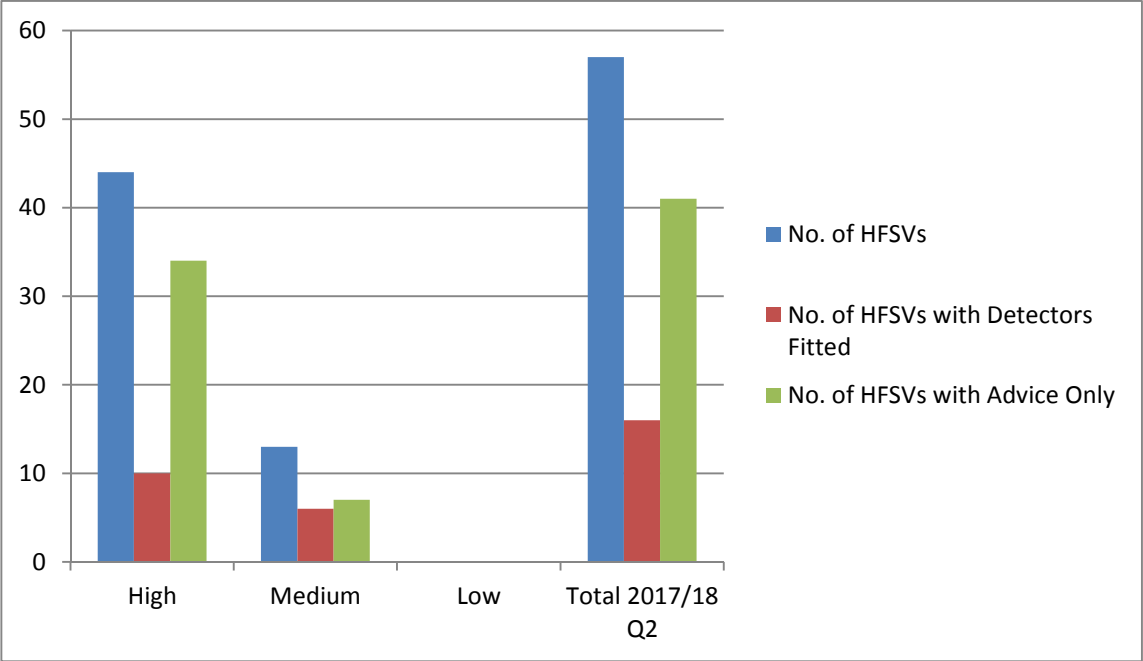


YTD ward ave. for Shetland	2013/14	2014/15	2015/16	2016/17	2017/18	Sparklines
Shetland Islands	6	3	6	2	5	
North Isles (Shetland)	1	0	1	0	2	
Shetland North	1	1	2	1	1	
Shetland West	0	0	1	0	0	
Shetland Central	0	1	0	0	0	
Shetland South	0	0	1	0	2	
Lerwick North	2	1	1	1	0	
Lerwick South	2	0	0	0	0	

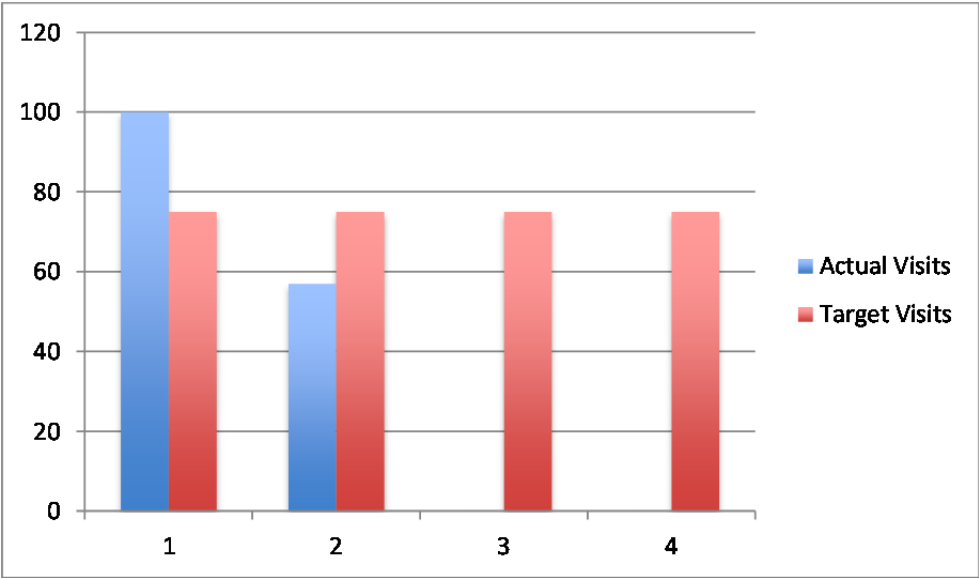
HFSV Total for Shetland Committee - 2017/18 Q2

CSET Risk

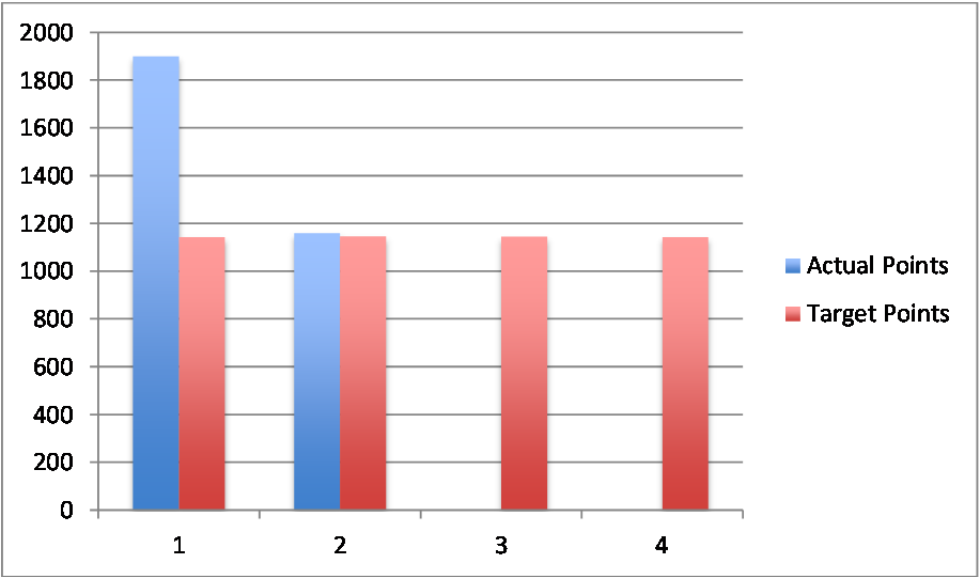
	High	Medium	Low	Total 2017/18 Q2
No. of HFSVs	44	13	0	57
No. of HFSVs with Detectors Fitted	10	6	0	16
No. of HFSVs with Advice Only	34	7	0	41



CSE QUARTERLY VISITS 2017/18



CSE QUARTERLY POINTS 2017/18



Priority 3 - Reduction of 'All accidental dwelling fire casualties (fatal & non-fatal (incl. p/c's))'

Home Fire Safety for Vulnerable Residents

The Shetland Community Safety Advocate and staff from P&P have continued to engage with our partners to target our work towards the most vulnerable in the community.

Home Fire Safety Visits

Q2 statistics show that a total of 57 Home Fire Safety Visits were undertaken during the second quarter of 2017/18 giving a 76% visit rate.

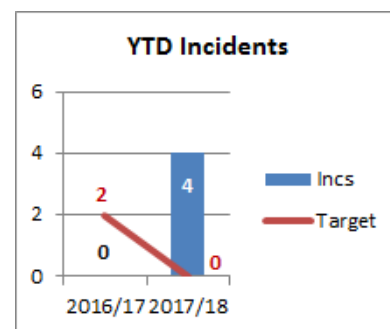
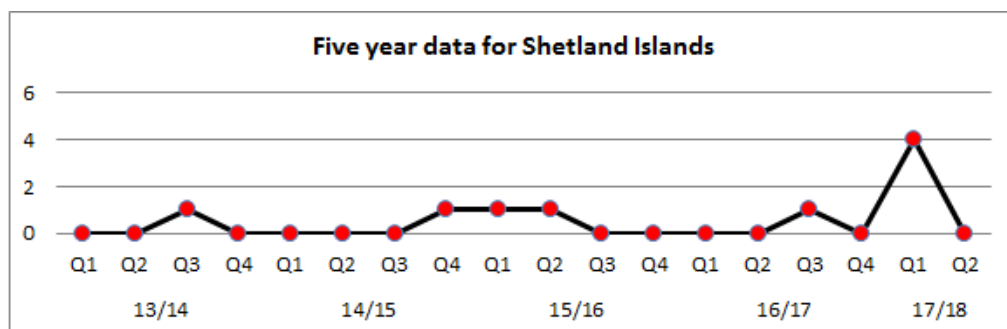
During the visits in Q2 (57 visits) a total of 16 properties were fitted with smoke detectors.

The Service operates a dual approach to HFSV; gross number of visits and points risk rating. This ensures that those at highest risk from fire are targeted ahead of lower risk groups. The points to visit ratio has a target figure of 15, with a figure of 20.6 being achieved within Shetland which is 37% above the required ratio of 15.

Home Fire Safety Education for Schools/Children

Operational personnel continue to accommodate requests from schools and other community groups to visit our fire stations. Our staff use these visits as an opportunity to engage with young people, where a fire safety message can be delivered.

Staff continue to use and become familiar with the Community Safety Engagement Toolkit, (CSET), which in addition to being a recording mechanism for these activities, tracks activity across the SFRS. Over time, this will allow for the sharing of community safety engagement good practice across Scotland.



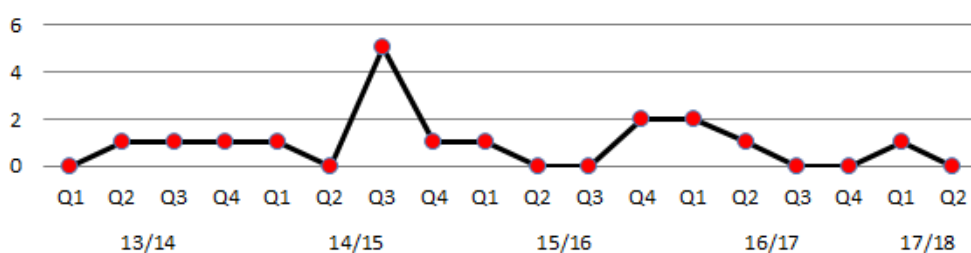
YTD ward ave. for Shetland	2013/14	2014/15	2015/16	2016/17	2017/18	Sparklines
Shetland Islands	0	0	2	0	4	
North Isles (Shetland)	0	0	0	0	1	
Shetland North	0	0	1	0	3	
Shetland West	0	0	0	0	0	
Shetland Central	0	0	0	0	0	
Shetland South	0	0	1	0	0	
Lerwick North	0	0	0	0	0	
Lerwick South	0	0	0	0	0	

Priority 4 - Reduction of 'All deliberate fires'

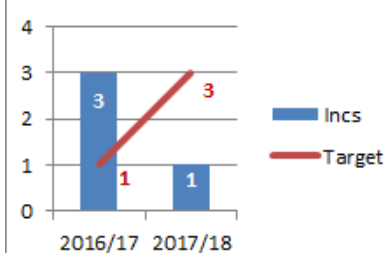
Fortunately, deliberate or wilful fires are rare within Shetland but do occasionally occur. There were no wilful fires during this quarter.

