

LOCKDOWN POLICY

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| Version: | 3 |
| Date issued: | June 2016 |
| Review date: | April 2018 Extended to Nov 2018 |
| Applies to: | All Trust staff involved in lockdown and key partner agencies |

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DOCUMENT CONTROL

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1. INTRODUCTION

- 1.1 The NHS is exposed to a range of threats and hazards requiring its premises to be locked down and people and property to be either excluded from or controlled in buildings.
- 1.2. Lockdown is the process of controlling the movement and access – both entry and exit – of people around a Trust site in response to an identified risk, threat or hazard which might impact on the security of people who access our services, staff and assets or, indeed, the capacity of that facility to continue to operate. A lockdown is achieved through a combination of physical security measures and the deployment of staff.
- 1.3. In the event of a terrorist incident, the response by the NHS will be of paramount importance in protecting its staff, patients and visitors, and its properties and assets.
- 1.4. The principles contained in this policy will help to ensure the safety and security of all of the above in the event of a terrorist incident or security breach. A decision to lockdown may also take place as a result of a major incident or when Trust buildings need to be evacuated.
- 1.5. This policy should be read in conjunction with the Trust evacuation, incident response and business continuity management plans.

2. PURPOSE AND RATIONALE

- 2.1 The purpose of this policy is to provide guidance to managers and staff to complete site/building/security profiles to enable them to achieve a lockdown of the site they manage/occupy. It is important to remember many sites/buildings have multi-occupancy arrangements and these must fit with the local lockdown plan.
- 2.2 The policy objectives are to:
 - offer lockdown guidance, direction and information to members of Trust staff;
 - identify Trust roles, responsibilities and resources;
 - give guidance on the development of local lockdown plans in order to ensure normal Trust services are maintained during a lockdown as far as is reasonably practicable.
- 2.3 This policy is directed at all Trust staff who may be involved in a lockdown and for them to be fully aware of lockdown and its processes and procedures and have plans in place before a lockdown occurs.
- 2.4 Services hosted on other organisations' sites will still need to develop a lockdown profile for their area. Managers of those services will need to liaise with the host organisation to establish how the overall site lockdown will impact on Trust services and its lockdown process.

3. DUTIES AND RESPONSIBILITIES

- 3.1 The following specific duties and responsibilities apply within Somerset Partnership NHS Foundation Trust.

- 3.2 The **Chief Executive** has overall responsibility for ensuring the Trust has lockdown plans in place and will ensure adequate resources are in place.
- 3.3 The **Director of Governance and Corporate Development**, as the Emergency Planning, Response, and Recovery (EPRR) Accountable Officer will:
- provide reports on lockdown to the Trust Board;
 - ensure lockdown plans are regularly tested to ensure the Trust response is as effective as possible;
 - ensure all lockdown incidents are reviewed so that lessons are learned.
- 3.4 The **Chief Operating Officer**, or his nominated deputy, will lead the tactical response to the lockdown.
- 3.5 The **Heads of Division** are responsible for ensuring lockdown is embedded within their areas of service and their staff are trained and familiar with their respective roles.
- 3.6 The **Head of Corporate Business**, as the EPRR Emergency Planning Officer, has responsibility for:
- ensuring lockdown plans are incorporated into local evacuation and business continuity management planning;
 - supporting managers to test and exercise their local lockdown plans;
 - updating members of the Executive Management Team;
 - assessing the capability and functionality of security arrangements by coordinating the completion of site, buildings, and security profiles and associated risk assessments;
 - retaining copies of local Lockdown plans.
- 3.7 The **Director of Finance and Business Development** is responsible for recording additional expenditure arising when preparing for and during a lockdown and for ensuring compensation arrangements for the Trust, including insurance, are sought at the earliest opportunity.
- 3.8 **Senior Managers, Managers and Matrons** will:
- develop lockdown site/building and security profiles, noting any lockdown risks on their local risk registers, and local lockdown plan for their site/department taking into consideration local circumstances and the services provided. Managers must keep in mind if there is a change to the services provided at a site, the lockdown plan must be reviewed to ensure it reflects the new situation.
 - determine if a lockdown (or partial lockdown) is achievable;
 - where necessary, identify appropriate resources to undertake a lockdown;
 - share details of the agreed lockdown plan with their teams to ensure if, or when implemented, all staff are aware of their roles and responsibilities;
- 3.9 The **Fire Officer** will provide advice on fire safety and the operation and functionality of fire doors. Liaison with the local fire service may also be necessary.
- 3.10 The **Estates Team** will lead on issues relating to the functionality of buildings and building resilience. They have an in-depth knowledge of the structure and

