



London Ambulance Service **NHS**
NHS Trust

Lockdown Policy

DOCUMENT PROFILE and CONTROL.

Purpose of the document: This procedure details the processes by which the London Ambulance Service will effectively manage its capability to securely lock down a site across its activities or other specific building/area in response to an identified risk, threat or hazard that might impact on the security of patients, staff and assets or, indeed the capacity of that facility to continue to operate.

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Links to Related documents or references providing additional information		
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TP077	Security Management Policy	
TP/005	Risk Management Policy	
TP 035	Risk Assessment and Reporting Procedure	
OP018	Procedure on Station Duties	
TP028	Business Continuity Policy	
HS014a	Waterloo HQ Evacuation Policy and Procedure	
HS014b	Service Wide Evacuation Procedure	
OP004	Procedure for Control Services Business Continuity and Disaster Recovery	

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1. Introduction

This document has been developed to meet the requirement of the NHS Emergency Preparedness Resilience and Response assurance process and provides staff with information about how to protect their worksite in response to serious security incidents or unexpected situations.

The London Ambulance Service NHS Trust (LAS) recognises its duties to prepare and plan for serious security incidents or unexpected situations that may require a full or partial lockdown of Trust managed premises. Any situation requiring the lockdown of the Trust premises will need to be managed and controlled in order to maintain the health and safety of all building occupants, protect the security of the Trust's assets, and where possible, ensure business continuity.

In developing these arrangements, recognition is given to the law in respect of Civil Contingencies Act, Public Health Act and Articles 5 & 12 of the Human Rights Act.

The Civil Contingencies Act and associated statutory Regulations and Guidance that came into force on 14th November 2005 forms the legal background that requires the London Ambulance Service NHS Trust (LAS) as a Category 1 Responder to produce and maintain a comprehensive Business Continuity Plan (BCP) that will enable the LAS to manage major disruptions to the delivery of services whilst continuing to provide critical services to the public.

The need to invoke a lockdown may emanate from a spontaneous internal or external event. A lockdown may be called in response to security breaches of Trust property/assets, or events that pose a risk to staff and visitors. The decision to lockdown may also be taken as a result of such events as: a major accident or incident, epidemic, fire, flood, and loss of utilities (though this list is not exhaustive). This guidance and procedure should be read in conjunction with the Policy for Security Management, London Ambulance Service NHS Trust's Major Incident Plan and Business Continuity Policy.

Developing a lockdown capability will help to ensure a safe and secure environment. Experience has shown that during a wide range of incidents, health services are vulnerable. Contamination, infection or even the sheer pressure of the ensuing numbers of people seeking care can threaten services to the point of collapse. Therefore locking down an LAS site or LAS building may be a proportionate response to a variety of threats and hazards to safeguard staff and visitors, and protect assets.

2. Scope

The Policy applies to all Trust sites and facilities. It requires managers of these buildings, facilities or sites to work with security management staff to prepare a site specific Lockdown Procedure.

This policy details the processes by which the Trust will effectively implement lockdown procedure in order to safeguard the health and safety of staff and visitors as well as the security of Trust premises/assets.

The key measurable deliverables include:

- a. Confirmation of all sites requiring a lockdown plan.
- b. Identification of persons with responsibility for producing each local specific plan.
- c. Completion of the assessment processes at each specific location as per the Appendices.
- d. Completion of the lockdown template plan for each specific location.
- e. Completion of staff training and where possible, an exercise at each location., .

3. Objectives

3.1 The aim of this document is to help support and ensure the safety and security of staff and achieve the vision of the LAS by facilitating the delivery of an environment which is properly secure for those who work within Trust sites, so that the highest possible standard of clinical care can be made available.