If necessary, Area staff will continue to request the attendance of the Fire Investigation Unit from Aberdeen, if it is suspected that a fire is of a deliberate nature. This team work closely with Police Scotland to identify the cause of a fire and to identify any persons that may be involved in wilful fire-raising.

Five year data for Shetland Islands



YTD Incidents



YTD ward ave. for Shetland	2013/14	2014/15	2015/16	2016/17	2017/18	Sparklines
Shetland Islands	1	1	1	3	1	
North Isles (Shetland)	0	0	0	0	0	
Shetland North	1	1	0	0	0	
Shetland West	0	0	1	0	0	
Shetland Central	0	0	0	0	0	
Shetland South	0	0	0	0	0	
Lerwick North	0	0	0	3	1	
Lerwick South	0	0	0	0	0	

Priority 5 - Reduction of 'Non domestic fires'

Legislative Fire Safety Enforcement Audits

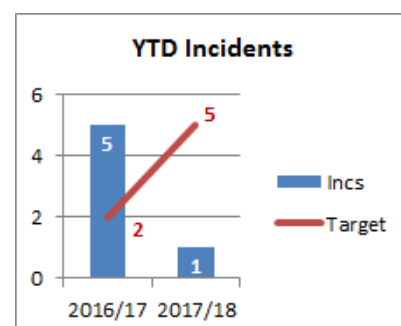
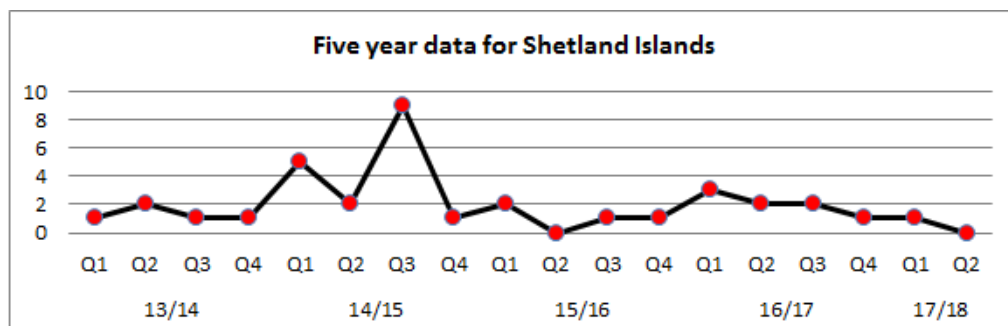
The Service will continue to undertake Legislative fire safety audits which are managed by a Fire Safety Enforcement Team based in Inverness. Progress against the annual fire safety enforcement targets, set out in the prevention and protection plan, are indicated below. It is pleasing to note that the deployment of the Enforcement Team in this quarter has resulted in the achievement of the targets as set out in our Prevention and Protection Plan.

The team of FSEOs will continue to deliver the SFRS Fire Safety Enforcement Strategy through the auditing of all mandatory premises within the Shetland Islands area.

Audits within Shetland are conducted during Quarters 1 and 3.

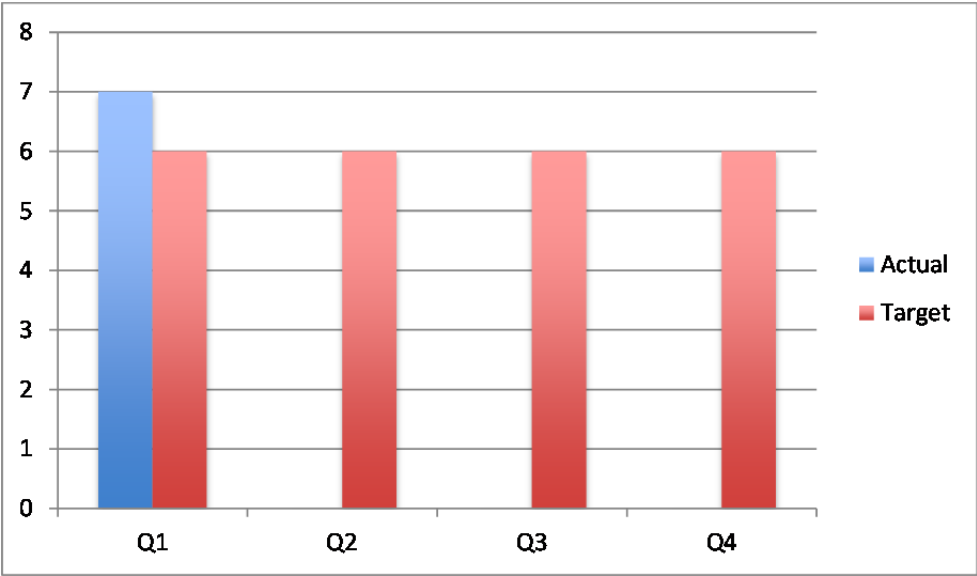
Post Fire Audits

It is now SFRS policy that a post fire audit will be implemented following a fire in any building which is deemed to be a “relevant premises” under the Fire (Scotland) Act 2005. This examines whether the “duty holders” of the premises were adequately complying with their fire safety responsibilities.

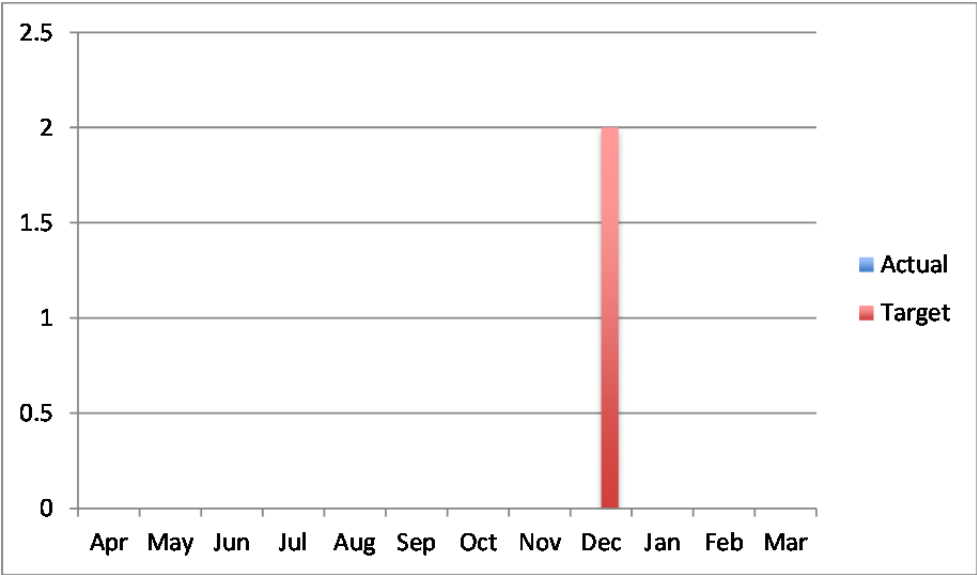


YTD ward ave. for Shetland	2013/14	2014/15	2015/16	2016/17	16/17	Sparklines
Shetland Islands	3	7	2	5	1	
North Isles (Shetland)	1	0	0	1	0	
Shetland North	1	2	1	0	0	
Shetland West	0	0	0	0	0	
Shetland Central	0	1	0	1	0	
Shetland South	0	2	0	0	0	
Lerwick North	0	2	1	3	0	
Lerwick South	1	0	0	0	1	

FSE Audits – Quarterly Report



Post Fire Audits



Priority 6 - Reduction of 'Special Service Casualties - All'

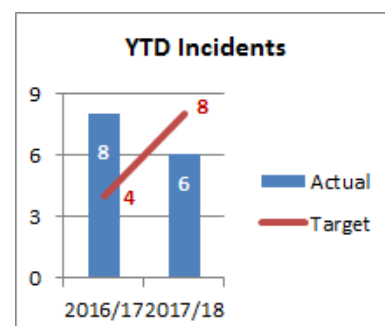
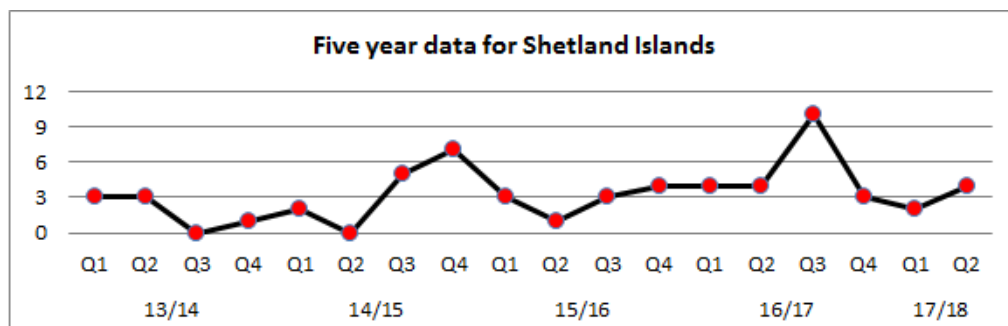
Special Service incidents involves an operational response to a range of emergency activities including life critical road traffic collisions, flooding events, industrial accidents and in support of other emergency service colleagues at larger multi-agency non-fire related events.

The most common type of special service is as a result of a road traffic collision involving, in most cases, a response from all three emergency services. The Service is working in partnership with other emergency response colleagues and partner agencies.

Road safety activities in the area include Driving Ambition, which has a focused message of road safety, targeting key groups in the reduction of road related incidents as identified in Scotland's Road Safety Framework to 2020. During Q2 SFRS personnel, in conjunction with other agencies, delivered the Driving Ambition programme to Brae and Anderson High School pupils.

Special service calls remain at a low level in comparison to national figures but we will not be complacent in our approach to enhancing the safety of our communities. Work will continue with our partners, especially in relation to road safety to reduce the risk to persons.

<http://www.scotland.gov.uk/Resource/Doc/286643/0087268.pdf>



YTD ward ave. for Shetland	2013/14	2014/15	2015/16	2016/17	2017/18	Sparklines
Shetland Islands	6	2	4	8	6	
North Isles (Shetland)	0	0	0	0	0	
Shetland North	4	1	2	0	4	
Shetland West	0	0	0	0	1	
Shetland Central	0	0	0	2	0	
Shetland South	2	1	1	2	1	
Lerwick North	0	0	0	2	0	
Lerwick South	0	0	1	2	0	

Priority 7 - Reduction of 'False Alarm - UFAS'

The Service responds to a number of false alarms over the second quarter of the reporting year, a number of which are Unwanted Fire Alarm Signals (UFAS). SFRS responded to 21 UFAS incidents over Q2. SFRS responded to a total of 51 incidents in Q2 throughout Shetland, with 33 of these being false alarms (including domestic properties). This gives a total UFAS percentage of 41% with the Shetland year average currently standing at 31%.

