Lothian NHS Board

NHS Lothian Headquarters
Waverley Court
4 East Market Street
Edinburgh
EH8 8BG
www.nhslothian.scot

Date 20 October 2026
Your Ref
Our Ref 11921

Enquiries to Richard Mutch
Extension 35687
Direct Line 0131 465 5687
loth.freedomofinformation@nhs.scot
richard.mutch@nhs.scot

Dear

FREEDOM OF INFORMATION – MARTYN'S LAW

I write in response to your request for information in relation to Martyn's Law.

Question:

- I would like to request the following recorded information under the Freedom of Information (Scotland) Act 2002 in relation to your organisation's preparations for the Terrorism (Protection of Premises) Act 2025, commonly known as Martyn's Law.

1. Responsibility
   Please provide the name or job title of the officer, department or team currently responsible for your organisation's preparations for, and implementation of, the Terrorism (Protection of Premises) Act 2025 / Martyn's Law.

2. Current plans and preparations
   Please confirm whether your organisation currently holds any documented plan, action plan, implementation plan, risk assessment, internal report or other recorded document relating to preparations for the Terrorism (Protection of Premises) Act 2025 / Martyn's Law.

   If so, please provide copies of those documents, subject to any applicable exemptions.

3. Actions and timescales
   Please provide details of any recorded actions, milestones or implementation dates that have been agreed in relation to preparing your organisation or its premises for the requirements of the Act.

4. Budget
   Please confirm whether any budget, anticipated expenditure or financial provision has been identified or allocated for work associated with the Terrorism (Protection of Premises) Act 2025 / Martyn's Law.

   If a figure has been identified or allocated, please provide the amount.

5. Exercises and drills

NHS Lothian

Please confirm whether your organisation has carried out, commissioned or scheduled any lockdown, evacuation, invacuation, terrorism-response or similar emergency exercises or drills during the last 24 months.

If so, please provide the dates and general nature of those exercises and state whether any further exercises are currently scheduled.

Answer:

1	NHS Lothian has established governance arrangements for implementation of the Terrorism (Protection of Premises) Act 2025 (Martyn's Law). The following groups are responsible for preparations and implementation. Executive responsibility sits with the Executive Director of Public Health and Health Policy. See enclosed. Note: exemption regarding named person, Section 39(1) Health and Safety applies.
2.	NHS Lothian holds documented information relating to preparations for the Terrorism (Protection of Premises) Act 2025 (Martyn's Law). • Martyn's Law Terms of Reference v1.0.pdf • Action Plan for Martyn's Law v1.21.docx Note: exemption regarding Current plans and preparations, Section 31(1) National Security and Section 35(1)(a)&(b) Law enforcement
3.	These are recorded in the action plan. Implementation is by 1 April 2027 Note: exemption regarding action and timescales, Section 31(1) National Security and Section 35(1)(a)&(b) Law enforcement.
4.	This is under consideration by a Short Life Working Group. Note: exemption regarding all sections apply 39(1) Health and Safety, Section 31(1) National Security and Section 35(1)(a)&(b) Law enforcement.
5.	NHS Lothian conducts regular exercising focused on several themes including those mentioned. During the last 24 months 19 of the 48 exercises conducted have focused on themes mentioned above. These have included marauding terrorist incidents and suspicious packages. Further exercises are planned. Note: exemption regarding exercises and drills - Section 31(1) National Security and Section 35(1)(a)&(b) Law enforcement.
Documents enclosed: 1. Martyn's Law Terms of Reference v1.0.pdf 2. Action Plan for Martyn's Law v1.21.docx	

Please note that NHS Lothian has a policy of not releasing the names and details of staff (and non-staff) below a senior level. This is considered exempt under Section 38(1)(b) of the Freedom of Information (Scotland) Act 2002 and has been redacted from the enclosures.

I hope the information provided helps with your request.

If you are unhappy with our response to your request, you do have the right to request us to review it. Your request should be made within 40 working days of receipt of this letter, and we will reply within 20 working days of receipt. If our decision is unchanged following a review and you remain dissatisfied with this, you then have the right to make a formal complaint to the Scottish Information Commissioner within 6 months of receipt of our review response. You can do this by using the Scottish Information Commissioner's Office online appeals service at www.itspublicknowledge.info/Appeal. If you remain dissatisfied with the Commissioner's response you then have the option to appeal to the Court of Session on a point of law.

If you require a review of our decision to be carried out, please write to the FOI Reviewer at the email address at the head of this letter. The review will be undertaken by a Reviewer who was not involved in the original decision-making process.