3.2 The key objectives of this policy are:

3.2.1 To protect LAS staff and assets;

3.2.2 To seek to ensure the security of vulnerable and sensitive areas;

3.2.3 To provide an overarching policy to enable a local framework for the management of lockdown procedures at/within LAS sites;

3.2.4 To layout responsibilities for producing and testing local lockdown procedures.

4. Responsibilities

Chief Executive

The Chief Executive holds the overall responsibility on behalf of the Trust as the Accountable Officer and is responsible for providing, where reasonably practicable, a safe and secure working environment, and for ensuring the safety and security of employees, service users and others.

Chief Quality Officer is the nominated Director with special responsibility for security management (**Security Management Director – SMD**). Their responsibility includes:

- Ensuring that adequate resources are made available to ensure the effective implementation of the policy.
- Ensuring that any processes in place for management of a lockdown is reviewed by managers and the Board.

Head of Business Continuity is responsible for:

- Providing advice to the Trust on preparing and managing major and catastrophic incidents.
- Ensuring that the lockdown procedure is regularly reviewed and tested.
- Maintaining relationships with external agencies which will include the police, who will be able to inform on local threats and hazards.
- Providing support to sites during a lockdown event.
- Ensuring copies of lockdown plans that relate to the various premises are easily accessible. These may need to be referred to in the event of a major incident.

Estates & Facilities Team are responsible for:

- Leading on issues relating to the functionality of Trust buildings and building resilience.
- Providing advice on the structure and internal systems that operate within any Trust building or building used by Trust staff.
- Supporting the EPRR and Health and Safety Department with determining the methodology for the different stages of lockdown (partial, progressive, full) and how to achieve success for each of these stages.

Communication and Engagement Team are responsible for:

- Developing signage to support lockdown plan implementation.
- The Trust Communications and Engagement Team will help to ensure that a controlled message is broadcasted to staff, patients and visitors within the Trust and to the outside world, informing them of the current situation.
- Developing pre-prepared communication messages for media and external stakeholders.

IM&T Team are responsible for:

- Issues relating to functionality and resilience of network and digital infrastructure
- Issues relating to information security, both digital/soft and hard copy.

Head of Health and Safety is responsible for:

- Ensuring the review and maintenance of this policy.
- Ensuring regular compliance reports are provided and presented to the Corporate Health and Safety Committee
- Providing advice and support to staff to ensure the health, safety and welfare of staff and visitors is safeguarded during a lockdown incident
- Provide support the Trust with the implementation of this policy.

Local Security Management Specialist (LSMS) responsibilities include:

- Providing guidance over the characteristics that will influence the ability of any site to effectively lockdown, and the resources required to do so.
- Assist in the development of a lockdown risk profile, taking into consideration local circumstances.
- Assist in implementing the lockdown policy where required
- Support building/site managers/teams with the development of their lockdown processes and procedures.
- Support inter-agency collaboration.

All **Directors/ Managers/ Site Managers/ Department Heads** have responsibility for ensuring that this Procedure is implemented and in supporting staff in the implementation of this Procedure and in addition;

- They work with their teams, estates representatives, the Health and Safety Department and Business Continuity Team to identify and document the critical assets within the site;
- Develop a lockdown profile for their site/department taking into consideration local circumstances.
- Determine if a lockdown (or partial lockdown) is achievable
- Identify appropriate resources to undertake a lockdown
- In consultation with local Stakeholders develop a lockdown plan.
- Share details of the agreed lockdown plan with their teams to ensure that if, or when implemented, all staff are aware of their role and responsibility.
- Maintain the lockdown plan with the local Major Incident Plan/Business Continuity Plans and forward a copy to the Head of Business Continuity, or designated deputy.
- Ensure that departmental/local Business Continuity plans are in place and kept up to date and that these are tested/exercised on a regular basis.
- That plans are tested for robustness and appropriate amendments or revisions are cascaded.

Note: Managers must keep in mind that if there is a change to the services provided at a site, the lockdown plan must be reviewed to ensure that it reflects the new situation.

All Employees:

- Have a responsibility to take reasonable care of their own safety and security, as well as the safety and security of others.
- Familiarise actions, lockdown plan and lockdown refuge areas across the site.
- Participate as required in the event of the implementation of a lockdown. In order to support a lockdown, staff may be required to carry out activities that are outside of their normal job description.