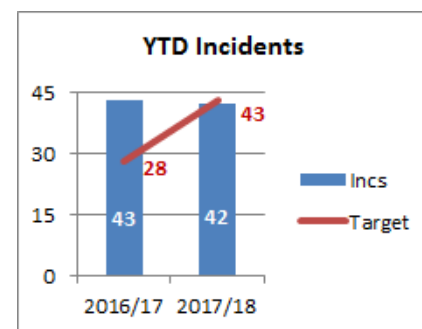
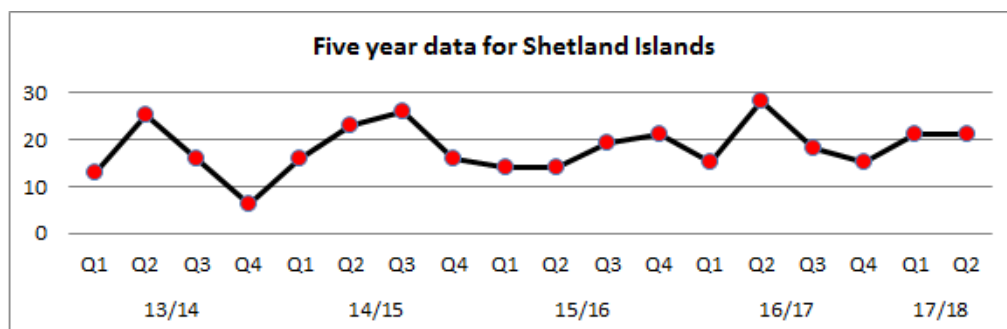
SFRS personnel continue to engage with premises owners/occupiers to identify the causes associated with UFAS calls and offer advice in finding solutions.

In addressing the number of UFAS incidents across Scotland, the Scottish Fire and Rescue Service (SFRS) introduced a national UFAS Reduction Procedure on 1 December 2014. The key aim of this procedure is the implementation of a standard management model to reduce the number of unwanted alarm signals across all areas of Scotland. This will be achieved in a number of ways:

- Working more closely with responsible 'duty holders' post UFAS events to review, and where appropriate improve management arrangements within premises
- Effectively managing an appropriate response to repeat UFAS calls from known premises

SFRS recognises that high levels of Unwanted Fire Alarm Signals can have a significant impact on our staff and their full time employers. The Prevention and Protection team based in Inverness have examined this issue and we will undertake bespoke plans to improve the overall picture in Shetland.

Lerwick still continues to have a high level of UFAS calls to commercial premises. Operational RDS staff continue to issue advice to the occupier at the time of attending the premises with additional steps having been taken to visit the premises at a later date by Prevention and Protection staff. This will hopefully allow the occupier of the most frequently attended properties to fully understand the implications of a continued response from SFRS. The SFRS UFAS policy will be implemented on offending properties, if deemed appropriate.



YTD ward ave. for Shetland	2013/14	2014/15	2015/16	2016/17	2017/18	Sparklines
Shetland Islands	38	39	28	43	42	
North Isles (Shetland)	0	1	2	0	0	
Shetland North	0	0	0	2	0	
Shetland West	0	1	0	0	0	
Shetland Central	3	3	1	1	3	
Shetland South	6	8	4	11	3	
Lerwick North	15	21	12	19	26	
Lerwick South	14	5	9	10	10	

4. Glossary

Primary Fire

Primary fires include all fires in non-derelict buildings and outdoor structures or any fires involving casualties or rescues or any fires attended by five or more appliances.

Secondary Fires

Secondary fires are the majority of outdoor fires including grassland and refuse fires unless they involve casualties or rescues, property loss or if five or more appliances attend. They include fires in derelict buildings but not chimney fires.

Accidental Dwelling Fires

Building occupied by households, excluding hotels, hostels and residential institutions. In 2000, the definition of a dwelling was widened to include any non-permanent structure used solely as a dwelling, such as caravans, houseboats etc. Caravans, boats etc. not used as a permanent dwelling are shown according to the type of property. Accidental includes fires where the cause was not known or unspecified.

Fire Fatality

A person whose death is attributed to a fire is counted as a fatality even if the death occurred weeks or months later.

Fire Casualty

Non-fatal casualties, injured as a direct result of a fire attended by the service. Includes those who received first aid at the scene and those who were recommended to go for a precautionary check. Does not include injuries to fire service personnel.

Deliberate Fire

Fires where deliberate ignition is suspected.

Special Services

Special Services are non-fire incidents requiring the attendance of an appliance or officer. The Fire (Scotland) Act 2005 placed a statutory duty on FRS to attend fires and road traffic accidents. It also included an additional function order that covers non-fire incidents such as rescues from collapsed buildings or serious flooding.

CPP

Community Planning Partnership.

SOA

Single Outcome Agreement.

RTC

Road Traffic Collision

UFAS

Unwanted Fire Alarm Signals

RDS

Retained Duty System – Staff who are employed on a retained (part time basis) and provide an emergency response within a local area

CRU

Community Response Unit – staff who provide a specific role within a local area e.g. attending RTC or Wildfire type incidents

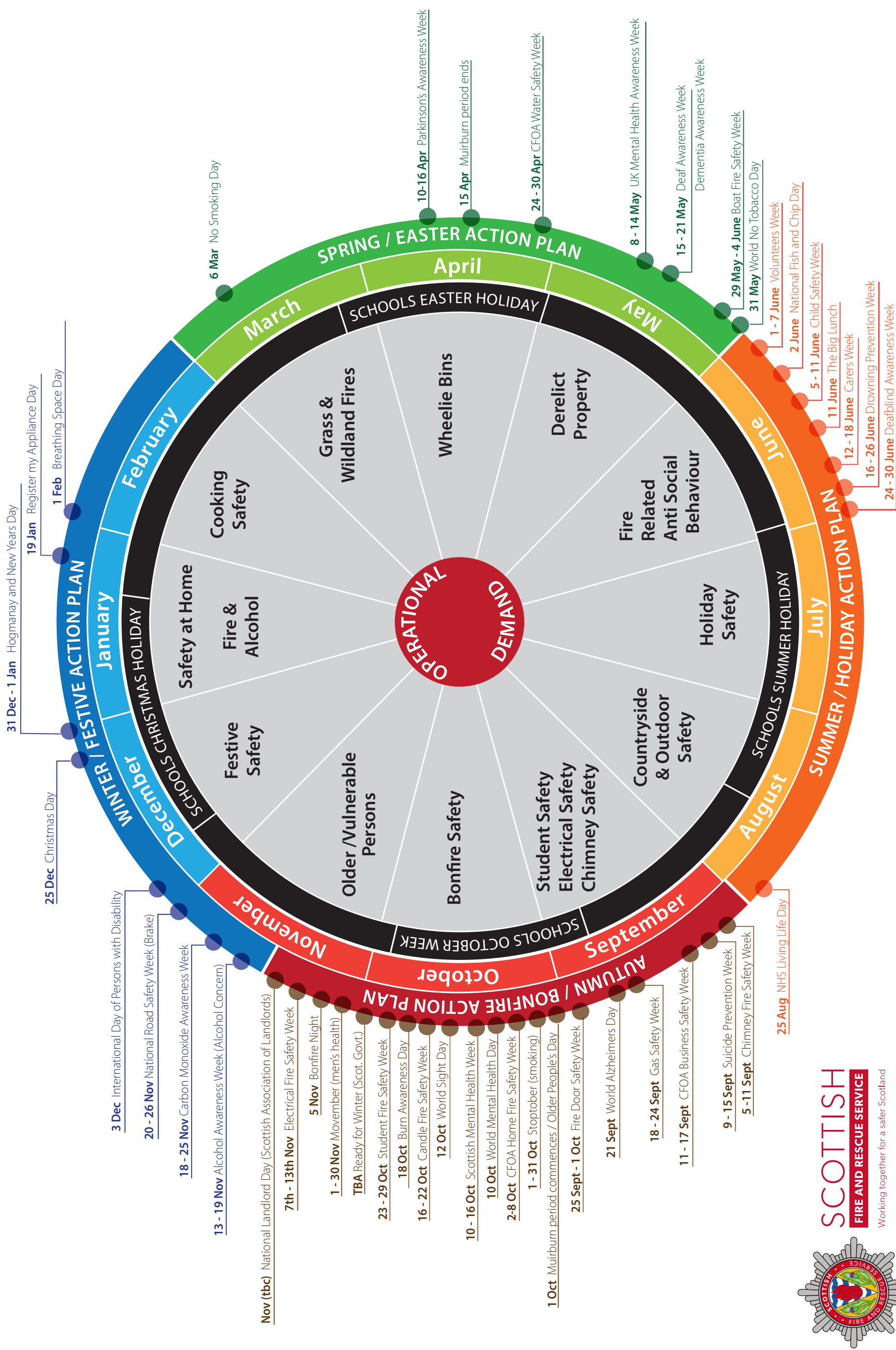
CFS

Community Fire Safety - CRU staff providing a local prevention and protection role and deliver fire safety advice and information

PDIR

Post Domestic Incident Response – A targeted delivery of key home fire safety advice and information to the local community and residents following a dwelling house fire

Seasonal Community Safety Calendar 2017



Community Safety & Resilience Board

Report Title:	Resilience Activity
Presented By:	Ingrid Gall, Resilience Advisor

1.0	Overview/Introduction
1.1	A brief of the activity currently being undertaken by Emergency Planning & Resilience which involves all departments and services across the Council together with other organisations in Shetland and on the Mainland.
2.0	Resilience Activities
	Lists of Resilience Activities undertaken and planned for 2017 and 2018 are attached at Appendix A and B respectively. Miss Gall will speak to elements of these activities.
3.0	Conclusion
3.1	The attached appendices provide a brief of the activity planned and undertaken by Emergency Planning & Resilience but which involves all departments and services across the Council together with other organisations in Shetland and on the Mainland.

For further information please contact:

Name:	Ingrid Gall, Resilience Advisor, Emergency Planning & Resilience
Contact Information:	Ingrid.gall@sic.shetland.gov.uk
Date:	26 th January 2018
Attachments:	Appendix A - Resilience Activities 2017 V2.12 26-01-18 Appendix B – Resilience Activities 2018 V1.2 26-01-18



SHETLAND EMERGENCY PLANNING FORUM

Chair: Ingrid Gall, 20 Commercial Road, Lerwick, Shetland, ZE1 0LX
 Telephone: 01595 744740 Fax: 01595 690846 E-mail: ingrid.gall@shetland.gov.uk

**Item
6.1**

Resilience Activities 2017

Detailed below is a list of resilience activities which are scheduled for 2017. The list is compiled as events are made known and shared with Resilience partners for attendance and participation. The list covers, in date order, Training, Exercises, Workshops, Conferences, Incidents, Visits and any other Resilience Events advised. Please note that some of these events are outside Shetland. Please contact Ingrid in the first instance with regard to attendance at any of these events.

