

GUIDELINE FOR HOSPITAL TREATMENT OF VVIP / VIP / CELEBRITIES (2022)

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Version Number	Date Review Approved	Date Published	Summary of Amendments
1	14/12/2011	28/02/2012	New Document
2	21/08/2014	29/08/2014	Supersedes UHB version 1
3	21/12/2016	29/12/2016	Update personnel titles. Slim line notification cascade. Update WAST contact details. Addition of Action Card I.
4	27/04/2022	16/05/2022	Reclassified as operational guideline. Reference devolved Government First Minister, and security of sensitive documents. Amendment section 1.4 at request of CI McCarthy SWP.

GUIDELINE FOR HOSPITAL TREATMENT OF VVIP / VIP / CELEBRITIES

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1. INTRODUCTION

1.1 The purpose of this document is to detail the measures to be taken in the event of a VVIP / VIP or Celebrity attending or visiting UHB premises to receive urgent or planned treatment.

On occasions VVIP / VIP's and/or Celebrities, travel through or make visits to, the South Wales area. VIP's/Celebrities may also live within the catchment area of the UHB. If a VVIP/ VIP/Celebrity sustains an injury or requires hospital treatment whilst in the area, the UHB must have special arrangements in place to deal with their treatment plan and/or admission. This may be necessary for a variety of reasons, including, protection of an individual who may be under potential threat at a national level; to ensure enhanced privacy and confidentiality; manage media interest; and to minimise disruption for staff and all other service users.

This document details the measures to be taken by the UHB in conjunction with South Wales Police and the Welsh Ambulance NHS Trust to treat and protect VVIP / VIPs/ Celebrities.

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In relation to this document the term:

VVIP includes members of the United Kingdom Royal Family, Heads of State, and Senior Judges, Devolved Government First Ministers and Foreign Protected Persons.

VIP indicates Senior Politicians, certain Members of Parliament, and serving Assembly Cabinet Members

Celebrity status infers performing artists, film, television and sports personalities.

1.2 VVIPs will be accompanied by Police and / or official UK Government security officers (who may be armed). They will escort the patient and initiate action to secure the treatment area. The senior officer will identify him/herself to the nurse in charge of the ward/ department, and will expect the full cooperation of all UHB staff.

The senior officer will make every effort to collaborate with, and support the UHB in minimising the disruption to the hospital site and other service users.

1.2.1 VIPs / Celebrities may be escorted by private security staff.

The UHB staff will not accept direction from members of private security companies, or from security officers representing a foreign sovereign nation. They have no authority to act or instruct UHB staff.

There is a singular notable exception. This applies to Government Security officers providing personal protection to the First Minister(s) / serving Cabinet Minister of UK devolved regions.

UHB staff will accredit primacy of decision making to the most senior officer representing the territorial South Wales Police region. In the first instance, this could be a member of the regular on-site duty Police team – who will act as single point of contact and request the attendance of a senior officer if necessary.

- 1.3 In these circumstances it is essential that staff wear and clearly display UHB Identification badges as they will be challenged by Police Officers or UHB security staff when in close proximity of the VVIP / VIP / Celebrity.
- 1.4 If deemed necessary and/or depending on the threat level, South Wales Police will provide support at the University Hospital of Wales.

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Depending on the particular circumstances the UHB may need to make special arrangements to ensure there are adequate levels of UHB security staff on site. For example, a performing artist may attract large crowds of fans.

1.5 It is important to note that Police officers, official government security officers, or celebrity management teams must not unduly impede patient flow or the normal day to day running of the hospital. It is fundamental that members of the general public will continue to receive treatment in line with their clinical priority.

2. NOTIFICATION OF EMERGENCY/ADMISSION

2,1 The University Hospital of Wales will be notified either by Welsh Ambulance NHS Trust, Police, or Government security team of the emergency. This may happen in one of two ways. The alert will either go directly to a pre-defined and confidential emergency telephone number in the resuscitation suite; or indirectly via the main switchboard.

The caller will use the phrase "VIP EMERGENCY" and clearly identify him/ herself to the switchboard operator. If the call originates via the main switchboard it must be verified (see action card A). To confirm that the emergency is genuine, switchboard will return the call by contacting a pre-arranged telephone number.

