



HPA Debrief Session Report

London 2012 Olympic and Paralympic Games

1. Introduction

On 22 August 2012, in the period between the Closing Ceremony of the London 2012 Olympic Games and the opening of the Paralympics, the HPA held an Olympic debrief session. The session had the following objectives:

1. To review the plans implemented by HPA during the Olympic Games, to acknowledge what worked well, and to identify lessons to be learnt and implemented for the Paralympics
2. To gather data for inclusion in a central HPA/WHO Collaborating Centre Olympic legacy project (a book on planning mass gatherings) using the 2012 Olympics as a case study
3. To identify the learning from the planning and processes put in place for the 2012 Olympics, and analyse where this can be applied to the HPA's business-as-usual emergency response processes.

2. Agenda and methodology

Participants were invited from across the HPA (these are listed in Annex 2). The focus was on those who were significantly involved in delivering the operational aspects of the HPA's Games time commitments.

An introductory session outlined the purpose of the debrief meeting, and all participants were invited to introduce themselves. The ice was broken by asking each participant to contribute an abiding memory of the Olympics, and to state a quality that they were bringing to the meeting to support the achievement of the outcomes.

The following questions were then discussed:

- What do you think you are pleased with, in your work, during the Olympics? Table discussion.
- What do you think worked well in the Olympics Games and for future mass gatherings? Table discussion.

Feedback to room

- What do you think can be improved for the Paralympics and other mass Gatherings?

Pairs, then table discussion and write-up on post-it notes. The group then discussed and agreed further key areas to consider:

- How this aspect can be improved for the Paralympics and other mass gatherings?
- What needs to get resolved now for this area of improvement?
- What do you think about the planned responses for the Olympics that could bring about improvements to HPA's emergency processes?

3. Summary of key findings and recommendations:

Full responses are reported in Annex 1.

3.1 Worked well

1. Planning:
 - a. Clear scheduling and reporting
 - b. Clear roles and responsibilities with agreed staff rotas
 - c. Enabling a flexible approach to be taken in different areas of the agency and regions, as long as the daily commitments were met.
2. Testing and exercising:
 - a. Sufficient lead-in time to enable significant testing and exercising and training of staff across the agency
 - b. Lessons were identified and learnt and operational documents reviewed and revised
 - c. Staff became comfortable with their roles and responsibilities and ConOps (concept of operations); "almost became routine"
 - d. Arrangements with partner organisations were well understood.
3. Delivery:
 - a. Daily rhythm teleconferences, reporting and SitReps worked well
 - b. Quick decision making
 - c. Staff were confident that we knew what was going on
 - d. Teleconference effective as a reporting (not discussion) forum
 - e. Internal cross-organisational and departmental working good
 - f. External partners: sharing information and agreeing messages went well

3.2 Potential areas for improvements for HPA/PHE and recommendations for future mass gatherings

Three key areas were identified for improvement:

- 1 & 2: HR and surveillance were identified as areas for the HPA to address for future mass gatherings
- 3: improved structures for working in the polyclinic. This is an issue specific to Olympic and Paralympic Games and for those countries involved in future Olympics (such as Rio 2016).

1. HR (the most criticised area):
 - a. Better and earlier engagement with HR
 - b. Realistic planning with the ability to scale up and down

- c. Succession planning/resilience of staff involved – avoid losing expertise, keep flexibility to escalate and de-escalate, and manage expectations. Share plans widely to get buy-in.
2. Surveillance:
 - a. Better clarity on defining reporting for the event based surveillance (EBS)
 - b. Process for risk assessments set up, agreed and tested prior to event
 - c. Tailor international reporting proportionally to resources and relevance to host country
 3. Polyclinic:
 - a. Accreditation for unescorted access to site for Paralympics
 - b. More engagement during development of syndromic surveillance system to ensure it is of value (recognising limitations of their IT systems), and increased and improved operational guidance
 - c. Logistics and access to site (should have been arranged and set up earlier).

A full debrief with those involved in the polyclinic was undertaken separately and written up.

In addition the areas below were identified for improvement:

4. Planning: communication of planning details earlier
5. Communication: to increase awareness and understanding of expectations within the HPA

3.3 Recommendations for Rio and other mass gatherings (also see Annex 1):

1. Get the right people in the right place as early as possible – build relationships and trust before the start
2. Agree and set up HR arrangements early: it is crucial key to involve HR experts. Put in place the ability to escalate and de-escalate
3. Review and evaluate baseline data and information – e.g. surveillance systems and normal events. Set up and test new systems early. Preferably have a minimum of one year of baseline data
4. Define and agree EBS and risk assessment processes early
5. Tailor international surveillance to the country's epidemiology and ensure it is proportional to available resources
6. Understand data sources at all levels
7. Recognise single sources of information/expertise - "one version of the truth"
8. Pre-agree media and communication lines across stakeholders.

3.4 What could be taken from the planned responses for the Olympics that could bring about improvements to HPA emergency processes?