various systems which operate within any building and their knowledge is invaluable when determining whether it is possible to achieve a full or partial lockdown.

- 3.11 The **Communications Team** will help to ensure a controlled message is given to staff, people who access our services and visitors within the Trust, and to the outside world as well. The local media can be very helpful in directing people away from a site or building. The Communications Team will be able to seek their assistance, so it is important that they are involved and kept up to date over the situation.
- 3.12 All **Members of Staff** have a responsibility to take reasonable care of their own safety and security, as well as the safety and security of others and to participate as required in the event of a lockdown. In order to support a lockdown, staff are likely to have to carry out activities outside of their normal job description but which they are competent to carry out.

4. DEFINITIONS

- 4.1 **Lockdown:** In locking down a building, there are three key elements: preventing the **entry, exit and movement** of people on a Trust site, part of a Trust building or in a building or site where Trust services are provided. In preventing the entry, exit or movement of people, or a mixture of the three, the overarching aim of implementing a **lockdown** is to either exclude or contain staff, patients and visitors.
- 4.2 **Partial Lockdown (Static or Portable)** is the locking down of a specific building or part of a building. The decision to implement a partial lockdown will usually be in response to an incident. This response will help to ensure people and property are protected. A partial lockdown which may have been **static** in nature may evolve into a **portable lockdown** whereby an ongoing lockdown is moved from one location to another.
- 4.3 A **Progressive Lockdown** is a step-by-step lockdown of a site or building in response to an escalating situation.
- 4.4 A **Full Lockdown** is the process of preventing freedom of entry to and exit from either an entire Trust site or specific building.

5. RISK ASSESSMENT

- 5.1 Safety is of paramount importance and the assessment of risk to staff and others should be a continual process.
- 5.2 The Trust Risk Management Policy and Strategy outlines arrangements for identification, assessment and management of risk.
- 5.3 Risks identified will be assessed using the Trust's Risk Assessment procedure (as identified in Risk Management Policy). The Local Security Management Specialist (LSMS) and Risk Manager will support managers in the risk assessment process and liaise with them to determine risk reduction measures and the action plan to be implemented to minimise continued exposure.
- 5.4 Risks associated with lockdown will be documented within local risk registers with appropriate strategies to manage them clearly set out.

6. LEGAL FRAMEWORK

6.1 Although full and partial lockdown through access control measures is not a new concept to the NHS, there are specific concerns around the management of lockdown which require consideration. These include:

- Equality Act 2010;
- Emergency regulations under the Civil Contingencies Act;
- Health and Safety at Work Act;
- Human Rights Act 1998: Article 5 - right to liberty and Article 8 - right to respect for private and family life;
- Mental Health Act 1983;
- Mental Capacity Act 2005;
- Public Health (Control of Disease) Act 1984);
- Committing offences such as theft, criminal damage, firearms offences.

6.2 It is important staff are aware during lockdown they have no legal right to contain members of the public to an area unless they have been detained under the Mental Health Act or have been assessed as lacking capacity under the Mental Capacity Act. If people elect to exit, they must be directed to the safest route out of the building.

6.3 A lockdown, although a temporary measure, could still be construed as depriving a person of their liberty and as such, the above legal framework should be borne in mind.