Once confirmed, the call will be transferred immediately to the most senior nurse on duty in the Emergency Unit or Medical/ Surgical Admissions Unit (depending on the nature of admission). Please note that whilst unlikely, it is possible that the admission may be directed to UHL. If the call is received within the resuscitation suite it will immediately be deemed to be genuine.

- 2.2 When connected to the Senior Nurse (EU or MAU / SAU / MEAU) the caller will use the phrase "VIP EMERGENCY" and identify themselves. The caller will also be required to clearly identify the position or rank of the person to be treated and provide any available information regarding the condition or injuries of the casualty. Full details of injuries will be given to EU as part of the formal handover on arrival.
- 2.3 It is possible that the VIP or Celebrity will arrive at the Emergency Unit without prior notification. If this should happen the most senior nurse on duty must carry out the actions detailed in their action card (see action card B) The Senior Nurse on duty must ensure that the hospital switchboard is asked to inform the relevant senior manager as per the alert cascade.
- 2.4 VIPs/Celebrities who are resident in the catchment area may be admitted without prior notice, i.e. GP admission. In such cases the relevant admission unit / ward must inform switchboard and instruct the operator to inform the relevant senior manager as per the alert cascade. Be mindful that whilst under normal conditions the admission would be via UHW admissions could occur on any UHB site.

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3 HOSPITAL ALERT CASCADE

3.1 Switchboard will contact the following staff and inform them that a VVIP / VIP or Celebrity is to attend UHB premises for treatment. Switchboard will prefix the alert with the phrase "VIP EMERGENCY".

No.	Designation	In Hours	Out of
			Hours
1	Senior Nurse on duty – EU/MAU/SAU	$\sqrt{}$	$\sqrt{}$
2	Head of Emergency Preparedness		$\sqrt{}$
3	Patient access team / site practitioner		
4	Head of security and control room	$\sqrt{}$	$\sqrt{}$
5	Strategic communications team		$\sqrt{}$
6	Chief Operating Officer	$\sqrt{}$	
7	Executive Director on call		V
8	Senior manager on call		$\sqrt{}$

4 USE OF HOSPITAL FACILITIES

- 4.1 Although there will be an increase in security presence it is essential that there is a minimum of disruption to the Emergency Unit and the hospital in general. Measures must be taken to ensure that the VVIP / VIP/ Celebrity and all routine patients receive their treatment in conditions of strictest privacy and confidentiality.
- 4.2 The injured VVIP / VIP / Celebrity will usually be brought to the ambulance entrance of the UHW Emergency Unit. Depending upon the type and severity of the injury, they will be triaged to an appropriate clinical area. In all cases of VVIP admissions the area must be secure and commensurate with the threat assessment of the senior Police officer. This may necessitate unavoidable disruption as areas of the ward / department are isolated.
- 4.3 If operationally possible VIP / Celebrity casualties should be segregated. This will maximise privacy, facilitate media management, and minimise disruption to the hospital site and other service users. However, it must be noted that VIP / Celebrity casualties will receive treatment in strict accordance with their presenting clinical condition and assessed medical priority.
- 4.4 Colleagues from support services such as security and portering will have a pivotal role in regard to minimising disruption (see action card C).
- 4.5 Official UK Government Security Officers will be given the use of the Emergency Unit Seminar Room (located near the Directorate management suite.

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- 4.6 Provision should be made for official escorts and relations of those being treated to access a secluded family room.
- 4.7 Should inpatient treatment be necessary then the patient will be admitted to an appropriate ward in line with their clinically assessed condition. The security department will advise the nurse in charge of the most appropriate route to be taken for transfer from the EU to the designated ward, theatre or treatment/therapy area. This will avoid unnecessary exposure to the media and general public.
- 4.8 In the case of a VVIP the inpatient area must allow for segregation from other patients to ensure the safety of the "Principle". In addition, it is accepted protocol that the direct patient care of a VVIP will normally be delivered at Consultant and Lead Nurse / Therapist level.
- 4.9 In the case of VIP / Celebrity due consideration must be given to respecting the privacy of all parties, including routine patients. It may be advisable to provide a degree of segregation to prevent undue levels of disruption for all concerned. The attending medical / nursing / therapy teams will be allocated in line with the ongoing assessment of the patient's clinical condition. There is no requirement to assume that only Consultants or Lead Nurses / Therapists must administer direct patient care for VIP / Celebrity patients. Staff will be allocated at the discretion of the most senior nurse in charge of the ward / unit.