5. Definitions

Lockdown:

Lockdown is the process of controlling the movement and access – both entry and exit – of people (including staff, patients and visitors) around a trust site or other specific building/area in response to an identified risk, threat or hazard that might impact on the security of patients, 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 security personnel.

Full Lockdown

The whole building or site is controlled to prevent / restrict access and egress.

Partial Lockdown

Only part of the site or building is controlled i.e. corridor or floor.

Progressive Lockdown

Control is gradually widened throughout a building/site as a situation escalates.

Lockdown Risk Profile

This is an assessment of key sites to determine whether they can lock down a whole or part of their premises. The risk profile will review a number of areas, including: critical assets, hazards, building arrangements and personnel in order to conclude whether the site has adequate capability to lock down, or if additional resources are needed. Risk profile documentation is provided in Appendix 1.

Physical security – relates to buildings and objects.

Premises – the physical buildings in which LAS staff and professionals work, where patients are treated and from where business of the NHS is delivered.

Assets – irrespective of their value, assets can be defined as the materials and equipment used to deliver LAS services. In respect of staff, it can also mean the personal possessions they retain whilst working in or providing services to the NHS.

6. Activation, Escalation, Stand Down

6.1 Triggers

The threat, location, scale, type of event and profile of the facility will determine the type of lockdown (full, partial or progressive) that will be implemented. Common triggers for the implementation of the lockdown procedure include:

- a. Receipt of Intelligence.
- b. Direct/indirect threat, risk or hazard.
- c. As part of an incident/ emergency or crisis response.
- d. Suspicion of an intruder.
- e. Verbal and/ or physical abuse (direct and indirect).
- f. Arson.

- g. Suspect letters and packages including CBRN.
- h. Industrial toxic cloud.
- i. Intruder.
- j. Insider - disaffected employee.
- k. Contamination.
- l. Terrorism.

6.2 Activation

There are three key elements involved in locking down a facility. This includes preventing **the entry, the exit and the movement** of people on a site, or part of a building or site. 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 and visitors.

The decision to lock down a site/building should be guided by the following four principles:

- The protection of staff and assets;
- The isolation of the threat or hazard;
- To establishing a distance between staff/assets and the threat or hazard;
- To neutralising the threat or hazard.

The decision to lock down a site has to be based on a balance between the risk to the premises (and the staff inside the premises) against the risk to being able to deliver an effective ambulance service response.

Lockdown can only be effective if is conducted quickly, either in response to a localised incident or if intelligence is received. There are three levels of activation:

1. **Local** - Incident occurs or intelligence is received, requiring lockdown to be implemented at a local level and communicated upwards. Most likely to be a rapid evolving event.

The most senior member of staff responsible for the building/site that is exposed to the threat should have the authority to make a decision to lock the premise as an immediate response to protect staff and property. Where a lockdown is implemented, the relevant Manager should ensure that the Trust's Gold Command Structure is informed of the decision to lockdown.

2. **Divisional** - Incident occurs or intelligence is received, requiring lockdown to be implemented across a division and communicated downwards to local levels and upwards corporately. This will be invoked and communicated by the Divisional Director or Silver on Call.
3. **Trust** – Incident occurs or intelligence is received, requiring lockdown to be implemented across the Trust, this will be invoked and communicated by the relevant Executive or Trust Gold on Call.

6.3 Escalation

Events/incidents involving or requiring lockdown must be coordinated and implemented in conjunction with the Trust's Business Continuity Plan and/or Incident Response Procedures (<https://thepulseweb.london-amb.nhs.uk/operational/emergency-preparedness-eprp/planning-for-significant-and-major-incidents/major-incident-response-procedures/>) and/or Trust Internal Major Incident declaration.

Where a lockdown is declared locally or across a division, the relevant Executive or Trust Gold on-call must be notified immediately. The police and/or other relevant emergency services may need to be alerted to assess or respond to the situation depending on the event.