7. LOCKDOWN PROCESS

7.1 The aim of lockdown is to create a cordon around an affected area in order control of access by exclusion and containment using sustainable measures in order to control:

- people, property and equipment from entering and/or leaving a building or site or parts thereof;
- the movement of people, property and equipment around a site and around and in a building or part of a building.

Who Can Implement a Lockdown?

7.2 A lockdown may be considered in response to a range of situations, many of which require immediate lockdown. If it is clear if an incident is happening outside a Trust building or site, the most senior member of staff present has the authority to make a decision to lockdown as an immediate response to protect patients, staff and property. Equally, the lockdown can be called by the On Call Manager as part of the Trust's Incident Response Plan in response to a larger or impending risk. Any lockdown will involve reporting to the On-Call Manager / On-Call Director and it is this person who decides if the lockdown should continue and when it is to end.

Controlling Access / Egress during Lockdown

7.3 When following assigned duties during a lockdown, all staff must remember because most Trust sites and buildings are usually open to the public,

members of the public have an implied licence to enter them. However, the Trust has the right to refuse access when required.

- 7.4 While the Trust can give direction within its buildings, unless the member of staff is exercising a legal procedure which gives them that power; i.e. preventing a patient from leaving when they are already 'sectioned' under The Mental Health Act, or invoking the emergency holding power of section 5. A patient subject to an authorisation under the Deprivation of Safeguards may also be prevented from leaving. There may be circumstances when a lockdown is required. If this occurs, Trust staff can only appeal to individuals to stay in the site and/or building during a lockdown. If individuals choose to leave, then they must be allowed to leave, with the exception of patients legally detained or when the person lacks the capacity to choose to leave and it is in their best interests that they remain. In an emergency lockdown procedure there may not be time to instigate a DoLS authorisation, so people who lack the capacity to consent to stay in a locked environment should be treated in their best interests (even if that means depriving them of liberty) until such time as the correct legal process can be followed..

Developing a Local Lockdown Plan

- 7.5 Creating a local lockdown procedure is a four step process:
- complete the Site and Building Profiles – these will help assess the risks and the complexities of locking the building down;
 - choose the appropriate lockdown action card – the lockdown action card is an aide memoire for staff to use if a lockdown is required;
 - communicate with all staff – all staff should be aware of what is needed when a lockdown is required - this should be discussed at team meetings and regularly updated;
 - practice – at least an annual tabletop exercise, and a full lockdown exercise once every 3 years, should be completed to ensure the plan works and staff are aware of their duties.
- 7.6 By using this policy's appendices, the manager of each building/site, with the Emergency Planning Officer/LSMS, will develop a local lockdown plan. Each building or site will have a local lockdown plan and these will be reviewed by the site/building manager at least every 2 years or sooner as required by organisational changes.

Site Profile (Appendix 1)

- 7.7 Develop a Site Profile, taking into account the physical geography of the building or site for example:
- the size of the site;
 - its perimeter;
 - access and egress points;
 - location and route of communications and the number of buildings on the site;
 - up to date site maps.
- 7.8 Up to date site maps, floor plans, maps and satellite images (e.g. from Google Earth), together with a live walk through, will assist the development of this

profile. This should be done in conjunction with a member of the estates team, senior manager and, where required, the Emergency Planning Officer/LSMS.

Building and Security Profiles (Appendix 2 and 3)

7.9 Create a building profile to review the use and capability of the buildings to lockdown either fully, partially or progressively. This will include:

- types of doors and windows;
- amount of glazing and ability to resist a blast or forced entry;
- ability to control access either manually or automatically;
- building shape, height and condition for surviving a blast;
- whether it has air conditioning throughout which could spread a contaminant;
- where power supplies are housed.

Refuge

7.10 As part of the assessment, a room should be identified which has a landline telephone, is lockable and ideally has minimal windows. This will be the safest area in the event of a major assault against the building. Although unlikely, it is preferable to have identified this room prior to it being required.