23-02-17 0915 - 1630 RBS Conference Centre, Gogarburn, Edinburgh	Events Outside Shetland – Conference – Resilient Scotland 2017 – The Scottish Continuity Resilient Scotland Conference is widely regarded as Scotland's leading conference that brings Business Continuity and Resilience practitioners together providing an opportunity to gain valuable education, training and best practice to assist, organise, prepare, respond and recover from emergencies and disasters. This continues the theme of 'Our resilience is your resilience' which will run to 2018.	This event is free to Scottish Continuity members. £100 to non Members	No attendance
09-03-17 0930 – 1600 Bowlers Bar, Clickimin Leisure Centre, Lerwick	Training - Crisis Management 1 – Founding Principles - Delivered by Scottish Resilience & Development Service - Introduce tactical and strategic managers to the non-technical skills involved in crisis management. This will be delivered by Scottish Resilience and Development Service. This course aims to provide multi-agency Resilience Partners at strategic or tactical level with an overview of the key non-technical skills required for effective crisis management. It provides an opportunity to share learning and be part of a multi-agency group which develops individual personal skills and the ability to function effectively as part of a Local or Regional Resilience Partnership.	<ul style="list-style-type: none"> • Identify the components of Integrated Emergency Management (IEM) • Recognise the key elements required for effective crisis management • Demonstrate the ability to contribute to a Resilience Partnership multi-agency team (in a crisis situation) • Explain how response arrangements are organised in Scotland 	<p>9 Attendees - I need to reflect on learning. Could have been a little more in depth in areas? Otherwise very good!</p> <p>Presenters commented on the fact that other agencies were not here. I think that was a significant issue in terms of value that could be gained from this event.</p> <p>Very informative. Interaction good. Very good refresher which gives you more confidence in your knowledge.</p> <p>A useful seminar to refresh or</p>

			introduce basic knowledge and understanding. Well presented. Laid a good foundation for next two courses.
10-03-17 0930 – 1530 Aberdeen Exhibition and Conference Centre	Events Outside Shetland - Educating Resilience - Aberdeenshire Council in conjunction with colleagues in Education Scotland, Aberdeen City and Moray Councils are organising a community resilience networking event for resilience professionals and teachers in Aberdeenshire, Aberdeen City and Moray. This is an excellent opportunity for resilience professionals to meet the teachers and discuss how resilience can be integrated into Curriculum for Excellence - bringing the learning to life in the classroom.	<ul style="list-style-type: none"> Integrating Resilience into the Curriculum for Excellence 	Shared with Children & Families Department – no attendance
14-03-17 Scottish Police College, Tulliallan	Events Outside Shetland – Scottish Disaster Victim Identification (DVI) Conference – the conference will include talks on the Clutha Helicopter Crash from all perspectives, George square and aircraft safety amongst other topics.		No attendance
14 th -16th of March 2017 Shell Woodbank, North Deeside Road, Cults, Aberdeen AB15 9PN	Events Outside Shetland - Exercise Balmoral - Shell SOSREP Exercise is scheduled to run on with the SOSREP assessment taking place on the 15th March. Shell will be utilising the ICS model which will include around 100 responders from the Global Response Shell Network (GRSN). The scenario has been approved by BEIS (formally DECC) and will involve a Tier 3 spill from the Shell operated Brent Charlie platform, which is located in 115 miles east of Lerwick in the Northern North Sea. Scenario will show oil beaching on Shetland.	<ul style="list-style-type: none"> Involvement in a major oil spill exercise Opportunity to meet and work through an exercise scenario with Shell 	Four attended from Shetland Islands Council. Shell would deploy their services into Shetland and during the exercise were unaware of the resources held in Shetland. It was useful to take away from the event that all interested parties affected by a spillage would work together rather than in isolation. It was a well run exercise and the explanation from the SOSREP was very useful. Various cells were working and interacting together with lessons learnt. The position of a Liaison Officer, if this situation was to arise here, will ensure the

			communication between parties.
27th – 30th March 2017 Aberdeen	<p>Events Outside Shetland - LA01 – National Training Course on Oil Pollution, Contingency Planning and Response. A 4-day training course intended for local authority management staff involved in contingency planning and oil spill response. The courses are organised and run by the MCA and individuals from local authorities should apply directly to the MCA for places on one of the regional courses.</p> <p>The emphasis throughout the course is on shoreline and inshore pollution, including planning and response techniques. Topics covered are:</p> <ul style="list-style-type: none"> • The National Contingency Plan (NCP) • Operational Response Cells and the Environment Group • Fate and Behaviour of Oil • Environmental Impact of Oil • At-Sea Oil Spill Response • Nearshore Oil Spill Response • Shoreline Clean-up Techniques • Health and Safety in Oil Spill Response • Waste Management in Oil Spill Response • Cost Recovery <p>The course is accredited on behalf of the MCA by the Nautical Institute. Upon completion of the course delegates will receive a course attendance certificate.</p>	<ul style="list-style-type: none"> • A clear understanding of the NCP and how it interfaces with local plans, and an appreciation of how private and government agencies are involved in responding to oil spills in the UK; • The ability to assess the early stages of a spill, carry out the appropriate notification procedures and activate an organisational response; • The skills to assign priorities and identify resources required to carry out a response; • An awareness of the ecological factors to be considered when selecting clean-up techniques; • The ability to manage an on-going response, monitor the progress of clean-up efforts and make an informed decision on when to stand down the response; • An appreciation of financial aspects of oil spill clean up and subsequent compensation issues. 	Shared with SIC Infrastructure Department – no attendance

<p>05-04-17, 0930 – 1600, Room 10, Islesburgh Community Centre</p>	<p>Training - Crisis Management 2 – Decision Making Under Pressure - Delivered by Scottish Resilience & Development Service - Develop situation awareness and decision making skills of resilience partners in a crisis situation. This will be delivered by Scottish Resilience and Development Service.</p> <p>This is one of a series of courses which provides on-going professional and personal development for resilience partners and anyone who may deputise for them. The course audiences can be strategic, tactical, or a mixture of both. Either way, issues at both levels will be addressed in this course.</p> <p>The content presents an opportunity to develop and explore in more detail, the key skills outlined in the <i>Crisis Management: Founding Principles</i> course.</p> <p>The aim of Decision Making Under Pressure is to develop situation awareness and decision making skills of resilience partners in a crisis situation. The programme includes: <i>Decision Making Models • Generating Options • Ethical and Moral Decisions • Combating Stress • Validating Decision Making</i></p> <p>The pre-requisite is to attend the <i>Crisis Management: Founding Principles</i></p>	<ul style="list-style-type: none"> • Apply the process of situation awareness to information management in order to make effective decisions • Recognise the impact stress, ethics and morals can have on your ability to make decisions • Demonstrate the ability to contribute to a resilience partnership multi-agency team and follow a decision making model 	<p>15 Attendees</p> <p>All good. Interaction with group - interesting and worked well. Scenarios interesting and challenging to work out outcomes and processes.</p> <p>Enjoyed the seminar and working with the scenarios.</p> <p>Very relevant, good mix of participants, good discussion & facilitation.</p> <p>Value of the session was hampered by key agencies not being present and able to contribute to the discussions in particular Police and Fire.</p>
<p>06-04-17, 0930 – 1600, Room 10, Islesburgh Community Centre</p>	<p>Training - Crisis Management 3 – Leading & Communicating - Delivered by Scottish Resilience & Development Service - Develop the leadership, team working and public communication skills of tactical and strategic managers in a crisis response. This will be delivered by Scottish Resilience and Development Service.</p> <p>This is one of a series of courses which provides on-going professional and personal development for resilience partners and anyone who may deputise for them. The course audiences can be strategic, tactical, or a mixture of both. Either way, issues at both levels will be addressed in this course.</p> <p>The content presents an opportunity to develop and explore in more detail, the key skills outlined in the <i>Crisis Management:</i></p>	<p>The pre-requisite is to attend the <i>Crisis Management: Founding Principles</i></p> <ul style="list-style-type: none"> • Describe key crisis leadership skills within the resilience arena and when collaborating in a Resilience Partnership multi-agency team • Recognise causes of conflict and identify how to minimise them • Characterise and resolve barriers to effective communication and reporting in a crisis 	<p>14 Attendees</p> <p>Excellent course. Increased my awareness and confidence in topic area. Great, thank you!</p> <p>Very relevant.</p> <p>I wondered why some people had their titles on their place cards but most did not. It introduced an element of rank and status which was unhelpful and unnecessary. I found the day slow paced and</p>

	<p><i>Founding Principles</i> course.</p> <p>The aim of Leading and Communicating is to develop the leadership and communication skills of resilience partners in a crisis situation. The programme includes: <i>Seeing the bigger picture</i> • <i>Leadership Guiding Principles</i> • <i>Conflict and Welfare</i> • <i>Communicating in a Crisis</i> • <i>Reporting</i></p>		therefore.....
25-04-17 RAF Lossiemouth	<p>Events Outside Shetland – Aircraft Post Crash Management Seminar - To enable ‘Silver’ Incident Managers to contribute to their own organisation’s response to a Military Aircraft Crash and provide support to other organisations by improving the understanding of the roles and responsibilities of all responder agencies.</p> <p>Programme - This seminar is intended to give an insight into the challenges involved in managing an emergency. The programme is a mix of presentations from the key responder agencies.</p> <p>Nominations - A number of places have been made available for appropriate personnel from Category One/Two and Voluntary agencies in the North RRP area.</p> <p>Nominations including role, organisation & contact details should be sent to:</p> <p>Flt Lt Heidi Billany Email: LOS-OpsA5OC@mod.uk Tel: 01343 816912</p> <p>By 10th April 2017. <i>To avoid confusion with military terminology the incident command terms of bronze, silver and gold will be used on the day</i></p>	<p>Learning Outcomes - On completion of the training day individuals will have an understanding of:</p> <ul style="list-style-type: none"> • Time scale of how the response to an off base military incident evolves • Which organisation holds “lead authority” and how it changes as an incident unfolds • An overview of the priorities of responding organisations • Hazards associated with a military aircraft accident and clear up procedures • What the RAF’s Emergency Control Centres (ECC) can provide internally & to external agencies • Where the MOD Aircraft Post Crash Management (APCM) Lead Unit and Incident Manager fit into the response effort at an off military base incident 	Shared with Sumburgh, Scatsta and Tingwall Airports – no attendance

27-04-17 0900 – 1600 ERC, 20 Commercial Road, Lerwick	Training - Project Griffin / Security Awareness The aims of any of the Project Griffin or Security Awareness products are to equip delegates with the knowledge and skills to assist them when responding to security related incidents on their site(s).	<ul style="list-style-type: none"> • Introduction to Counter Terrorism • Current Threat; Insider Threat • Cyber Risk /Threat Awareness/Social Networking • Hostile Reconnaissance • Improvised Explosive Devices / VBIED's • Bomb Threat / Mail Handling • Stay Safe – Firearms and Edged Weapon Awareness • Run, Hide, Tell – Strategy and Procedure Planning 	20 Attendees - This was a training session that imparted a lot of information with regard to terrorism and protective security. It helped inform attendees on help and guidance available to protect people, physical assets and processes. There are a range of subjects to tailor sessions to suit the needs of the audience. Project Griffin will be run again in the autumn of 2017.
AM 25-05-17 0930 - 1230 Downstairs Hall, Islesburgh Community Centre	Workshop - Business Continuity - Delivered by Plan B Consulting - arranged by Shetland Islands Council but open to SEPF members. Invitation to plan holders to review plans. Also hold workshop on topical business continuity issue of cyber threat.	<ul style="list-style-type: none"> • Ensure BC plans are up to date with latest threats. • Raise awareness of plans and who may be responding to an incident • Prepare staff for a Council wide BC exercise 	16 Attendees – This was a timely event showing how to help mitigate the Council's overall corporate risk. Interesting and relevant to see the level of threat and to give consideration to vulnerabilities. Excellent delivery, engaging and thought provoking.
PM 25-05-17 1400 - 1700 Training Room, ICT Offices, Garthspool	Training - Liaison Officer - Delivered by Plan B Consulting - A Liaison Officer is someone who is exchanged between two or more groups or organisations, who will be making decisions on behalf of their manager and must be prepared to amplify the organisation's intent and points of detail through the timely exchange of information. This is about enhancing shared situation awareness.	<ul style="list-style-type: none"> • Summarise the key roles and responsibilities of those responding to an incident • Explain how to maintain effective communication between your organisation and other agencies • Demonstrate the gathering, collating and passing on of information and recognise the importance of providing this information in a timely manner • Rehearse the Incident Liaison Officer's response to an incident in exercises 	8 Attendees – A very useful and worthwhile session with good interaction and learning for attendees. Gained knowledge of terminology which has changed. There were several requests to exercise the role of Liaison Officer so this will be built into future exercises.