FOI responses (subject to redaction of personal information) may appear on NHS Lothian's Freedom of Information website at: https://org.nhslothian.scot/FOI/Pages/default.aspx

Yours sincerely

ALISON MACDONALD
Executive Director, Nursing
Cc: Chief Executive
Enc.

Objectives:

- Ensure that NHS Lothian is compliant with the Protection of Premises Act 2025 (Martyn's Law)
- Ensure that NHS Lothian follows best practice, giving consideration to national guidance
- Ensure our preparation and measures are consistent with NHS Lothian's organisational aims and stated values
- Updates on the Action Plan will be provided at each Strategic Resilience Group.

The action work plan is jointly owned by Estates and Facilities and the Resilience Team. A SLWG will be established to progress the actions outlined in the plan

Governance

Statutory Duties

The Protection of Premises Act (Martyn's Law) was enacted into legislation in April 2025. As it is Terrorism related, it is reserved to the UK Government. The government has allowed a 24 month implementation period and has appointed the Security Industry Authority (SIA) as the statutory body who will produce guidance and assure compliance. Agencies will require to demonstrate compliance by April 2027.

Strategic Resilience Group

The Strategic Resilience Group will oversee the action plan and report into CMT.

There are individual posts who will hold responsibilities for various aspects of compliance and assurance under the Act.

The Executive Director of Public Health and Health Policy will hold executive responsibility.

The Act specifies relevant sites which it applies to as those where the maximum number of people on site at any time is between 200-800 (Standard Tier) and over 800 (Enhanced Tier). Individuals responsible for those sites (Site Directors) will also hold statutory responsibility for compliance and assurance.

Guidance

Formal guidance is still awaited from SIA however the measures in the Act are aimed at ensuring the risk of a terrorist incident is assessed, measures taken to prevent or mitigate the impact of such an attack and to ensure that public and staff are protected from the consequences of an attack.

There are 4 main themes where plans are required for each site – Evacuation, Invacuation, Lockdown and Communication.

Action Plan Levels of Assurance

The Action Plan should be measured against the following levels of assurance.

High level of assurance	Medium level of assurance	Low level of assurance
❖ Currently on track to meet objective and measurements of success ❖ Currently on track to meet agreed timescales and within allocated resources including staffing ❖ No interventions required at this time	❖ Some interventions required for objective to remain on track i.e. Input and oversight from SMT, additional resourcing	❖ Objective and/or success measurement at risk of not being completed within timeframe and/or within allocated resources ❖ Interventions required i.e. Increased staffing, other resources ❖ Internal influences impacting on success ❖ External influences impacting on timeframe i.e. **P**olitical, **E**conomic **S**ocial, **T**echnological, **L**egal, and **E**nvironmental (PESTLE) factors.

Key Deliverables for 2026

1. Priorities for 2026						
Ref	**Topic**	**Success Measurement**	**Lead**	**Timescale**	**Update**	**Level of Assurance**
1.1	**Governance** Establish governance for the requirements of the Act including: Executive Lead Identify responsible post-holders Create Action Plan Establish NHSL SLWG	Identify and brief Executive Lead Identify and brief responsible post-holders Action plan created and approved SLWG established Site groups established Deliver compliance audit and assurance protocol	Executive Lead E&F Resilience Site Directors	Throughout 2026	Executive Lead identified and briefed – February 2026 Action Plan drafted March 2026 Responsible post holders identified	

	Establish working groups on each Standard or Enhanced site. Ensure a system to ensure ongoing compliance, audit and assurance Development of a list of NHSL sites showing which are in Enhanced or Standard tiers.		E&F		August 2026 – Action agreed to develop list of in scope NHS sites September 2026 – List of sites in progress. Change of E&F Lead.	
1.2	**Risk Assessment** Risk assessment re the context of potential threat from terrorist attack.	Risk assessment complete and approved	E&F	Q1 2026	August 2026 - E&F to incorporate Protect UK risk assessments into security risk assessments September 2026 – Work ongoing continues with risk assessments	
1.3	**Site assessments** All sites which are either Standard or Enhanced to be assessed. Aspects of assessment to include Vulnerability Physical security Security staffing.	All sites assessed and recommendations identified	E&F	Throughout 2026	August 2026 – E&F to work with site teams to complete Risk Assessments including vulnerability, physical security and staffing. September 2026 – Work ongoing	
1.4	**Plans** Review Controlled Movement and Access plans to ensure	Plans are approved by SRG	Resilience Team	Throughout Q1 and Q2 2026	A review of these plans is under way by the Resilience Team. Engagement with sites and E&F	