Lockdown Procedure Checklist (Appendix 4)

7.11 The lockdown procedure checklist is an aide memoire to ensure the local procedure has considered all aspects required. If after completing the checklist, any aspect has a NO answer, then this should be rectified.

Recording

7.12 Once managers have completed their local lockdown assessments, they must develop a written, tested and easily accessible plan to be held in the building in a folder clearly marked "LOCKDOWN/EVACUATION AND SHELTER". All staff must know where this folder is kept and it should be easily accessible to all staff.

7.13 An electronic copy should also be available locally and will also be held centrally by the Trust. Plans must include:

- architectural and services drawings;
- IT web maps such as Google Earth and Google Map or equivalent website;
- relevant Action Card, see below.

Lockdown Action Card (Appendix 5 – 8)

7.14 Using all available information gained from the assessments detailed above, the manager will choose the most appropriate action card from the following four choices:

- **Lockdown Action Card 1** (Appendix 5): for a building where the Trust is the only occupier and is fully responsible for the building.
- **Lockdown Action Card 2** (Appendix 6): for a building which has multiple different occupants / teams, but is predominantly or entirely controlled by the Trust. This requires agreement amongst all occupants.

- **Lockdown Action Card 3** (Appendix 7): for areas which are controlled by one manager, but involve multiple buildings or a large building with multiple, separate areas within it.
- **Lockdown Action Card 4** (Appendix 8): for buildings / areas where the Trust is not the controller for the building. This requires an agreement with the building manager/owner to ensure Trust staff and patient safety will be maintained and to comply with the policies and procedures put in place by the building manager/owner.

Lessons Learnt

- 7.15 Lockdown incidents should be reported on the DATIX untoward event reporting system and to the Health and Safety and Security Management Group through the Head of Corporate Business.
- 7.16 Managers (or nominated other person) will conduct a full debrief and evaluation and report their findings to the Trust within 14 days of the lockdown ending. This may require using the Trust SIRI process.

8. TRAINING AND EXERCISING

- 8.1 Training will take place within the context of an EPRR training needs analysis undertaken by the Trust and agreed by the Trust Executive Management Team. An EPRR training strategy is in place to ensure staff are confident in their roles during an evacuation and shelter incident.
- understand the role they are to fulfil in the event of an incident;
 - have the necessary competences to fulfil that role;
 - have received training to fulfil these competencies.
- 8.2 Training and exercising enables the Trust to respond appropriately to a shelter and/or evacuation scenario and will be a formal part of local staff training and be part of an overall programme including suitable exercises to support the requirements of the Trust and the likely risks faced.
- 8.3 Where evacuation equipment is provided, staff will be adequately and regularly trained in its use and there should be sufficient numbers of adequately trained staff on duty at all times.

9. MONITORING COMPLIANCE AND EFFECTIVENESS

- 9.1 This policy will be regularly updated to take account of organisational changes and new guidance.
- 9.2 Each manager should ensure changes to the local lockdown plan within their area of responsibility are notified promptly to the Head of Corporate Business:
- at least annually;
 - following organisational change;
 - when an evacuation and shelter incident occurs;
 - after any test or exercise of the plan [validation].
- 9.3 Managers will provide reports on the outcomes of exercises to test local lockdown plans including a list of participants.

- 9.4 The Head of Corporate Business will provide quarterly EPRR reports to the Regulation Governance Group and an annual EPRR Assurance Report to the Trust Board.

10. REFERENCES, ACKNOWLEDGMENTS AND ASSOCIATED DOCUMENTS

10.1 References

Lockdown Guidance – Protecting your NHS- Security Management Service
<http://www.nhsbsa.nhs.uk/security>

The Department of Health's Emergency Preparedness Division:
<https://www.gov.uk/browse/citizenship/government/emergencies-preparation-response-and-recovery>

The website <https://www.gov.uk/resilience-in-society-infrastructure-communities-and-businesses> exists to provide a resource for civil protection practitioners, supporting the work which goes on across the UK to improve emergency preparedness.