<p>AM 26-05-17 0930 - 1200 Room 11, Islesburgh Community Centre</p>	<p>Training – Incident Logging - Being able to maintain a log is a vital role supporting those responsible for managing the response to crises and emergencies. Any organisation involved in the strategic response to a major incident must ensure that suitable records are maintained detailing any key decisions made and actions taken.</p> <p>The non-statutory guidance accompany the Civil Contingencies Act 2004 explains that “A comprehensive record should be kept of all events, decisions, reasoning behind key decisions and actions taken. Each organisation should maintain its own records ...”</p> <p>Who should attend?</p> <p>This course is aimed at anyone from an organisation who may be expected to respond to an incident and therefore will be required to maintain a log of events, decisions and actions. It is ideally suited to anyone who can minute meetings. They do not need any previous knowledge of the Civil Contingency Act or responding to a major incident.</p>	<p>To equip potential loggists with the skills and knowledge required to fulfil the role of loggist.</p> <ul style="list-style-type: none"> • Recognise the importance of the role of the loggist • Develop an effective recording process • Demonstrate effective logging skills 	<p>10 Attendees – A very useful session which practical interaction and examples.</p> <p>Again, there were several requests to exercise this role and this will be built into future exercises.</p>
<p>07-06-17 1000 – 1530 SFRS HQ, Cambuslang</p>	<p>CPD Event – Emergency Planning Society Scottish Branch - Professor Roger Kemp – Living without Electricity: One communities experience of coping with a loss of power</p> <p>Paul Laidlaw – Scottish Flood Forum: ‘A good practice framework to support engagement with flood risk communities’</p> <p>Wendy Murray – East Haven Community Resilience – ‘An empowered community is a resilient community’</p> <p>Willie Johnstone – SGN – A Cessation of Scone Gas Supply – a response case study</p> <p>Detective Inspector Eamonn Keane Police Scotland Cyber Crime Unit – Cyber Risk and Resilient Communities</p> <p>What’s new in our world? An update on on-going initiatives including: where is Persons At Risk Database (PARD) going, what is CIRINT and what’s next for further qualifications?</p>		<p>No attendance</p>

13-06-17 0900 – 1300 By telephone only	Exercise Nemesis – Premier Oil – Test the communications response and practise liaison with the Council on a major incident on the Solan Installation. The Council involvement will be with the Resilience Advisor only and will concentrate on notification of the incident and initial actions.		Very short exercise which involved informing of an incident and requesting what initial actions the Council would take.
19-06-17 0930 – 1600 Police College, Tulliallan	National “Move to Critical” Workshop – Understand the implications of any threat level change and prepare for what steps may have to take should it increase to Critical.	<ul style="list-style-type: none"> • Raise awareness and promote discussion at a national level • Prepare for national Exercise “Border Reiver” – which aims to (1) provide all partners with a consistent level of knowledge as to exactly what a Move to Critical “actually” means, (2) recommend a consistent approach as to how partners can plan for such an eventuality within their own organisations, and (3) agree some common principles across Scotland, including from a multi-agency perspective, that everyone needs to adopt. 	There was attendance at this, however the format was changed given the terrorist incidents which had taken place in May and June which turned it into a debrief. Limited learning resulted rather than a discussion of what was required at strategic level.
26-06-17 1400 – 1700 Multi-Use, Clickimin Leisure Centre	Workshop – Actions on Threat Level Critical – This is an invitation only event to be delivered by Police Scotland – it will look at the actions which can and should be taken if the threat level is increased to critical. Carry out a review of a Graduated Security Plan (GraSP) looking at possible scenarios. Then look at what preparation needs be done in response to the possible consequences of the scenarios.	<ul style="list-style-type: none"> • Identify the consequences of a shutdown of key services, i.e., school closures • Further develop the Graduated Security Plan (GraSP) for the Council and NHS Shetland 	44 Attendees from SIC, NHS and other local organisations. Very worthwhile event giving overview of current threat level, videos and protective security. Workshop attendees went through draft Graduated Security Plans with groups set up to follow through.

13-07-17 0930 – 1600 Beach Ballroom, Aberdeen	<p>Exercise Opus Resilience - Opus Resilience is a multi-agency tabletop exercise, delivered by the UK National Disaster Victim Identification Unit (UKDVI) on behalf of the National Police Chiefs Council - Civil Contingencies business area. The exercise is being delivered in association with the North Regional Resilience Partnership Mass Fatalities Sub Group.</p> <p>To bring together local multi agency partners, to consider a major incident scenario involving mass fatalities and to discuss local civil contingency capabilities.</p> <p>Who should attend? Those partners from Police, Fire, Ambulance, Health, Local Authority, Emergency Planning, Mortuary Managers, Procurator Fiscal, Military, and the Voluntary Sector who may be involved in a mass casualty/mass fatality incident at a Tactical or Strategic Level.</p>	<p>To inform key partners regarding the role and capabilities of various agencies present</p> <p>To identify any gaps in local capabilities and discuss options to remedy these gaps, particularly in respect of the North RRP Mass Fatalities Framework.</p> <p>To understand the key issues around the Strategic/Tactical and Operational response to such incidents.</p>	<p>1 in attendance</p> <ul style="list-style-type: none"> • Overarching theme - was of capacity. Representative to take this to SG. • Activation and notification arrangements to be reviewed to ensure responding organisations are informed as soon as possible. • Consider options for demonstrating co-ordinated response and increasing visibility of all responders, especially Local Authorities at major incidents to provide public reassurance and enhance organisational image and reputation.
15-07-17 0900 – 1500 Leuchars Station	<p>Military tabletop in planning to manage a Major Incident – an invitation has been received from the Army 205 (Scottish) Field Hospital for NHS Resilience Leads to observe at a training event being held in an aircraft hanger – warm kit is advised.</p>	<p>The instructor will be going over how to set up a tabletop.</p>	<p>No attendance planned</p>
15-08-17 1215 – 1400 Fetlar Room, Montfield	<p>Persons at Risk Database (PARD) Webinar - this is project which seeks to protect and prioritise the most vulnerable during times of emergency. The system provides responders real time access to the location of vulnerable people during periods of service disruption or when they are at risk of harm.</p> <p>The concept was developed and implemented in Dumfries and Galloway where the in-house technical team was able to take information about vulnerable people from Council and NHS databases and draw data into a GSI mapping application, which responders, including police, had access to during emergencies. The visual detail provided helped identify the location of</p>	<p>The workshop seek views from the range of colleagues who would potentially contribute to the development of a PARD.</p>	<p>3 in attendance</p> <p>This was facilitated by the Scottish Government and having gone through the presentation with the attendees, and discussed it further, it was agreed that a PARD is not required given the quality of information availability currently in place.</p>

	<p>vulnerable people and their vulnerabilities. A similar project has been developed and implemented in the Falkirk Council area. Webinar to strategic partners to raise awareness, to see how it is working elsewhere and to talk to those using it and the benefits or otherwise of utilising such a system. Each LA ultimately decides for themselves whether or not they are going to use it but this webinar will better inform the decision making process.</p>		
<p>11-09-17 0900 – 1600 ERC, 20 Commercial Road, Lerwick</p>	<p>Training - Project Griffin / Security Awareness The aims of any of the Project Griffin or Security Awareness products are to equip delegates with the knowledge and skills to assist them when responding to security related incidents on their site(s).</p> <p>This event was run in April and is being run again following the Move to Critical Workshop held in June.</p>	<ul style="list-style-type: none"> • Introduction to Counter Terrorism • Current Threat; Insider Threat • Cyber Risk /Threat Awareness/Social Networking • Hostile Reconnaissance • Improvised Explosive Devices / VBIED's • Bomb Threat / Mail Handling • Stay Safe – Firearms and Edged Weapon Awareness • Run, Hide, Tell – Strategy and Procedure Planning 	<p>4 in attendance</p>
<p>11-09-17 Evening Fallback 18-09-17</p>	<p>Exercise Tirrick Two – Sumburgh Airport – This will be a live exercise carried out in the evening. It will carry on from Exercise Tirrick One and will concentrate on moving casualties from the crash site to the hospital with triage and the Hospital Control Room being set up. There will be an incident command post at the Police station and the Care for People Teams will be exercised, together with the British Red Cross on providing a Rest Centre.</p>	<p>The exercise aimed to test the multi-agency response following an aircraft accident at sea approx. 1000m from Sumburgh Airport. Specifically transportation, triage and management of casualties through the airports Casualty Reception Centre (CRC) and then onto the Gilbert Bain Hospital.</p>	<p>A number of actions were identified:</p> <ul style="list-style-type: none"> • Test compatibility of MCA stretchers in SAS ambulances • Look into provision of tabbards • Provide wi-fi at Casualty Reception for Responders • Review induction and training for hospital staff • Look at merging forms for Rest Centres
<p>19-09-17 Daytime Live Exercise</p>	<p>SVT / SIC Pollution Exercise - The exercise will be run in a way that tests the new Incident Management processes that EnQuest will use after the transition of Terminal Operatorship. The BP CCM/ER team will support the exercise in its development and</p>	<ul style="list-style-type: none"> ▪ Test the new EnQuest Emergency Response procedures for SVT. ▪ Test the draft Sullom Voe Oil Spill Harbour Plan (SVOSHP). 	<ul style="list-style-type: none"> • The interface between the SIC and SVT initially suffered from a lack of information being shared, this was corrected.

at Sullom Voe Harbour	delivery, and will be available in Aberdeen and SVT to help facilitate on the day. BP will use a Consultant to assist in the development and delivery of the exercise in Shetland. EnQuest have requested that we use Petrofac to deliver the exercise, BP will interface with them going forward, with EnQuest and SIC representatives, to ensure the exercise meets their requirements.	<ul style="list-style-type: none"> ▪ Test interfaces between SIC/EnQuest in Shetland and Aberdeen. ▪ Verify understanding of Primacy during the exercise and the associated protocols to be utilised. ▪ Verify SVT ER ability to respond to Oil in the water, and the associated command and control. ▪ Test processes/response to Oil impacting the shore and how this is to be carried and communicated. ▪ If possible test the new model to utilise SIC and SVT ER teams as one team. (to be confirmed) ▪ SIC to test their new Emergency Room in the Ports and Harbour Office. ▪ Deploy Pollution Response equipment, weather permitting. 	<ul style="list-style-type: none"> • Resources available from the SIC were not used. • Useful learning in working together and provision of Liaison Officers.
27-09-17 0930 – 1500 Live exercise at Shetland Gas Plant	Exercise Carrot at Shetland Gas Plant -This is an exercise to test the communications detailed in the Shoreline Protection Plan and the interaction between relevant authorities.	<ul style="list-style-type: none"> ▪ Notification of Incident (real time) ▪ Mobilisation of Teams ▪ Lines of Communication ▪ Check inventory and prepare environmental response equipment ▪ Mobilise personnel only to incident sites ▪ Test communications between remote sites to command and control (SGP) ▪ Demobilisation 	<ul style="list-style-type: none"> • Discuss Shetland Gas Plant Shoreline Protection Plan • Someone to support and prompt Emergency Controller with actions from response plans • Use of Timeouts and use “PEAR”(People, Environment, Assets & Reputation) as part of update. • In Norway all the Emergency Services share information. Crisis Incident Management (CIM) System.

