EMS Ambulance Event Medical Services



Medical Plan

Event	Diynamic 2018	00
Date	8 th September 2018	4
Venue	Morden Park, SM4, London	1
Event Organiser/Promoter	GoToLive	
Event Manager	Ryan Esson	/ u
Medical Manager	Mike Morgan	A
Document Prepared by	Tony Howsen	1
Date of Issue	09/08/2018	1
Version Number	1	10

This document contains information which is confidential or privileged and is intended solely for the use of the organisations involved in this event.

EMS will make every effort to ensure all the information contained in this document is true and correct at the time of issue. Due to the nature of the event certain elements of this document may be subject to change at short notice.

No other person or organisation is authorised to change, copy, retain, forward or distribute this document without the consent of EMS.

CONTENTS

Section 1	Introduction
1.1	Statement of Intent
1.2	Key Personnel
1.3	Method Statement
1.4	Objective
1.5	Complaints
Section 2	Event Information
2.1	Overview
2.2	Location
2.3	Operational Times
2.4	Capacity
2.5	Audience Profile
2.6	Event Website
2.7	Site Plan
Section 3	Operational Information
3.1	Staffing Levels
3.2	First Aid Post Locations
3.3	Ambulance Vehicles
3.4	On site vehicle operation
3.5	Receiving Hospitals
3.6	Vehicle Embargo
3.7	Access & Egress
3.8	Emergency & Evacuation Procedures
3.9	Operational Briefing for all Staff
3.10	Communications
3.11	Appearance of Staff Disposal of Clinical Waste
3.12	Disposal of Clinical Waste
3.13	Safeguarding of Children & Vulnerable Adults
3.14	Media
3.15	Backstage and Pit Access
3.16	Noise at Work
3.17	Casualty Figures & Documentation
3.18	Care Quality Commission (CQC)
Section 4	Major Incident Procedures
4.1	Definition
4.2	Roles and Responsibilities
Section 5	Risk Assessment
5.1	Risk Assessment

SECTION 1	INTRODUCTION	
1.1	Statement Of Intent	

Event Medical Services (EMS) has been appointed by the organiser to plan and provide the appropriate medical cover for this event in accordance with the The Event Safety Guide, Health & Safety HSG195 and relevant previous experience.

An EMS Booking Form including Terms & Conditions will be signed and accepted by the Organiser/Promoter prior to the event and this will include contact details, event details, staffing provision and any provisions to be made by the Organiser/Promoter.

1.2

EMS Event Control

Key Personnel

TIE THE STATE OF T		
1 7/-	Z	
Role	Name	Mobile Number
EMS Medical Manager	Mike Morgan	V A
EMS Event Manager (Offsite)	N/A	

TBC

	11/2/11/2014	
1.3	Method Statement	

EMS will provide all services as detailed in the medical plan, manage and coordinate these services onsite working with their subcontractors. EMS Managers are experienced and have a proven safe and traceable track record in the medical management of large concerts and events, planning, coordinating and managing of medical and first aid resources onsite. The management functions will be coordinated through a multi-agency/event control approach with all agencies onsite. EMS will provide medical services throughout the event and will respond to any reported casualties/incidents. Casualties will receive treatment at their location or be transported/accompanied to the one of the treatment areas, where they will receive treatment/observations as necessary.

Patient Report Forms will be completed for all casualties. Completed forms will be collated and securely stored in line with patient confidentiality guidelines. EMS will gather and collate injury trends and work together with safety personnel to address any health and safety issues.

1.4 Objective

By careful and professional management EMS, along with their sub-contractors will aim to minimise the effects of the event on the healthcare provision for the local population and reduce its impact on the local NHS facilities.

We will endeavour to provide:

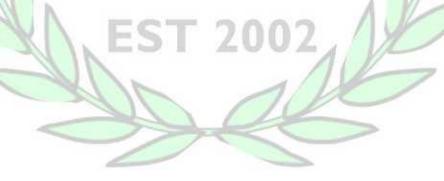
- The safe and appropriate management of persons who become ill or who are injured at the event
- Care and support to those who seek our help

This will be achieved by:

- · Regular Safety Advisory Group meetings and site visits prior to during the event
- · An effective command and control system
- · Close liaison with all medical and first aid staff
- · Strategically located first aid posts
- Utilisation of suitably trained and qualified personnel
- Suitably crewed and equipped ambulances

1.5 Complaints

Any complaints occurring at the event in relation to any of the services outlined in this plan should be directed in the first instance to the appropriate Line Manager and reported to an EMS Manager immediately. The necessary reporting procedures will be logged and the incident investigated.