6.4 Lockdown 'Stand-down'

The decision to stand-down from the 'lockdown' protocol will be undertaken at the appropriate levels, dependent upon whether a Local, Divisional or Trust lockdown was implemented. It will be the responsibility of the senior representative involved at each location to communicate the stand down message and ensure all appropriate actions are taken to restore general access and egress.

If a Major Incident Standby or Declared status was invoked, then the Major Incident Procedure will apply.

A Datix incident report should be completed following the 'stand-down' of the lockdown event, detailing why the lockdown was declared, what happened during lockdown and why stand-down from lockdown was declared, so that lessons are learned and can support any subsequent investigation and also inform review of this document.

6.5 Time and duration of a lockdown

Whilst a lockdown will ideally only last for a short period of time, there may be occasions when it may last several hours or more. Equally, there will be occasions where a building needs locking down after an event e.g. decontamination of the premises or flooding.

If a site or building needs to be locked down, the duration of the lockdown must be proportionate to the level of disruption and potential further costs, for example, the need to employ contracted security staff to support staff resilience.

The time a lockdown is called could have serious implications for its success. In order to ensure robust lockdown action plans can be implemented, regular tests of the LAS' lockdown procedure should be conducted at various periods/time including when the site is at its most vulnerable (e.g. in terms of staffing).

Staff working in less secure areas, such as offices, should be made aware of and make themselves familiar with the 'Run, Hide, Tell' video.

6.6 Types of Lockdown

Partial Lockdown (Static or Portable)

A partial lockdown is the locking down of a specific building or site or part of a building or site. The decision to implement a partial lockdown will usually be in response to an incident. This response will help to ensure that identified critical assets such as personnel 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.

Progressive Lockdown

A **progressive** or **incremental lockdown** can be a step-by-step lockdown of a site or building in response to an escalating scenario.

Full Lockdown

A full lockdown is the process of preventing freedom of entry to and exit from either an entire LAS site; specific LAS building or premises from which the LAS operates.

It is important to take into consideration that preventing freedom of access to premises at a particular entry point may result in attendees seeking other points of access.

In order to ensure a safe and secure environment it is essential that all relevant stakeholders engage in the development of a robust action plan.

6.7 Controlling Access /Egress in the Event of a Lockdown.

When following assigned duties in the event of a lockdown, all employees must remember that because all health care sites and buildings are usually open to the public, members of the public have an implied licence to enter them. However, the owner of any such premises has the right to refuse access when required.

The right to refuse exit (where the request has been made voluntarily by an occupant) is more complex. If the police are not present and enforcing a containment cordon, it is only lawful for the Trust to prevent the exit of people under special circumstances, e.g. containment of a communicable disease under specific sections of Civil Contingencies Act / Public Health Act, if relevant sections of the Mental Health Act apply, or if by leaving, the person is committing a criminal offence, or causing injury to property leading to arrest.

If this occurs, LAS staff can only appeal to individuals to stay in the site and/or building identified for lockdown. If individuals choose to leave, then a safe route must be available for them to do so, with the exception of service users legally detained.

7. Guidance on developing Lockdown Plans

Developing a lockdown procedure is a four step process:

- i. Heads of Department/Senior Managers will ensure that completion of a site/Building Risk Profile is undertaken – this will help you assess the risks that are present and the complexities of locking the building/site down.
- ii. Develop a site specific lockdown procedure and action card – the lockdown action card is an aide memoire for your staff to use if a lockdown is required. It sits with the Incident Response Plan Action Cards and works with them.
- iii. 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.
- iv. Practice – At least once every 3 years, a full lockdown practice should be completed to ensure that the plan works and staff are aware of their duties.