Preparing for Emergencies is a government website that contains general information about preparing for an emergency:
http://www.direct.gov.uk/prod_consum_dg/groups/dg_digitalassets/@dg/@en/documents/digitalasset/dg_176618.pdf

The London Resilience Partnership works to ensure that London is ready to cope with any incident that might occur – whether natural, accidental or malicious: www.londonprepared.gov.uk

Public Health England provides information on identifying and responding to threats and preparing for them:
<https://www.gov.uk/government/organisations/public-health-england>

Chapters 14 and 17 of the *NHS Security Management Manual* cover the security of CBRN material.

10.2 Cross reference to other procedural documents

Major Incident Plan

Business Continuity Management and Service Recovery Policy and corporate, directorate and local plans.

Learning Development and Mandatory Training Policy

Risk Management Policy and Procedure

Mandatory Training Matrix (Training Needs Analysis)

Untoward Event Reporting Policy and procedure

All current policies and procedures are accessible in the policy section of the public website (on the home page, click on 'Policies and Procedures'). Trust Guidance is accessible to staff on the Trust Intranet.

11. APPENDICES

11.1 For the avoidance of any doubt the appendices in this policy are to constitute part of the body of this policy and shall be treated as such.

| | |
|------------|--|
| Appendix 1 | Site Profile |
| Appendix 2 | Building Profile |
| Appendix 3 | Security Profile |
| Appendix 4 | Lockdown Procedure Checklist |
| Appendix 5 | Action Card 1: Trust-Only Occupied Building |
| Appendix 6 | Action Card 2: Trust Controlled Multi Occupancy Building |
| Appendix 7 | Action Card 3: Trust Multi Building Site |
| Appendix 8 | Action Card 4: Externally Controlled Multi Occupancy Site/Building |
| Appendix 9 | Post Lockdown Evaluation Template |

SITE PROFILE FOR: _____

| CHARACTERISTIC | INFORMATION REQUIRED | STATUS |
|---|---------------------------------|--------------------|
| LOCATION | | CHECKED BY DATE |
| AREA | | CHECKED BY DATE |
| SITE CHARACTERISTICS | | CHECKED BY DATE |
| LANDSCAPE SUMMARY | | CHECKED BY DATE |
| LOCAL ROAD ACCESS | | CHECKED BY DATE |
| PUBLIC TRANSPORT ACCESS | | CHECKED BY DATE |
| TRAFFIC MOVEMENT AROUND SITE | | CHECKED BY DATE |
| NEIGHBOURING LAND ISSUES | | CHECKED BY DATE |
| CAR PARK FACILITIES | | CHECKED BY DATE |
| NUMBER OF BUILDINGS ON SITE AND DESCRIPTION | | CHECKED BY DATE |
| TOTAL NUMBER OF OFFICIAL AND UNOFFICIAL ACCESS AND EGRESS POINTS ON THE TRUST SITE | | CHECKED BY DATE |

APPENDIX TWO

BUILDING PROFILE
FOR: _____

| CHARACTERISTIC | INFORMATION REQUIRED | STATUS |
|---|-----------------------------|--------------------|
| DESCRIPTION OF BUILDINGS PRESENT USE | | CHECKED BY DATE |
| BASIC SHAPE | | CHECKED BY DATE |
| HEIGHT OF BUILDING, NUMBER OF FLOORS AND THEIR USE | | CHECKED BY DATE |
| CONDITION OF BUILDING | | CHECKED BY DATE |
| CORRIDORS | | CHECKED BY DATE |
| ACCESS AND EGRESS POINTS IN THE BUILDING | | CHECKED BY DATE |
| CAR PARK FACILITIES FOR THE BUILDING | | CHECKED BY DATE |
| EXTERNAL AND INTERNAL DOORS | | CHECKED BY DATE |
| AIR CONDITIONING FACILITIES AND VENTS | | CHECKED BY DATE |
| HOW IS THE BUILDING POWERED | | CHECKED BY DATE |
| WHO OWNS THE BUILDING | | CHECKED BY DATE |