03-10-17 0900 – 1830	Exercise Border Reiver – As a tier one exercise this is a national (UK) event led by UKG.	There will be a Strategic Health Group called to coordinate cross-board incident responses at a strategic level. This comprises NHS Board Chief Executives from across Scotland; it is called and chaired by the home Board (in this exercise, Lothian). The SHG will be by teleconference, and there should be a single person identified as the Board representative. As part of the exercise all Boards will be asked to consider their ability to take casualties as part of a national response. This will be done in real time using the Mass Casualties Incident - Hospital Capacity Reporting Form.	<ul style="list-style-type: none"> • In the exercise the UK threat level was raised to critical which meant Graduated Security Plans were brought into play. • Some areas postponed elective surgeries. • Mutual Aid was activated. • NHS24 helpline was established, but not until 10 hours into the exercise
24-10-17 1400 -1630	Debrief - Relocation from 8 North Ness - This debrief will be undertaken by Alan Ross of Zurich Insurance.	<ul style="list-style-type: none"> • To identify areas of strength in how the Council responded to the disruption • To identify areas for improvement in how the Council responded to the disruption • To agree on actions that can be taken to improve how the Council responds to similar incidents in the future 	A very productive session was held with syndicate groups focussing on specific issues which had been raised. A report on further action will be produced. It is planned to take the learning and use as a base for the next BC workshops.
Live play exercise across Scotland	<p>Border Reiver is a UK tier one exercise with participation up to and including UK and Scottish Government Ministerial level; the Home Office is taking part and COBRA and SGoRR activations are expected. The exercise is based around a multi-site attack with mass casualties in Lothian (others may occur elsewhere) and will involve the emergency services, Scottish Territorial and Special Health Boards and some local authorities. NHS Lothian will be the lead Territorial Board during the exercise. Live play on day one includes real-time multi-agency responses, staff and equipment deployment and decision making at the incident scene(s), where simulated casualties will be played by actors. There will be no live play on healthcare sites in Lothian and normal services should not be affected in any way. Live play extends over three consecutive days at different UK locations, but Territorial Boards will only be involved in day one.</p>		
Council Chamber, Town Hall, Lerwick	<p>In any major incident or disruption to business continuity there are always issues that could have been managed more effectively.</p> <p>The purpose of the workshop is not to find fault, but to identify proportionate and realistic actions the Council should take to be better prepared for disruptions and major incidents in the future.</p>		

<p>26-10-17</p> <p>Scottish Health Service Centre, Edinburgh</p>	<p>NHSScotland Prevent Learning Event – Scottish Government Health Resilience Unit hosted a NHSScotland Prevent Learning event on 2 March 2016 as an opportunity for Health Boards to come together to share experience of implementing the <i>Playing Our Part</i> guidance. Participants found this event helpful and at that time we agreed to consider how we might repeat the opportunity.</p> <p>A second NHSScotland Learning Event will be held and will include an opportunity to consider any recent changes to the Prevent strategy.</p> <p>More details and how to book places etc. will be provided nearer the event but you may wish to hold this date in the meantime. The plan is to provide VC facilities for island Health Boards who may find it difficult to travel to the mainland for this event.</p>		
<p>27-10-17</p> <p>1000 – 1530</p> <p>SFRS HQ, Cambuslang</p>	<p>Scottish Resilient Communities Conference 2017 – Focus on how communities function well: economically, physically and socially, in the context of change, uncertainty and adversity.</p> <p>This free one day event will bring together communities, voluntary sector organisations, public sector emergency Responders and anyone with an interest in working better together of building resilience.</p>	<p>This intensive event will examine opportunities for collaboration, knowledge-sharing and future work.</p> <p>To attend – contact Kate.Anderson@scotland.gsi.gov.uk or on 0131 244 5489</p>	<p>No attendance</p>

<p>07-11-17 0930 – 1515 Council Chamber, Town Hall, Lerwick via UHI Video Conference</p>	<p>Exercise Odette – Pandemic Influenza remains one of the high risks for Scotland and this is reflected in the North RRP Risk Preparedness Assessment report. Exercise Silver Swan, a National Pandemic Flu exercise, was delivered in the latter part of 2015 and it resulted in a number of recommendations being made for further work in respect of the planning and preparedness for pandemic influenza type incidents. The HILRP Working Group have decided to arrange a Pandemic Influenza exercise in order to address the Exercise Silver Swan recommendations and to validate the NHS Pandemic Plans.</p> <p>The exercise will take place in four locations: Kirkwall, Lerwick, Stornoway and Inverness.</p> <p>The exercise will incorporate expert presentations and facilitated table top discussions followed in the afternoon by a Live Play H&I Local Resilience Partnership meeting.</p> <p>Participation will be sought from all relevant staff from Local Resilience Partnership Organisations. The involvement of key personnel in Health & Social Care, Mortuary provision and Public Communications will be essential as will representation from Resilience and Business Continuity professionals.</p>	<p>To exercise the Highlands & Islands Local Resilience Partnership response to an outbreak of Pandemic Influenza affecting the UK. More specific objectives will be to:</p> <ul style="list-style-type: none"> • To understand the roles and responsibilities of organisations involved in the response; • To confirm the response structures across the Highlands and Islands and their interface between each other and with national response structures to; • Identify key strategic decisions in the response; • Exercise the Pandemic Flu Plans of NHS Boards within the Highlands & Islands; • Identify issues in staff capacity, redeployment and Business Continuity; • Confirm public communications arrangements during a Pandemic Flu outbreak; and • Identify issues around the handling of excess deaths. 	<p>22 Attendees. A number of key strategic actions were identified from this exercise:</p> <ol style="list-style-type: none"> 1. Excess deaths 2. Fuel, critical dependencies – power, heating, transport 3. Staffing issues 4. De-regulation 5. Supplies – inc. oxygen, medication, etc. <p>Some of these actions will be taken forward nationally and some locally.</p> <p>Using the UHI VC network allowed excellent communications for all four venues: Shetland, Orkney, Western Isles and Inverness.</p>
<p>21-11-17 1330 – 1630 Auditorium, Museum, Lerwick</p>	<p>Workshop – Prevent Professional Concerns Process - This event will take the form of a Prevent Professional Concerns (PPC) case conference. NHS Orkney and Highland have recently run similar exercises which have been embraced as a good learning experience and raising awareness and the profile of the Prevent agenda.</p>	<ul style="list-style-type: none"> • Referral process • Intelligence gather and Vulnerability Assessment • Prevent Professional Concerns Process • Prevent Professional Concerns Case Conference • UK and Scottish picture: Government Overview 	<p>Good, multi-agency attendance with informed inter-action and understanding of the subject.</p>

<p>28-11-17 1000 – 1500 OGUK Office, Aberdeen</p>	<p>Workshop - Shoreline Response in Scotland – Local Authority – Industry Shoreline (Oil Spill) Response in Scotland.</p> <p>There is the potential for shoreline impact around the coast of Scotland from an oil release from an offshore incident on the UKCS. In such an event, the local coastal authorities are responsible for agreeing strategy and coordination of the different response organisations. The operator would be expected to liaise closely with the relevant local authority. The offshore and onshore response structures must successfully interact and the roles and responsibilities of each organisation need to be understood by all parties to the response.</p> <p>Historically the oil and gas industry practise response exercises have engaged with offshore regulator and the Secretary of State Representative (SoS Rep) and not commonly with the relevant Local Authorities.</p> <p>The workshop will bring together representatives from local authorities, operators and stakeholders such as the Maritime and Coastguard Agency providing an opportunity for industry and local authority personnel to meet and to efficiently work through the arrangements, roles, responsibilities and expectations associated with responding to oil spills that may impact the coastline.</p> <p>The cross-industry workshop has been developed jointly and collaboratively by a workgroup under the Oil & Gas UK Oil Spill Response Forum with Local Authority, Operator and Oil Spill Response Limited (OSRL) representatives. Its aim is to provide attendees with the opportunity to review, clarify and strengthen awareness of onshore response arrangements and therefore further strengthen response capability within individual applicable organisations and the UK. Please find enclosed the workshop programme.</p>	<p>For appropriate stakeholders to work through shoreline response considerations.</p> <p>To increase awareness and clarify/strengthen spill arrangements by providing an opportunity for operators to meet local authority personnel and for all responding parties to work through the arrangements, roles, responsibilities and expectations associated with responding to oil spills which have impacted the coastline.</p>	<p>Planned attendance of two from SIC.</p>
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30-11-17 1500 hrs Room A, Improvement Academy, level 5, Ninewells Hospital and Medical School, Dundee, DD2 1UB (for sat nav)	<p>Workshop – The Traumatic Impact of Incidents and Psychological Impacts – Are We Prepared?</p> <p>This event is being run by the Scottish Branch of the Emergency Planning Society, Professional Interest Networking Group.</p> <p>This session will explore the traumatic impacts of incidents such as recent terrorist attacks and the Grenfell Tower incident, and, specifically the psychological impacts on communities, responders, voluntary sector, volunteers etc.</p> <p>It will be facilitated by Professor David A Alexander MA (Hons), CPsychol, PhD, [Hon] DSc, FBPS, FRSM,(Hon) FRCPsych</p>		No attendance planned
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SHETLAND EMERGENCY PLANNING FORUM

Chair: Ingrid Gall, 20 Commercial Road, Lerwick, Shetland, ZE1 0LX
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Item
6.2

Resilience Activities 2018

Detailed below is a list of resilience activities which are scheduled for 2018. The list is compiled as events are made known and shared with Resilience partners for attendance and participation. The list covers, in date order, Training, Exercises, Workshops, Conferences, Incidents, Visits and any other Resilience Events advised. Please note that some of these events are outside Shetland. Please contact Ingrid in the first instance with regard to attendance at any of these events.