Site and departmental managers will undertake an impact assessment and identify potential threats and hazards that represent a risk to any critical assets at their site and assess the site and building's vulnerability to the identified threats in relation to existing security measures. The site/building impact assessment will take account of:

- a. The physical geography of the site
- b. The size, shape, height and condition of the building
- c. Access and egress points
- d. The ability to control access either manually or automatically
- e. The amount of glazing and ability to resist a blast or forced entry
- f. Location and route of communications
- g. Where power supplies are housed
- h. Air conditioning or ventilation points.
- i. Number of buildings on the site
- j. Up to date site maps

The impact assessments will be reviewed by the Lockdown working group and a site lockdown risk profile will be established, together with responsibilities for staff and managers during the implementation of, maintaining and standing down from a lockdown situation.

Following this, a lockdown procedure for each site will be produced so that a planned approach to implementing a lockdown can be facilitated and which will take into consideration any site specific issues, such as staff with disabilities or underlying health issues.

The Lockdown working group membership will include:

- Local Security Management Specialist
- Business Continuity Manager
- Emergency Planning, Resilience and Response Officer
- EOC Staff Officer (where EOC function is involved)

- Sector Quality Governance and Assurance Manager

Other service representatives may be invited onto the group to consider site specific or service/directorate specific issues.

Once developed, lockdown procedures should be tested regularly to ensure effectiveness; to identify and to capture any areas of weakness and to feed these into the development of improved procedures. When testing, it is important to consider any changes in the environment and the implications of a real event taking place at different times and whether in different circumstances the plan would have succeeded.

8. Training Requirements

There are no specific training needs in relation to this policy, but the following staff will need to be familiar with its contents:

- Facilities managers
- Managers of buildings, departments and sites
- Estates Managers
- Estates Officers
- Security Staff / Managers (where applicable)
- Any other individual or group with a responsibility for implementing the contents of this policy.

As a trust policy, all staff should be aware of the key points that the policy covers. Staff can be made aware through a variety of means such as: Team briefings, Posters, Newsletters etc.

9. Policy Review

The maximum period of review for this policy will be three years, or in the event of any changes in legislation which may have an impact on procedures, or where a lockdown has been instigated in order to reflect any lessons learned.

10. Associated Documents

- Risk Management System
- Risk Management Policy
- Health & Safety Policy
- Security Management Policy and Procedures
- Hazmat Policy
- Evacuation Policy and Procedure

IMPLEMENTATION PLAN				
Intended Audience	For All LAS Staff			
Dissemination	Available to all staff on the Pulse			
Communications	To be announced in the RIB and a link to the document provided			
Training	Specific training by site for individuals with a role to play			
Monitoring	<p>This policy will be monitored through practice lockdowns being carried out and evaluated and security surveys being carried out.</p> <p>Once a lockdown risk profile is produced for a site, a lockdown exercise will be carried out and its effectiveness evaluated in consultation with EPRR and the LSMS</p> <p>The lockdown evaluation will be reported to the Sector Services Quality Governance Meeting, who will monitor lockdown capability.</p>			
Aspect to be monitored	Frequency of monitoring AND Tool used	Individual/ team responsible for carrying out monitoring AND Committee/ group where results are reported	Committee/ group responsible for monitoring outcomes/ recommendations	How learning will take place
Lockdown Procedure	Security site risk assessments Quarterly Premises Inspections	LSMS reports to the Corporate Health and Safety Committee	Corporate Health and Safety Committee	Dissemination of changes to practice, training and lessons via the Sector Services Quality Governance meetings
Lockdown testing	Annual testing monitored through Quarterly Premises Inspections			

LOCKDOWN BUILDING PROFILE:

Building/Site Name:	
Address:	
Date of Survey:	
Survey completed by:	
A: Site Profile	
Characteristic	Information Required
Location (General description of locality and access)	
Size of Area/building (i.e. 100m ²)	
Site Characteristics (Number of buildings on site, multi-occupancy?)	
Landscape (remote, town centre, confined, description, shape and slope)	
Road Access/Egress to Site (Type of road and no.)	
Public Transport Access (Bus routes, frequency and proximity)	
Traffic Movement Around Site (direction, one way, usual congestion etc)	
Car Parking (numbers, locations, access /egress points, structured parking, off-site parking)	
Neighbouring Land Use (Residential/industrial, energy, supplies?)	
Number of unofficial access/egress points on the site	
B: Building Profile	
Characteristic	Information Required
Description of each buildings on the site (what is its use, offices, clinics, specialist services, multi occupancy)	
Management of Buildings (is there restricted or free access and movement around the outside and inside the building)	
Are floor plans available?	
Size and location of services within building (i.e. 3 floors, 100m ² ground floor doctor's surgery, 1st floor, offices)	
Corridors (how many, separate staff ones, do they inter-	