	they are compliant with the Act. Plans will focus on Evacuation Invacuation Lockdown Communication				to continue through Q1 and Q2 2026 August 2026 – meetings being arranged to review existing CMAP plans. CMAP plans being created for sites with no current plan September 2026 – Updating of CMAP Plans continue across sites. Sites with no plan identified with support in place.	
1.5	**Training** Best practice to be examined via partner agencies Appropriate staff to receive awareness training on legislation and related duties A general security Turas package is available but not mandatory training at present Resilience will focus on CMAP for control room exercises through 2026 Consider Security notifications via individual laptops and phones	All staff have received appropriate training CMAP plans to be exercised	Resilience E&F eHealth	Throughout 2026	Assessment to be made of levels of training for staff groups. Identification of staff groups – security / porters etc who have enhanced responsibilities. Consideration of existing security training package to be made mandatory	

Terrorism (Protection of Premises) Act 2025 (Martyn's Law)
Short Life Working Group
Terms of Reference

1. Purpose

The purpose of this group is to ensure that NHS Lothian is prepared for the implementation and enforcement of the Terrorism Protection of Premises Act (Martyn's Law) in April 2027.

The group will:

- Ensure a consistent, risk-based approach to protecting patients, staff and visitors from terrorism
- Oversee preparedness arrangements across all relevant sites, services and functions
- Provide assurance to senior leadership that statutory duties are being met

2. Key Responsibilities

- Develop and implement an Action Plan
- Identify and assess locations and services in line with requirements of the Act
- Identify any physical security measures required
- Support the development and implementation of terrorism risk assessments
- Ensure incident response and measures to facilitate Lockdown, Evacuation, Invacuation and Communication procedures are in place
- Ensure training and awareness programmes are delivered
- Promote a culture of vigilance and preparedness
- Monitor compliance with legislation and guidance
- Oversee testing and exercising of plans

3. Reporting Arrangements

- This SLWG operates as a sub-group to the Strategic Resilience Group (SRG). The SRG chaired by the Director of Public Health (Responsible Individual) will oversee the action plan and report into CMT, providing regular updates on progress, risks and assurance. This will ensure appropriate senior oversight of implementation and enable alignment with wider organisational resilience priorities.
- Risks, issues and dependencies identified through the Group's work will be formally recorded and managed in line with NHS Lothian's risk management processes. Significant risks, gaps in compliance, or resource pressures will be escalated through the appropriate governance channels to ensure visibility and timely decision-making at a senior level.
- The Group will be responsible for producing quarterly updates to SRG range of outputs to support assurance and governance requirements. This will include regular progress reports against the Action Plan, updates on risk and mitigation measures, training and awareness compliance data, and contributions to wider organisational assurance reporting, including any national or statutory returns where required.

- All meetings of the Group will be conducted using a formal agenda and will be supported by clear documentation, including an action log. These will be circulated in a timely manner to members and relevant stakeholders to support transparency, accountability and effective communication. Actions and key decisions will be tracked to completion, and relevant information will be shared with associated governance groups and senior management teams as appropriate.

4. Membership

The SLWG will be chaired by [redacted] Director of Estates and Facilities
The Deputy Chair will be [redacted] Head of Resilience

Group members:

[redacted]

5. Conduct of Business

Key behaviours

- All members of the SLWG are expected to adopt and demonstrate behaviours in line with NHS Lothian's core values.
- All members of SLWG will attend meetings well prepared. It they are unable to attend then it is their responsibility to ensure that a deputy attends on their behalf.
- All members will be encouraged to contribute to discussions and accept actions according to their area of responsibility.
- Members are expected to ensure information and actions are communicated to their local teams and fed back to SLWG in a timely fashion.
- Deliberations at times will be confidential and all members will be expected to act accordingly and apply judgement when reporting discussions to others.
- Joint decision making and shared ownership is expected

Meetings:

Meetings will be held monthly via MS Teams. The Chair may at any time convene additional meetings of the group.

Action Notes:

- Papers must be submitted to admin 2 weeks before the meeting date, and the agenda, papers and action log will be issued one week before each meeting.
- Papers from members and correspondence re SLWG matters should be submitted to [redacted]@nhs.scot

Agreed at SLWG	Date: 11 11/08/2026	Version control	V1.0