Operational procedures

Day to day:

- Olympic concept of operations to run as a sleeping resource with the single point of contact approach endorsed, in particular with external stakeholders – Operations centre should function as a single point of entry into HPA/PHE

- Ensure emergency preparedness and response is everyone's business
- An incident surge person should be available to lead complex cases
- Regular teleconferences should be held at set points of the day (as during the Games) so everyone knows what is going on
- The staff rota system used nationally (IERP) and in the OCC is replicated for level 2 & 3 incidents; emergency response should be written into staff job descriptions
- Single point of contact (SPOC) approach, technology-enabled emails and phones (e.g. internal office and communications)
- Communications: prepared information and file sharing. All possible information should be ready to go in advance for quick use when required.

Response:

- An agency-wide task management/incident management system is required
- During a major incident, co-locate key teams – national, regional (e.g. London) and communications
- Clarity of language should be ensured in all SitReps
- Emergency response plans for all parts of the agency should be systemised
- Surveillance systems:
 - Maintain or be able to switch on enhanced systems (e.g. surveillance, USII, EBS and real time reporting)
 - Early warning systems should be established and understood
- Recognise single sources of information/expertise, then share and agree information across internal experts and external organisations (e.g. HPA/FSA). Ensure 'one version of the truth'
- iPads (or similar) should be used instead of Blackberries.

Quote: "Post 2012, many systems are in place for enhanced surveillance and real-time reporting that did not exist before – the use of these should be maximised."

Debrief feedback

Annex 1

What worked well for the Olympics (and could be useful for future MGs)?	What do you think could be improved for future planning in the HPA / PHE for future mass gatherings?	Recommendations for Rio and other mass gatherings
Operating procedures		
<p>General / planning:</p> <p>Read plans Staff were empowered to make decisions - Relying on experts' expertise A cadre of people were present, and could be called upon, who knew what to do Microbiology done quickly Clear division of labour in teams and avoiding duplication of effort Staff flexibility and resilience under pressure – everybody delivered Sense of humour Belt & braces approach; provided useful reassurance: "High Quality nil reporting" Tight deadlines; usually, decisions take ages to be made but in Olympics, the processes were consolidated and worked just as well.</p>	<p>Additional clarity required on passage of information through systems and into risk assessments – where it comes from, how it is assessed</p> <p>Procurement - difficulties at start of games (IT, phones, etc.)</p> <p>IT resilience - review IT resilience and support for OCC CIRAS - Needs to be used properly</p> <p>Olympics office 'sharefile' site to share information across HPA</p>	<p>In response and preparation terms, the establishment of a hierarchy of the ideal vs the really necessary</p> <p>IT resilience</p> <p>Stats should be provided on access to services during games International issues: - Tailor criteria to what might pose a threat - An assessment is needed of the risk in the system - A hierarchy should be developed for what should be focussed on</p>
<p>Testing and exercising: (nationally and locally)</p> <ul style="list-style-type: none"> - work became routine, sorted out numerous logistical issues, - provided confidence in ops procedures - strengthened important interpersonal relationships <p>Education of DH / PH Ministers through pre-Olympics exercises. Value of soft lead in time for rehearsing and refining: lots of preparation, good communication, cross department working. Sorting issues early allowed confidence in Games time Good preparedness in HPUs</p>	<p>For future mass gatherings whole-agency exercises should take place during the preparatory phases</p>	<p>For future mass gatherings intra and inter-organisational exercises should take place during the preparatory phases</p>

<p>Daily teleconferences, reporting and sitreps Well tested reporting/delivery systems. Well structured, well run, brief Clear scheduling – clear agenda for teleconferences, reporting style and purpose defined in advance Created a culture where saying “nothing to report” was fine – no reporting for the sake of it. Regular regional teleconferences well executed When issues were reported, response was pragmatic and proportional. This was greatly valued Starting sitrep early so no changes when used in Games – meant ability to gauge accurately what was of interest for OCC Single strong leadership with public health knowledge Establishment of baselines and HPA documents. Minor events provided reassurance that systems were robust</p>	<p>Controls for urgent case control studies</p>	<p>Understanding is required of where all information comes from – robust systems are needed across national and local level systems, in all specialities</p> <p>A table should be created for categories of outbreaks and the systems in place to deal with them</p> <p>Risk assessment: make clear what info is required for risk assessments, and why</p>
<p>Surveillance Syndromic systems: established, not just switched on Dashboard format helpful HPZone - Good record - Confidence in what went on HPZone: work recorded appropriately and correct decisions made EBS worked well</p>	<p>Syndromic surveillance should be linked to NiEH</p> <p>Better criteria should be defined for reporting to EBS ‘Games relevance’ was a broad definition: difficult to have a proportionate response</p> <p>Risk assessments introduced at the very beginning</p> <p>Better understanding of how active is surveillance and how much it relies on passive systems</p>	<p>Internationally - assess what is relevant on a country-by-country basis (e.g. re vectors) - International surveillance tailored to the country's epidemiology and proportional to resources available: passive surveillance may suffice in resource-poor settings Ability to get the names/details from the population at risk at a venue, (issues re commercial company) Test new surveillance systems in advance. Long running (+1year) surveillance systems work well, short running ones are difficult to interpret. If syndromic surveillance is used, a joined-up public health investigation/ response/ message is required across infections/ chemicals/ environment (eg. In response to an increase in asthma) Triangulation between systems is required to ensure that</p>