Section 2 Event Information

2.1 Overview

Diynamic is a German electronic music label that holds festivals around the world. This is their first UK based event

2.2. Location

Morden Park, SM4, London

2.3 Operational Times

11.00 - 22.00

2.4. Capacity

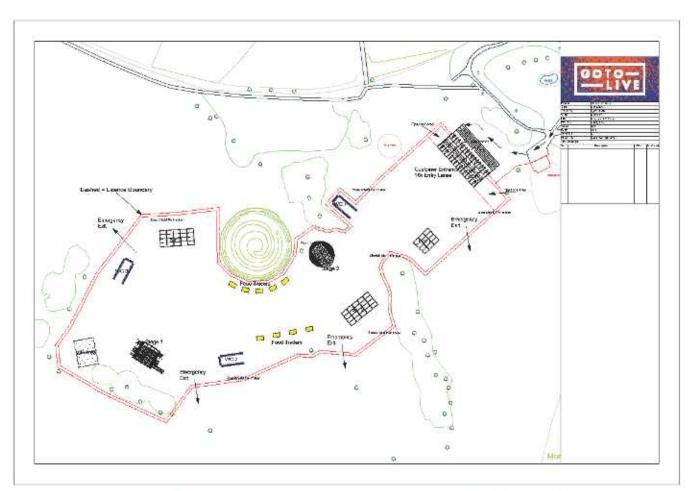
10000

2.5 Audience Profile

Predominantly young adults.

2.6 Event Website

http://www.diynamic.com/events/





Section 3	OPERATIONAL INFORMATION	

The following levels of provision are based on those as recommended by The Event Safety Guide, with due regard to previous experience of this event or similar events, the audience profile, maximum number of people likely to attend and other relevant factors

Resource Times	Resources	Quantity
1 (12	Paramedic Ambulance & Crew	2
A (//-	4x4 Ambulance & crew	0
11.00-22.00	Additional Ambulance Personnel	4
	Doctor	1
A VI	Nurse	2
	First Aid Personnel	12
\\\\	Ambulance Manager	1

3.2 Resource Locations	
------------------------	--

TBC

3.3 Ambulance Vehicles

Ambulance	2
Ambulance 4X4	0
Response Vehicle	0
Response Vehicle 4X4	0
Quad	0
Response Cycle	0
Control Unit	0

2 4	Oneita Vahiala Onesatian	
3.4	Onsite Vehicle Operation	
		8

Should an ambulance be required this will be notified through event control and will be kept to essential movement only. Should an ambulance be required within a crowded area this will be done via Event Control with steward assistance.

Audible warnings (sirens) will **NOT** be used within densely crowded areas. This attracts attention and is shown to cause crowd panic. Visual warnings (blue lights) will only be used when necessary.

3.5 Receiving Hospitals & NHS Ambulance Service

St Helier Hospital	St George's Hospital	
Wrythe Lane	Blackshaw Road	
Carshalton	London	
Surrey	Greater London	
SM5 1AA	SW17 0QT	

The above are the nearest hospital locations, however a decision regarding the receiving hospital would be taken by our Doctor on case by case basis. The above hospitals may be amended following consultation with London Ambulance Service NHS Trust.

DECISE STATE OF THE PROPERTY O	
26	Vehicle Embargo
3.6	Vehicle Embargo
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

If an essential ambulance movement is required, authorisation will be given by Event Control and they will inform the Event Manager of this movement.

Contract of the Contract of th		
3.7	А се	
3./	Access & Egress	7 7/1
	-	

Access points TBC

All staff must have appropriate identification to gain access.

3.8 Emergency & Evacuation Procedures	
---------------------------------------	--

In the event of a serious incident, for example public disorder in the immediate vicinity of the first aid post, all staff should withdraw to a safe distance until the incident has be dealt with by either stewards or police.

3.9 Operational Briefing for all Staff

All staff should be briefed either prior to arrival onsite or on arrival by their respective Line Manager who will ensure site plans and all relevant information is distributed accordingly.

All event staff must familiarise themselves with the site layout as soon as possible on arrival and identify key locations, entrances/exits. A formal debrief will be carried out on conclusion of the event.

3.10 Communications

EMS will operate an independent radio network. Strict radio procedure will be adhered to at all times by all first aid staff in attendance at the event.

Patient identifiable data must NOT be transmitted over the radio.

3.11 Appearance of Staff

All staff will be in their respective uniforms, be identifiable, carry photographic identification and wear appropriate PPE as required.

3.12 Disposal of Clinical Waste

Clinical waste will be disposed of in appropriate bags and/or containers and removed from site at the end of the event.

3.13 Safeguarding of Children & Vulnerable Adults

Lost children & Child Protection

The medical unit or first aid posts are not suitable places to look after lost children and are not the responsibility of the medical resources onsite. Should any lost child be directed or brought to any of the first aid posts, event medical control will be informed immediately.

We will however, provide a safe and supervised environment for the lost child until such time the care of the child is passed into the care of a Police Officer or designated facility onsite and the Event Organiser will be informed.

The Event Organiser will have lost children protocol in place throughout the event. All lost children must be reported to Event Control.