APPENDIX THREE

SECURITY PROFILE

FOR: _____

| CHARACTERISTIC | INFORMATION REQUIRED | STATUS |
|---------------------------------|----------------------|--------------------|
| EXTERNAL DOORS TO MAIN BUILDING | | CHECKED BY DATE |
| INTERNAL DOORS | | CHECKED BY DATE |
| WINDOWS | | CHECKED BY DATE |
| CCTV | | CHECKED BY DATE |
| SECURITY LIGHTING | | CHECKED BY DATE |
| ALARMS FOR SPECIFIC AREAS | | CHECKED BY DATE |
| SECURITY FOR CAR PARKING | | CHECKED BY DATE |
| SECURITY STAFF | | CHECKED BY DATE |

LOCKDOWN PROCEDURE CHECKLIST

| PRELIMINARIES | YES/NO |
|---|--------|
| Is there a building manager? | |
| Were they involved in this assessment and procedure? | |
| Have you completed the site/building/security profile? | |
| Have you chosen the most suitable lockdown action card? | |
| Have you printed it off with the Incident Response Plan and Evacuation/Shelter Action cards? | |
| Have you had discussions with other building occupiers? | |
| Is the Lockdown and Evacuation/Shelter plan in a readily accessible location? | |
| ASSESSMENT | YES/NO |
| Are all the doors lockable? | |
| Are all the windows lockable? | |
| Is your power supply protected as much as practicable? | |
| Do you know how to turn off the air conditioning system (if fitted)? | |
| Have you designated a single entrance for use in emergencies? | |
| KNOWLEDGE | YES/NO |
| Have all staff been notified of lockdown and what it is? | |
| Do the Staff know where the emergency and lockdown action cards are? | |
| Do the staff know who is to take charge if the manager is absent? | |
| Do all staff know where the designated refuge office is (land line, mobile friendly and lockable)? | |
| Do the staff know who to report to (Manager or On-Call Director/On-Call Manager) | |
| CHECKING | YES/NO |
| Testing your lockdown procedures (suggest the same time as your business continuity management plan test) | |

| | |
|--|---------------|
| Have you chosen a date and time? | |
| Have you informed the Emergency Planning Officer and the LSMS? | |
| Have you arranged a debrief meeting? | |
| PROCEDURE | YES/NO |
| Is there a fast and effective process for notifying all the staff of a lockdown? | |
| Do staff have access to the lockdown action cards? | |
| Do staff know which windows and doors they are responsible for? | |
| Do staff know which door is to be manned to control access and egress? | |
| Do staff know which telephone is going to be used by the Trust to contact them? | |

LOCKDOWN ACTION CARD 1 TRUST-ONLY OCCUPIED BUILDING

COMMUNICATE LOCKDOWN STATUS (CONTROL)

- Lockdown instruction received, authorised by (identify Authoriser), and for what risk.
- Confirm lockdown with authoriser.
- Start incident log/book.
- Communicate to all building occupants “Lockdown” via all methods available.
- Ensure “this is not a drill / practice” is communicated.

IMPLEMENT ASSIGNED RESPONSIBILITIES. (CONTROL)

- If required, call 999 and request assistance.
- Out of Hours, notify the Trust Duty On-Call Director of building status. Out of Hours, notify the Trust Duty On-Call Director, Risk and Resilience Officer, LSMS of building status.
- Lock all exit (external windows and doors) points to the building.
- Assign duties of staffing main access point for emergency access via identity card only (excluding Chemical, Biological, Radioactive or Nuclear (CBRN) incident).
- Hand over control to emergency services where it is a CBRN incident.
- Assign duties of controlling exit from the building where patients and visitors are present.
- Notify Head of Division/Director of lockdown status.