		low level events are not missed
Communications and media		
<p>Media: proactive briefing the week before when quiet - it was important to give the media something to report.</p> <p>Internal communication: worked well. Had a range of briefings for communications on various issues, - some were used, but even when not, knowledge that they were available was helpful</p> <p>Skilled up each other to cover things outside normal work.</p> <p>Educating DH/LOCOG: awareness raising prior to event of HPA role – educating upwards</p>	<p>Increased and better use of social media (4 years hence social media will have further developed)</p>	<p>Increased and better use of social media (4 years hence social media will have further developed)</p> <p>Make people as aware as possible of the communications team, its makeup, roles and responsibilities, from the start</p> <p>Communications: robust plans for communications strategies and structures</p> <p>Pre-agree media and communication lines across stakeholders.</p>
Cross department working		
<p>Great value of prior awareness-raising of what HPA does</p> <p>Integration of services across the agency from national to local across all specialties</p> <p>Started working with external partners early: Building relationships and trust with partners well in advance of the games</p> <p>Looked after one another</p> <p>Shared learning</p> <p>Battle rhythm/structure</p> <p>Heightened understanding of different roles in agency - not relying on others. Sorting it out ourselves</p> <p>Colindale teams fed neatly into COC - good communications structure, compatible rhythm</p> <p>Good agreements with external partners (e.g. Air Quality) re what messages would be</p> <p>Stakeholder engagement – there is more awareness now across government of public health: what it is, why it's important, what happens. This is important legacy</p>	<p>UK Emergency services failed to use the agreed alerting mechanisms for the recycling fire, despite months of discussion and exercising. Pressure needs to be kept up on emergency service colleagues so they use correct methods to alert HPA</p> <p>Greater connection between systems – e.g. testing on water systems (DWI). Water worked very well (DWI), food not so well (FSA) – good systems for integrating data from all sources are vital</p>	<p>Crucial period for building relationships is before the start</p>

Personal/interpersonal dynamics: positive links were made across the organisation		
Workforce planning		
<p>Leave built in HR issues sorted (including compensation). Cannot assume goodwill from staff, need to buy in (early!) Careful planning of rotas for Olympic and day jobs – clear rotas Recognition of the important role of non technical staff – e.g. admin colleagues</p>	<p>Consider escalation procedures more thoroughly and avoid overkill by providing too many staff (i.e. consider longevity of event/incident)</p> <p>Roles and responsibilities:</p> <ul style="list-style-type: none"> - understanding of these should be refreshed, especially for scale up: not really tested during the Games due to lack of incident. - operational cells focus is on output (Sitrep) and providing single point of contact; for the OCC or equivalent this is different – catering to DH/LOCOG external partners. - awareness of people's roles extends to allowing people to do their day jobs when off Olympic duty <p>Sustainable / succession planning:</p> <ul style="list-style-type: none"> - over-centralisation of knowledge at senior level and a risk of losing it, insufficient people had the overview enjoyed by the most senior people. - inevitable loss of expertise on retirement /leaving, danger of losing institutional knowledge. <ul style="list-style-type: none"> - Secondments were advertised too late - LOOC review of staffing - Explore remote working – improve infrastructure both IT and telephony - HR team should be more responsive. 	<p>Getting the right people in the right places as early as possible Clear division of labour within teams; efficiency; avoiding the duplication of effort Escalate vs de-escalation: Free up staff if it is quiet Manage expectations of those working in operational cells Succession planning Terms and conditions should be worked out well in advance Set up and agree HR systems and process early. Goodwill should be secured early</p>

Annex 2: debrief day list of attendees

Facilitator: Sharon Milroy

Division	Attendees
Olympic Office	Roberta Marshall Ciaran Sundstrem Tina Endericks Brian McCloskey Mark Keilthy Susie Berns Rachel Scott
HPS Region	Paul Crook Karthik Paranthaman (EM) Gillian Smith Caroline Black (EoE) Rachel Heathcock (LON) Barry Walsh (Poly) Joanne Bosanquet (Poly) Yvonne Young (Poly) Vivien Cleary Ettore Severi Sarah Nathan (Poly)
HPS Colindale	Barry Evans Jane Jones Ellen Heinsbroek Michael Edelstein
HPS Emergency response Division	Marc Beveridge
MSD	John Paul Jim McLauchlin Colin Brown Adrian Collins
CRCE	Naima Bradley Robie Kamanyire Alec Dobney
Communications	Tycie West