connect, where do they lead to)	
Areas which can be used as refuge (secure lockable doors with comm's)	
Utilities (Location of electricity, gas supply, medical gases) how secure to tamper are they?	
Condition of building (general upkeep, 10yr old brick etc)	
Access/Egress (No of entrance and exits and locations)	
Who owns the property (is it leased, rented, owned by NHS, can it be locked down)	
Car Park (where are they located, are they patrolled/access controlled)	
Air Conditioning and Air Vents (Is there air conditioning, where is it controlled from, who maintains it, how quickly can it be turned off)	
How is the Building Powered (Where is the power supply located, how is it controlled, ss it secure, can it be tampered with, is there an UPS)	
C: Security Profile	
Characteristic	Information Required
External Doors (How are doors locked – access control system or manually, who is responsible for the access control system)	
Internal Doors (Where are they located, how are they locked – access control or manually)	
Windows (Has a risk assessment been undertaken to identify which windows must remain locked, how are they secured, what is the locking device, if manual who holds the keys. could access to building be made by window)	
CCTV (is there CCTV coverage, where are the cameras, Is there a location map, what are they trained on, any blind spots, can they be used to monitor approach areas during a lockdown)	
Security Lighting (is there external security lighting, what areas are covered, how are they controlled)	
Security Alarms (do you have intruder alarms, how is it activated, is it linked to a monitored service)	

Car Park Security (Are the car parks staffed, what are the existing security arrangements)	
Security Staff (Number of security staff on site during the day/night, where are they located, what are their general site duties, could they assist with a lockdown, what would be their duties in a lockdown situation)	

Sample Lockdown Action Card:

WHICH Site/Building or Departmental Lockdown Action Card

Stage	Action
1 lockdown activation	<ul style="list-style-type: none"> • WHO is notified to 'LOCKDOWN' department – either by phone or in person by security, site practitioner or on call manager • WHO will inform staff on duty • Follow actions in section 2
2 lockdown deployment	<ol style="list-style-type: none"> 1. WHAT ENTRANCES/EXITS & IN WHAT ORDER 2. WHO TO BE DEPLOYED WHERE 3. ANY DEPARTMENTAL SPECIFIC INSTRUCTIONS 4. Ensure signage is placed on the doors & close all windows and blinds 5. Reassure staff, contractors and any visitors that are in the department
3 lockdown maintenance	<ul style="list-style-type: none"> • Continue to reassure any visitors and staff • Try to persuade those who wish to leave to stay but do not force them – please inform security if someone insists on leaving (<i>except in event of Fire</i>) • DO NOT let anyone else in (<i>unless clinically indicated i.e. cardiac arrest team</i>) • Communications will be maintained via telephone and e-mail from the senior management team to the department • Await further instruction
4 lockdown stand-down	<ul style="list-style-type: none"> • WHO is notified 'Lockdown Stand down' • WHO informs all staff – there may be additional information or restrictions still within remainder of site • WHO decide which doors are suitable for exiting from depending on instruction received • Staff open relevant doors • WHO risk assesses who may leave the building/department, following any further instructions

Date Agreed and By Whom:

Last Review Date:

IN THE EVENT OF A FIRE OR A SERIOUS CLINICAL INCIDENT SUCH AS A CARDIAC ARREST, THIS WILL TAKE PRIORITY OVER A LOCK DOWN SCENARIO.

However, staff would not be expected to place themselves at risk and should await any hazard-mitigation (eg. Police or Fire Service, etc).