BUILDING OCCUPANTS

- If riot or malicious individuals outside, close any curtains / blinds, stay away from windows and doors. Shut off lights. Be quiet.
- Do not use landline or mobile devices for anything other than lockdown.
- Await instruction, updates and / or all clear.
- Use supplies from lockdown kit.

RECOVERY

- Resume normal operations ASAP.
- Ensure any after care where required and debriefings are carried out.

LOCKDOWN ACTION CARD 2

TRUST CONTROLLED MULTI OCCUPANCY BUILDING

COMMUNICATE LOCKDOWN STATUS (CONTROL)

- Lockdown instruction received, authorised by (identify Authoriser), and for what risk.
- Confirm lockdown with authoriser.
- Start incident log/book.
- Communicate to all building teams/occupants “Lockdown” via all methods available.
- Ensure “this is not a drill / practice” is communicated.

IMPLEMENT ASSIGNED RESPONSIBILITIES. (CONTROL)

- If required, call 999 and request assistance if required.
- Establish senior team member (all teams occupying the building) lockdown team as previously practiced.
- Out of Hours, notify the Trust Duty On-Call Director of building status. Out of Hours, notify the Trust Duty On-Call Director, Risk and Resilience Officer, LSMS of building status.
- Lock all exit (external windows and doors) points to the building.
- Assign duties of staffing main access point for emergency access via identity card only (excluding Chemical, Biological, Radioactive or Nuclear (CBRN) incident).
- Hand over control to emergency services where it is a CBRN incident.
- Assign duties of controlling exit from the building where patients and visitors are present.
- Notify Head of Division/Director of lockdown status.

BUILDING OCCUPANTS

- If riot or malicious individuals outside, close any curtains / blinds, stay away from windows and doors. Shut off lights. Be quiet.
- Do not use landline or mobile devices for anything other than lockdown.
- Await instruction, updates and / or all clear.
- Use supplies from lockdown kit.

RECOVERY

- Resume normal operations ASAP.
- Ensure any after care where required and debriefings are carried out.

LOCKDOWN ACTION CARD 3

TRUST MULTI BUILDING SITES

COMMUNICATE LOCKDOWN STATUS (CONTROL)

- Lockdown instruction received, authorised by (identify Authoriser), and for what risk.
- Confirm lockdown with authoriser.
- Start incident log/book.
- Communicate to all buildings teams/occupants “Lockdown” via all methods available.
- Ensure “this is not a drill / practice” is communicated.

IMPLEMENT ASSIGNED RESPONSIBILITIES. (CONTROL)

- If required, call 999 and request assistance if required.
- Establish senior team member (all teams occupying the building) lockdown team as previously practiced.
- Out of Hours, notify the Trust Duty On-Call Director of building status. Out of Hours, notify the Trust Duty On-Call Director, Risk and Resilience Officer, LSMS of building status.
- Lock all exit (external windows and doors) points to the building.
- Assign duties of staffing main access point for emergency access via identity card only (excluding Chemical, Biological, Radioactive or Nuclear (CBRN) incident).
- Hand over control to emergency services where it is a CBRN incident.
- Assign duties of controlling exit from the building where patients and visitors are present.
- Notify Head of Division/Director of lockdown status.

BUILDING OCCUPANTS

- If riot or malicious individuals outside, close any curtains / blinds, stay away from windows and doors. Shut off lights. Be quiet.
- Do not use landline or mobile devices for anything other than lockdown.
- Await instruction, updates and / or all clear.
- Use supplies from lockdown kit.

RECOVERY

- Resume normal operations ASAP.
- Ensure any after care where required and debriefings are carried out.

