



## 11.1 Scope

11.1.1 Experience of exercises in 1999 and 2000 pointed to the need for NEPLG to prepare guidance on the working relationship between the GTA and the Health Adviser. They are both key participants at the local emergency facility who need to work closely together, and with others, in formulating advice. This chapter provides guidance on how they might do this within the overall planning framework.

## 11.2 General

11.2.1 To ensure the necessary close working liaison, appropriate plans need to be prepared at the local level taking account of the GTA's terms of reference and duties as set out in chapter 10, the Health Adviser's role as set out in chapter 4.4, and the roles of other organisations. These should establish groundrules for the working relationship between the two Advisers, and with others, taking account of the wider processes underway at the off-site facility, and the wider consultations necessary to develop a strategy to protect the public.

## 11.3 Experience of Exercises

11.3.1 Exercises have shown that the GTA, the Health Adviser and others can work well together both where a formal framework has been established, and where more informal arrangements apply.

### Formal Framework

11.3.2 This involves the establishment of a formal grouping, usually known as a Health Advisory Group (HAG), or Joint Health Advisory Cell, to consider the management of the health aspects of the incident and to provide health advice to the incident commander. The group would include the GTA or his/her representative and other agencies with an interest in protecting health and the delivery of health advice.

11.3.3 This formal arrangement was based on earlier experience of MOD exercises, which do not involve the appointment of a GTA. In civil exercises, the arrangement has also shown to work where close liaison and co-operation could be maintained between the Health Advisor and the GTA although, in practice, this only happened in the latter stages of the exercise in some cases. The exercises showed that it was necessary to have clear groundrules for the two Advisors to work together and with other organisations from the outset.

- 11.3.4 An aspect of the establishment of a formal grouping is the need to accommodate and support such a grouping at a time when it is necessary to support the deliberations of the Co-ordinating Group, and possibly also the Recovery Working Group. It could be argued that other key aspects of the response (eg food countermeasures) would also benefit from the establishment of a formal grouping, but this may raise further questions on resourcing.

### Informal Arrangements

- 11.3.5 Exercises over many years have shown that liaison between the GTA and the Health Adviser can work effectively without a formal grouping. However, recent experience has also identified the need to clarify the groundrules. This is because of an increasing recognition of the need to ensure that the responsibilities of the Health Adviser in a civil nuclear emergency accord fully with his/her general responsibilities as laid down in the 1977 National Health Service Act, and as clarified further in Health Service guidance in 1993.

## 11.4 Recommendations

- 11.4.1 NEPLG has considered the advantages and disadvantages of a formal framework or informal arrangements and consider that this should be a matter for local agreement. In either case, it is considered necessary to establish groundrules that would set out the following main features:

- (a) the arrangements for managing the health aspects of the incident and for providing co-ordinated health advice;
- (b) the arrangements for liaison and co-operation between the GTA, the Health Adviser and others (eg Local Environmental Health, DEFRA, FSA, Water companies), including whether this will be done in a formal framework or through informal arrangements;
- (c) the process for agreeing the countermeasures strategy, including the arrangements for recording the outcome of deliberations and reporting decisions to the strategic co-ordinating committee.
- (d) where the Health Adviser is not the Director of Public Health himself/herself, what decisions must have the sanction of the Director of Public Health personally (eg issue of potassium iodate tablets).

## 11.5 Conclusion

- 11.5.1 Although this chapter advises on the GTA/Health Adviser interface, NEPLG believes that it would also provide a useful framework for the working relationship between other organisations represented at the local emergency facility.