12-01-18 0900-1300 Council Chamber, Town Hall, Lerwick	Exercise – Up Helly Aa – An exercise to test plans and risk assessments for Lerwick Up Helly Aa. This will inform the running of the large event in January 2018 for future years.	<ul style="list-style-type: none">• To provide delegates with knowledge of risk and understanding of event plans to work together effectively to deal with incidents during UHA.• To inform and update the event risk assessments• To test and exercise the event plans• To facilitate an opportunity for multi-agency partners to consider their joint decision making in response to incidents during Up-Helly-Aa	Well attended with 31 multi-agency participants. The event created a new level of shared understanding of what is in place and available for this event. Learning and action points included additional First Aid training for Marshalls, Defibrillators, RVPs on the route and laminated message cards
17-01-18 1000 – 1300 Sumburgh Airport	Exercise Hi-Jack – HIAL, Sumburgh Airport – as part of the CAA modular exercise regime, this exercise was created for a hi-jack situation with other airports and relevant transport operators invited.	Establish <ul style="list-style-type: none">• guidance available• what actions will be taken• how communications are used	Multi-agency attendance of approximately 20 representatives The exercise identified a number of areas for further action including communications, who is called, actions for those called and reception areas.
21-02-18 0915 - 1630 RBS Conference Centre,	Events Outside Shetland – Resilient Scotland Conference 2018 – Promote the development of business continuity practices within Scottish organisations. Develop a supportive infrastructure for business continuity activities throughout Scotland. Promote and represent its Scottish membership within the global business	This event is free to Scottish Continuity members.	One attending

Gogarburn, Edinburgh	continuity community.		
14-02-18 0900 – 1400 Room 10, Islesburgh Community Centre	Exercise Pecking Order – NHS Shetland ICT Business Continuity - Exercise NHS Shetland Power Loss at Weekend and Re-establishment of IT systems. This exercise seeks to test how robust the proposed arrangements are, and the inter-dependences involved.	<p>To exercise NHS Shetland’s plans to recover, in a logical and prioritised manner, the core ICT business systems, following a power loss affecting all IT systems on a weekend.</p> <p>Specific objectives will be to:</p> <ul style="list-style-type: none"> • understand: <ul style="list-style-type: none"> ○ Recovery Time Objectives ○ Inter-dependencies ○ Out of Hours business continuity planning • exercise <ul style="list-style-type: none"> ○ How robust are the BCPs ○ The practical application of the BCPs, including manual back-up arrangements, availability of staff, communications, alternative work locations, Recovery Time Objectives, etc. ○ The relative priority for recovery times of each of the core ICT Business systems and their interdependencies • identify <ul style="list-style-type: none"> ○ Lessons learned for the refresh of the BCPs ○ Lessons learned for communicating the content of 	

		<p>the ICT Disaster Recovery Plan</p> <ul style="list-style-type: none"> • confirm <ul style="list-style-type: none"> ○ That all systems are listed in the relevant plans ○ That all systems are allocated a relative priority in the ICT Disaster Recovery Plan ○ That all BCP holders understand the relative priority of their systems and the order in which systems are recovered 	
12-03-18 1000-1530 Stirling Court Hotel, University of Stirling	Exercise Iris: Health Protection Event - exercise the readiness of Scotland's NHS Boards' structures, facilities and systems to respond to a suspected outbreak of MERS-CoV. It will cover areas including initial management, contact tracing, transfer arrangements and availability of and familiarity with infection control and clinical guidelines.	No detail at present	One attending
2018 0915 – 1545 – postponed because of staff changes within Scottish Water	Workshop – Multi-Agency Waterborne Hazard and Pollution Incident Plans – Scottish Water - to refresh understanding / roll out to new staff the key Scottish Water Multi Agency Plans (Scottish Waterborne Hazard Incident Management (SWIP) and Pollution Incident - Risk Management Guidance (PI-RMG) Plans) to key staff in NHS Shetland (CPHM's, Health Protection) and Shetland Council (EHO's, RA's) staff along with colleagues from Scottish Water's Public health Teams and SEPA.		

Community Safety & Resilience Board

Report Title - Performance Against Local Policing Plan 2017-20.
Presented by –Chief Inspector Lindsay Tulloch

1.0 Overview/Introduction

- 1.1 To provide an update to Committee Board on the progress with reference to the objectives outlined in the Shetland Islands 2017-20 Policing Plan.

2.0 Background Detail & Content

2.1 Performance 2017-20

A review of the performance against the Shetland Local Policing Plan 2017-20 is at Enclosure 1. This covers the period 1 April 2017 to 31 December 2017 and is attached for your review.

- 2.2 This document will now cover all priorities featured in the local Policing Plan and evidence Prevention and Intervention work corresponding to each of the policing priorities, provide local narrative in relation to Serious and Organised Crime and Counter Terrorism and finally a section covering local events for the interest of members.

3.0 Proposal/Expected Outcome

- 3.1 Members note and scrutinise the progress made against the objectives set within the Shetland Islands Local Policing Plan 2017-20.

4.0 Risk Management Implications

- 4.1 Professional. None.

- 4.2 Political. Should the objectives within the Shetland Local Policing Plan not be met there is a risk that there will be a failure in achieving the relevant elements of the Shetland strategic objectives and Single Outcome Agreements; this may negatively impact on the Board's reputation in respect to its ability to deliver its objectives and to hold the Local Policing Commander to account.

- 4.3 Social/Demographics/Community/Customer/Stakeholder Issues.
Should the objectives within the Shetland Policing Plan not be met there is a risk that the quality of life for Shetland's residents will be negatively impacted.
- 4.4 Financial/Economical. None
- 4.5 Legal. None
- 4.6 Physical. None
- 4.7 Contractual. None
- 4.9 Technical. None

For further information please contact:

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Constable Rosie Shanks (Performance Support)*

*Contact information: lindsay.tulloch@scotland.pnn.police.uk
rosemarie.shanks@scotland.pnn.police.uk*

Date: 24 January 2018

Enclosure 1: Performance report against Policing Plan Objectives- April 2017 – December 2017

END

SHETLAND ISLANDS - PERFORMANCE AGAINST LOCAL POLICING PLAN 2017/20
01 April 2017 – 31 December 2017

PRIORITY – Road Safety and Road Crime

Intention – Whilst working with Partners, enhance Road Safety across the Shetland Area

Objective – Whilst working with Partners, deliver a Road Safety Strategy which focuses on: Challenging Driver Behaviour; Education at the road side and elsewhere; Detection of offences linked to contributing factors of Fatal and Serious Road Collisions; and collectively reducing potential harm.

Target		YTD 2016/17	YTD 2017/18	YTD Variation	Context/Narrative
Reduce the number of people killed on the roads in Shetland.		0	1	+1	One fatal collision during this reporting period – B9071 at East Burrafirth a motorcyclist collided with a motor vehicle. The motorcyclist was seriously injured and died later in hospital
Number of people detected for drink / drug driving offences	Shetland Isles – Due to system configurations these figures are not available at multi-member ward level.	23	23	-	Includes failure to provide a specimen
Number of people detected for speeding.		71	57	-14	
Number of people detected for mobile phone offences.		16	9	-7	
Number of people detected for seat belt offences		24	10	-14	
Prevention and Intervention Activity	<p>Driving Ambition, review meeting carried out with Partners – SFRS, Scottish Ambulance Service, local driving instructor, council road safety officer and council mechanic. It was confirmed Driving Ambition sessions to be delivered to Brae High School and Anderson High School during summer 2018.</p> <p>Winter Safety Week – Police in conjunction with council road safety officer attended at various locations in and around Lerwick carrying out stop checks of motor vehicles and offering advice and guidance regarding winter driving. Speed checks were also carried out in relevant areas.</p>				

Road Traffic Operations/Campaigns	<p>The Motorcycle campaign- Operation Zenith ran between March 2017 and September 2017. The focus of the campaign being to promote safe and responsible motorcycling, reduce casualties, raise awareness and the enforcement of legislation.</p> <p>The Festive Drink/Drug Drive Campaign 2017 commenced at 0700 hours Fri 1 December 2017 and ran for a period of 4 weeks until 0700 hours Tues 2 January 2018. Despite the general perception that drink/drug driving is socially unacceptable, many who persist in doing so consider it to be a low-risk activity in terms of the likelihood of being involved in a collision or being caught.</p> <p>The 'Festive Drink/Drug Drive Initiative 2017' was conducted through high visibility patrol work in marked police vehicles and static road checks. Based upon research and analysis of previous campaign returns, the aim of the initiative was to conduct high profile, high visibility patrols of main arterial routes and drink/drive hotspots.</p> <p>This proactivity will continue during this reporting year. In conjunction with partners, Police will develop a local programme of Prevention, Intelligence, Enforcement and Communication in relation to Drink Driving.</p> <p>Residents in the remote island groups of Shetland voiced concerns regarding a perceived resurgence in the culture of drink-driving. There are no recorded reports from the public relating to drink driving in these communities, this would indicate there is a reluctance in reporting these incidents to Police. It is anticipated this proactivity in relation to drink driving will reassure communities and seek out offenders.</p>
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PRIORITY – Violence, Disorder and Anti-social Behaviour including Alcohol and Drugs Misuse

Intention – With partners, better understand the causes to prevent and reduce instances of Anti-social Behaviour, Violence and Disorder to enhance community safety across the Shetland Area

Objective – Work with partners to share information, support Education, Prevention, Diversionary and Enforcement Measures linked to harmful alcohol consumption; maintain robust procedures around licensed premises; support victims of violent crime by working with partners to improve service provision and prevent repeat victimisation.

Target	Baseline 5 Year Average	Baseline 3 Year Average	YTD 2016/17	YTD 2017/18	YTD Variation	Context/Narrative
Licensed Premises Checks				821		10.7% of all licensed premises checks carried out in N Division (821 out of 7645)
Increase the number of positive stop searches/ confiscations for those possessing alcohol.						See Stop and Search details at Antisocial Behaviour / Disorder section below
Increase the number of positive stop searches/ confiscations for those possessing drugs.						
Increase the number of offences reported for the supply or being concerned with the supply of drugs.	19.0	18.33	24	14	-10	Number of detections for Drugs supply, production and cultivation
Number of detections by the 'Dogs against Drugs'				20		Police Scotland, in conjunction with Dogs against Drugs, resource have attended at primary and secondary schools in Shetland and carried out 4 educational visits and presenting to 133 individuals.
Reduce the number of Breach of the Peace/Threatening, Abusive behaviour Crimes	104.4	90.0	73	59	-14	Threatening and Abusive Behaviour Crimes and Offences. Lowest recorded number in 5 years.
Reduce the occurrences of common assault	123.8	121	100	103	3	Crimes and offences
Reduce the number of premises currently escalated to Stage 3 noisy behaviour through Operation Notebook.				0		There are currently no premises at Stage 3 Operation Notebook within Shetland.

Number of antisocial behaviour orders in place.				0		There are no antisocial behaviour orders in place within Shetland
Reduce the incidents of vandalism	84.2	75.0	66	77	11	Includes Malicious Mischief

Target	Baseline 5 Year Average	Baseline 3 Year Average	YTD 2016/17	YTD 2017/18	YTD Variation	Context/Narrative
Prevention and Intervention Activity	<p>Festive Safety Campaign saw a pop-up shop established at vacant premises on Commercial Street, Lerwick during December. This was occupied by Police, SFRS, Trading Standards, Scottish Ambulance Service, Council Road Safety Officer, with support agencies – Rape Crisis, Womens Aid, Citizens Advice Bureau.</p> <p>Advice was given to the public, covering a wide range of criminality and encouraging members of the public to keep safe over the festive season.</p> <p>Prevention and Interventions attended at C.A.B and presented to workers regarding lone working/home visits to clients. This was run as an information session with group work. This was well received and is available to other agencies if required.</p> <p>Continued liaison between Police, Environmental Health, Housing in relation to antisocial behaviour.</p>					

Violence, Disorder & Antisocial Behaviour - Stop and Searches					
		April 2017 – Dec 2017	April 2017 - Dec 2017 (Positive)	Victims	% Change
	Number of stop and searches conducted (total)	112	25		
	Number of statutory stop and searches conducted	-	-		
	Number of consensual stop and searches conducted	-	-		
	Number of consensual stop and searches refused	-	-		
	Number of seizures made	6	6		
<p>An enhanced version of the National Stop & Search Database commenced on 1 June 2015. The enhanced database brought significant changes in the process of data capture and the methodology for recording data items.</p> <p>Management Information and data in respect of stop and search can be found on the Police Scotland website via http://www.scotland.police.uk/about-us/police-scotland/stop-and-search-data-publication.</p>					

PRIORITY – Acquisitive Crime

Intention – With Partners and Communities, prevent instances of acquisitive crime across the Shetland area

Objective – With Partners, share information, support education, prevention, diversionary and enforcement activity linked to acquisitive crime; develop work with targets – recidivist offenders to reduce reoffending linked to acquisitive crime e.g. Persistent Offenders programme; enhance the use of all media platforms to raise awareness of local and national preventative initiatives.