LOCKDOWN ACTION CARD 3

EXTERNALLY CONTROLLED MULTI OCCUPANCY SITE/BUILDING

- Carry out tasks detailed in Building Manager's policy. If no lockdown in place, share this card

BUILDING MANAGER TO COMMUNICATE LOCKDOWN STATUS (CONTROL)

- Lockdown instructed/authorised by (identify authoriser), and for what risk.
- Confirm lockdown with authoriser.
- Start incident log/book.
- Communicate to all buildings teams/occupants "Lockdown" via all methods available.
- Ensure "this is not a drill / practice" is communicated.

IMPLEMENT ASSIGNED RESPONSIBILITIES. (CONTROL)

- If required, call 999 and request assistance if required.
- Establish a senior team member of each lockdown team as previously practiced.
- Out of Hours, notify the Trust Duty On-Call Director of building status. Out of Hours, notify the Trust Duty On-Call Director, Risk and Resilience Officer, LSMS of building status.
- Lock all exit (external windows and doors) points to the building.
- Have duties assigned by building manager staffing main access point for emergency access via identity card only (excluding Chemical, Biological, Radioactive or Nuclear (CBRN) incident).
- Hand over control to emergency services where it is a CBRN incident.
- Assign duties of controlling exit from the building where patients and visitors are present.
- Notify Head of Division/Director of lockdown status.

BUILDING OCCUPANTS

- If riot or malicious individuals outside, close any curtains / blinds, stay away from windows and doors. Shut off lights. Be quiet.
- Do not use landline or mobile devices for anything other than lockdown.
- Await instruction, updates and / or all clear.
- Use supplies from lockdown kit.

RECOVERY

- Resume normal operations ASAP.
- Ensure any after care where required and debriefings are carried out.

POST LOCKDOWN EVALUATION TEMPLATES

| Question? | Yes | No | Actions(s) |
|---|-----|----|------------|
| THE LOCAL LOCKDOWN PLAN | | | |
| Did the local lockdown alert system work? | | | |
| Were all appropriate people informed? | | | |
| If so, how long did it take for them to receive the information? | | | |
| Was the sequence for closing door/windows correct? | | | |
| During the lockdown, was communication received quickly enough? | | | |
| Was the communication with the rest of the Trust adequate? | | | |
| Throughout the lockdown, were business continuity arrangements satisfactory/ | | | |
| Question? | Yes | No | Actions(s) |
| SECURITY FACTORS | | | |
| Was an alarm system activated at the onset of the lockdown? Did it work effectively? | | | |
| Did all of the locks function? Were all of them appropriate for the lockdown (for example, in terms of strength?) | | | |
| Where appropriate, did all of the external doors lock? | | | |
| Where appropriate did all of the internal doors lock? | | | |
| If appropriate, were any windows locked during the lockdown? If so how effective was this? | | | |
| Were all identified access and egress points secured? | | | |

| Question? | Yes | No | Actions(s) |
|---|-----|----|------------|
| If appropriate, could corridors be secured? | | | |
| If it was a manual lockdown, was the site, building secured? | | | |
| If an access control system was used, was the site/building locked down? | | | |
| Were there any breaches in the lockdown? If so, where were they and were they contained? | | | |
| Did security lighting support the Lockdown? If so how? | | | |
| If appropriate, were the car parking areas secured? | | | |
| If appropriate, during the Lockdown, was the air conditioning system successfully turned off? | | | |
| Question? | Yes | No | Actions(s) |
| WORKFORCE | | | |
| Were all resources in the correct working order? | | | |
| Did staff take up their lockdown location position in the agreed timeframe? | | | |
| Was there adequate number of staff to achieve the lockdown? If not, how many extra staff will be required? Where may they be sourced? | | | |
| Were communications appropriate? For example, were communications sent to the right people at the right time? | | | |
| Was joint working between internal and external stakeholders achievable? | | | |
| Were there any crowd management issues? If so what was the role of the staff in managing these? | | | |
| During the lockdown, did staff consider their own resilience? | | | |
| Has a staff de-briefing session been arranged to discuss their roles during the lockdown? | | | |