Protection of Vulnerable Adults

All staff have a responsibility to ensure the safety and well-being of vulnerable adults. Any concerns should be reported to an appropriate Manager at the earliest convenience.

		Z. II. II. II. Z.	
3.14	Media	4004	V

Medical personnel will not give any comment or interview on any aspect of the event without prior authorisation.

3.15

TBC

3.16 Noise at Work

To comply with the Control of Noise at Work Regulations 20015, all staff will wear ear protection when working in the vicinity of stages or other areas of high noise. These **MUST** be worn at **ALL** times. Staff not complying with these instructions will be removed from that working area.

An incident log will be maintained which will include any actions or decisions taken by the management and control staff of the medical provision and the reasons for those actions. All patients who require treatment will be recorded. Documents will be collated and held by the appropriate agencies. Records will be stored and patient details will be subject to confidentiality and Data Protection legislation.

All personnel will respect patient confidentiality and follow strict rules in this respect. No patient information will be given out unless we are given permission from the individual or their next of kin or unless reportable under RIDDOR circumstances.

RIDDOR Reportable Incidents

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) applies to all who are injured or become ill as a result of an accident or exposure whilst at work, on duty, or at events, which arise out of work/duty activities.

Types of Reportable Injury:

- Death
- Major Injury
- Over seven day injury

Major Injuries are defined as:

- Fracture other than fingers, thumbs or toes
- Amputation
- Dislocation of the shoulder, hip, knee or spine
- Loss of sight, temporary or permanent, chemical or hot metal burn to the eye
- Injury resulting from electric shock or electrical burn leading to unconsciousness or requiring resuscitation or admittance to hospital for more than 24 hours
- Injury leading to hypothermia, heat-induced illness
- Unconsciousness caused by asphyxia or exposure to harmful substance or biological agent

Reportable Dangerous Occurrences:

- Collapse, overturning or failure of load-bearing parts of lifting equipment
- Failures involving lifting equipment
- Any escape of biological agents
- Collapse of scaffolding (includes speaker towers)
- Failure of fairground equipment

This list is not exhaustive

If an incident occurs, the responsibility for reporting lies with the Duty Manager for the event at which the incident occurred. In these circumstances, we will supply sufficient information to the Organiser.

This will include:

- The casualty's name, address, postcode, phone number
- The casualty's gender and age
- Date, time and place of incident
- Brief description of the nature of the injury/illness
- Actions taken in respect of casualty Taken to hospital/home etc

3.19 Care Quality Commission (CQC)

From 1st April 2011 the Health & Social Care Act 2008, all NHS and independent ambulance services that provide regulated activities must be registered and regulated with the Care Quality Commission (CQC).

EMS will ensure that all sub-contractors used are appropriately registered with the CQC and copies of certificates obtained.

Section 4	MAJOR INCIDENT PROCEDURES	
NY		
4.1	Definition	

There are many definitions applied to major incidents by the different responders and agencies. For the purpose of this plan it is appropriate to use the one commonly used by ambulance services.

 A Major Incident can be defined as any incident where the location, number, severity or type of live casualties requires extraordinary resources.

Roles & Responsibilities

The statutory responsibility for dealing with a medical major incident is the responsibility of the local NHS Ambulance Service as defined in the Civil Contingencies Act 2004. This is also defined in paragraph 205 of The Event Safety Guide.

EMS will undertake the following responsibilities until such time the emergency services arrive on scene and will then work under their directions:

- Saving a life
- Prevention of further injury
- Ensure the safety of all staff and attendees at the event
- Coordinate available medical resources onsite until the NHS Ambulance Service arrives
- Supporting the emergency services

When dealing with an incident where the cause is unclear, the following procedures will apply:

Upon the arrival of the NHS Ambulance Service, all EMS Managers, Staff, Ambulance, Medical and First Aid

Personnel will work under their command until the incident is deemed closed. All onsite facilities e.g.

ambulances, ambulance control, first aid posts will be at the disposal of the ambulance service whilst a
major incident is ongoing.

All staff attending the event will be briefed on their roles and responsibilities prior to arriving onsite and will be familiar with procedures. A log will be maintained throughout the incident.

Section 5	5 RISK ASSESSMENT	
70		
5.1	Dynamic Risk Assessment	

The aim of dynamic risk assessment is to assess, plan, manage, control, reduce and eliminate where possible any potential hazards that can be reasonably prevented or foreseen which may affect EMS, medical, ambulance and first aid personnel working at this event under the control of EMS.

Any staff and contractors working on behalf of EMS <u>must</u> follow all and any other safety, emergency or onsite regulations laid down by the <u>Event Organisers</u>. An experienced <u>Event Safety Officer</u> will be appointed by the Organiser and is responsible for all public safety issues. The <u>Event Safety Officer</u> will be liaising with ourselves and other agencies prior to and throughout the <u>event</u>.

EMS will carry out risk assessments prior to the event.