Target	Baseline 5 Year Average	Baseline 3 Year Average	YTD 2016/17	YTD 2017/18	YTD Variation	Context/Narrative
Number of Theft by Housebreaking	12.4	12.6	8	4	-4	
Number of theft by shoplifting	21.8	26	17	20	3	
Number of theft from motor vehicles	16.4	18.3	24	16	-8	
Prevention and Intervention Activity	<p>Festive Safety Campaign saw a pop-up shop established at vacant premises on Commercial Street, Lerwick during December. This was occupied by Police, SFRS, Trading Standards, Scottish Ambulance Service, Council Road Safety Officer, with support agencies – Rape Crisis, Womens Aid, Citizens Advice Bureau.</p> <p>Advice was given to the public, covering a wide range of criminality and encouraging members of the public to keep safe over the festive season.</p> <p>Security Surveys carried out at premises in Unst.</p>					

PRIORITY – Protecting People at Risk of Harm

Intention – Protect people at risk of harm

Objective – With Partners we will focus on safeguarding communities; with Partners we will address emerging issues through Prevention and Intervention

Target	Baseline 5 Year Average	Baseline 3 Year Average	YTD 2016/17	YTD 2017/18	YTD Variation	Context/Narrative
Class 2 Crimes -sexual crimes	22.0	24.3	19	18	-1	Enquiries in relation to sexual crimes are focused on positive outcomes for victims of crime and led by their wishes. This figure also includes reporting of non-recent incidents.
Domestic abuse incidents			60	49	-11	MARAC is firmly embedded in the Shetland Isles and continued Partnership working ensures victims are supported.
Hate Crime			2	1	-1	Care should be taken in the interpretation of emerging trends or percentage changes when dealing with small numbers.
Ensure that people who report hate incidents feel satisfied with the response received from public agencies.	Third party Reporting Centres – New and existing centres to receive new training early in 2018. A Hate Crime Survey is sent to all victims of Hate Crime; this survey has been in place since 1st January 2015 and its purpose is to ensure that people who report hate incidents feel satisfied with the response received from public agencies.					
Prevention and Intervention Activity	Joint Working between Police and SWD. Police carried out CEOP internet safety talks at primary schools in Lerwick. Further talks were given to parents via the Parents Council. Vulnerabilities – YTD December 2017, Police officers in the Shetland Isles have responded to 726 non-criminal calls relating to advice and assistance requests; concern incidents; medical incidents; mental health incidents and missing person incidents.					

PRIORITY – Serious & Organised Crime

Intention – With Partners, reduce the threat, risk and harm caused by Serious Organised Crime

Objective – With Partners work to safeguard the Shetland area by taking all opportunities to prevent crime and make the Shetland area a hostile environment for Serious & Organised Crime Groups; to improve outcomes for individuals and communities and reduce offending through prevention, early intervention and diversion; in support of our Partners in the Local Authority and NHS via the Shetland Alcohol and Drug Partnership Strategy we will direct those who are substance dependant towards recovery through prevention, treatment and support services; with Partners work to reduce the instances of substance misuse in our communities

Serious & Organised Crime	<p>Divisional Operation - intelligence development and investigation into drug supply and use in educational establishments throughout the Division, including Shetland. All intelligence will continue to be monitored daily and passed to the local area inspector for proactive approach.</p> <p>Divisional Operation – ongoing investigation into recent online/electronic frauds which have targeted local business/charities and have resulted in the loss of substantial amounts of money in the Division and in the Shetland Area over the current reporting year</p>
Prevention and Intervention Activity	<p>An online safety leaflet is attached for your information and attention, please distribute it to colleagues/service users/friends and family.</p> <p>N Division, including Shetland has seen a number of high value and high profile victims of this type of scam. Prevention and Interventions in Shetland continue to work closely with the Financial Institutions Group further developing “Scambusters”.</p>

PRIORITY – Counter Terrorism & Domestic Extremism

Intention – Support the delivery of the CONTEST strategy to reduce the threat posed by terrorism and domestic extremism

Objective – Strengthen PREVENT work with Partners and institutions; with Partners, support individuals who are vulnerable to terrorism and violent extremism; strengthen PREVENT work in relation to the internet and Social Media; Effective Multi-agency planning in respect of Counter Terrorism is taking place; Develop our ability to response effectively to any terrorist attack (with a specific focus on emerging high-risk threats, and specialist capabilities).

Counter Terrorism & Domestic Extremism	WRAP (Workshop to Raise Awareness in Prevent) table top exercise carried out in Lerwick attended by various agencies of the Shetland Multi-Agency Prevent Group. This attracted national interest with a Home Office representative to attend a future session planned in November.
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Activity/Events

October 2017	Anderson High School opens
November 2017	HILRP Pandemic Flu Exercise took place in Kirkwall, Lerwick, Stornoway and Inverness Remembrance Parades at various locations PSYV Shetland created a Seafood Recipe Book to raise funds for the Fisherman's Mission and RNLI. They attended a Craft Fair and sold £2000 worth of books over a very busy weekend. There are still editions available.
December 2017	PSYV Shetland assisted Police Scotland and partner agencies with a Winter Safety Campaign on two occasions. Christmas Parade, Lerwick.

Online Safety Campaign

#PoliceScotlandKeepsafepostfestivescams

Police Scotland is reminding our communities to be on guard against scammers.

The period following the festivities can be a busy time for many people and criminals take advantage of this seeking out opportunities to commit frauds both online and offline.

Frauds can be committed by letter, texts and calls, but as more people shop, bank and do business online, criminals are now looking for more online opportunities to SCAM and gain access to people accounts, direct people to fake websites or have money sent to fraudulent accounts.

Criminals are often highly convincing and it is important to be aware of the warning signs - anybody or thing connected to the internet is a potential victim.

Sergeant Steven Gillies, who is part of the Safer Communities team within Police Scotland's Specialist Crime Division, has answered a number of key questions and has good advice to offer about how to stay safe online.



What are Scams?

Scams are fraudulent schemes that coerce people into parting with their personal or banking details and/or cash. Here are some popular types of scams:

- **Phishing** – A website, email or message that poses as a brand or company you recognise, usually the intention of this is to cause the recipient to click on a link or button within the message.
- **Online Shopping & Auction Fraud** – websites and auction listings where items that don't exist or are of inferior quality are listed for sale. Often fake websites are set up to trap people into making purchases with great deals and low prices.
- **Vouchers** – scammers often convince people to pay for fake services by purchasing popular music vouchers and sending on the code.
- **Vishing** – similar to phishing, this time conducted over the phone, the recipient is coerced into handing over personal information, banking details or passwords.
- **Lottery/big money wins** – unsolicited letters are sent advising of a large lottery win or money due following a death. To release this money you need to send cash to the fraudsters.



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How to protect against Scams

- Don't assume anyone who's sent you an email or text message or has phoned you is who they say they are. It's imperative that you know the origin of those who contact you. If you feel unhappy about the content, delete the email or message or hang up the phone.
- Be sure to check the site you are visiting is secure, this is usually indicated by HTTPS in your browser bar address and often accompanied by a small padlock symbol. This usually means the information you send is secure.
- Buy from reputable and trusted companies that you know to be legitimate and genuine. Be very wary of sites offering 'too good to be true' deals
- Don't access your bank or building society accounts via email/message links received, go directly to the website
- Remember, a bank will never call or email and ask you for passwords, account details or to move money to a 'safe account'. Always double check numbers you're given to call back on or call through the main customer service number for the organisation. If you're still unsure, consider visiting your local branch instead of speaking to someone over the phone.
- Reputable companies will never ask you to pay for goods with vouchers or music tokens and never make large purchase with vouchers to pay for goods online.
- Never respond to letters or emails claiming that you have won or you are due money and never send any money to emails claiming they will release apparent winnings to you.

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 scotland.police.uk

How do I know if I've been scammed?

- You may have difficulty accessing your online bank account or there may be unusual activity on your statements.
- Your computer may start to run slow, you may start getting an unusually high number of unsolicited messages.
- Bank or credit card statements usually sent to your address aren't delivered - this could be a sign of ID fraud.
- You have trouble obtaining credit when you've got a good credit history.

Can I get my money back?

Once money has been sent it can be incredibly difficult to get funds back if you don't use a trusted payment method. Ensure you use methods such as credit/debit cards, PayPal, Apple pay and Google Wallet for example, when making online payments as they have fraud protection measures in place.

If asked, never send cash or use carriers such as Moneygram or Western Union to forward on cash payments to unknown recipients.

What to do if you've been scammed

- Report the issue to Police Scotland on 101.
- Don't engage with the scammer, stop any interaction at once.
- Contact your bank, tell them and take advice.
- Contact the payment vendor and initiate resolution procedures.
- If possible keep all associated emails

Further preventative digital and cyber advice is available through the Police Scotland website at:

<http://www.scotland.police.uk/keep-safe/keep-secure-online/> and from other prevention partners at the following sites:

Scottish Government Cyber Resilience

Scottish Business Resilience Centre

National Cyber Security Centre

**Road Safety Advisory Panel
Community Safety Board Briefing Note**

**Item
8**

Issue/Topic:	Road Safety Advisory Panel
Author:	Elaine Skinley
Date of meeting:	9 th January 2018

Background:

The panel was established with the purpose of consultation with interested external parties and to coordinate efforts within the Council to improve road safety.

Current Situation:

- Regular updates are given by the Roads Engineer, Road Safety Officer and the Police in terms of the 4 'E's' of Road Safety. (Engineering, Education, Encouragement and Enforcement)
- Winter Driving Campaign went well with Clinic held in the Lerwick Fire Station and free resources available in different locations.
- Road Safety Week in November was 20th - 24th.
- A new Road Safety Strategy for Shetland is being developed.
- Police Scotland reported no drivers tested positive to alcohol over the festive period even though 50 drivers were stopped.
- A couple of new partnership initiatives were discussed.

Key Considerations:

To improve safety on Shetlands roads and decrease casualty numbers in line with National Casualty Reduction Targets.

Conclusions:

Road Accidents impact negatively on all levels of the community and realising a reduction in accidents is recognised as a major community priority.

The Road Traffic Act (1988) (Section 39) places a duty on local authorities to provide a programme of measures to promote road safety.

The Scottish Government's publication "*Scotland's Road Safety Framework to 2020*", details the new tighter targets expected of Scotland's road safety units.

In response, the SIC will work hard to keep up the high standards of joint working applied to our initiatives and campaigns in an attempt to meet these new tighter targets.