5 **DISCHARGE ARRANGEMENTS**

5.1 In order to minimise disruption, and protect the privacy of individuals' extraordinary steps may be necessary to facilitate a discreet discharge. The regular on-site Police officer and UHB security supervisor will collaborate and advise on alternative exit routes from the hospital site.

6 DEATH OF A VVIP/VIP/CELEBRITY

- 6.1 Her Majesty's Coroner's Office has advised that any VVIP / VIP / Celebrity death should be treated in exactly the same way as any other death. No distinction is made on the basis of who the deceased is.
- 6.2 Any attempt to remove a deceased person, or to act in any manner which falls outside of normal UHB practice must be immediately notified to the duty Coroners officer via South Wales Police.
- 6.3 It is possible that a Police Officer may be tasked to accompany the body of the deceased to the mortuary. This may be due to a specific risk or to protect forensic evidence.

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6.4 VVIP / VIP may be in procession of sensitive documents or secure Information Technology or telecommunications devices at the time of their death. If this is the case, they will be removed by the accompanying Police / Government Security Officer. This must be recorded within the medical notes of the deceased person.

7 THE MEDIA & PUBLIC RELATIONS

- 7.1 Depending on the particular incident there will inevitably be an elevated degree of media interest. As with all patients the utmost endeavour must be made to ensure the highest possible level of privacy and confidentiality is maintained.
- 7.2 Authorised press conferences or briefings will be led by a senior manager, under the guidance of the Strategic Engagement and Communications team.
- 7.3 It is possible that unscrupulous methods may be utilised in an attempt to extract information from UHB staff. If any staff member becomes aware of such behaviour, or believes that they have been tricked into divulging information, they should immediately notify their line manager. In this instance the UHB will make every effort to support any staff member who declares such an occurrence.

8 CONTROL AND COMMAND

- 8.1 Dependent upon the time of day, the nature and scale of the incident and the anticipated media interest the Major Incident Control Centre (Tactical / Silver) function may need to be activated. This will facilitate a central control point for Senior Management, Security, South Wales Police, and the Strategic Communications team to coordinate the overall UHB response.
- 8.2 Subject to the perceived risk and threat assessment a South Wales Police and Government Press office staff may attend the hospital to assist in dealing with the media, and to ensure consistency of media handling and messages.

9 **DEBRIEF**

If deemed necessary a post event debrief will be coordinated by the Head of Emergency Preparedness, Resilience and Response.

ACTION CARD A

SWITCHBOARD OPERATOR

When notified of a VVIP / VIP / Celebrity Emergency the Switchboard Operator will:

- 1. Write down the name of the caller and the VVIP / VIP / Celebrity needing treatment.
- 2. Confirm that the call is genuine by returning the call to either

South Wales Police HQ on 01656 655555 or South Wales Ambulance on 01633 626262

- 3. On confirmation, transfer the caller to the senior nurse on duty in the Emergency Unit (Pager 6106) or Medical / Surgical Admissions unit as indicated using the pre fix "VIP EMERGENCY"
- 4. If the admission is likely to generate enhanced media interest, contact the switchboard manager to authorise the deployment of additional switchboard operator to deal with the likely increase in telephone calls to the hospital.
- 5. Initiate the following call cascade:

No.	Designation	In Hours	Out of Hours
1	Senior Nurse on duty – EU/MAU/SAU	$\sqrt{}$	V
2	Head of Emergency Preparedness	$\sqrt{}$	$\sqrt{}$
3	Patient access team / site practitioner		
4	Head of security and control room	$\sqrt{}$	$\sqrt{}$
5	Strategic communications team	\checkmark	$\sqrt{}$
6	Chief Operating Officer	$\sqrt{}$	
7	Executive Director on call		$\sqrt{}$
8	Senior manager on call		\checkmark

6. Respectfully decline any subsequent requests for information confirming admission / location / condition of the patient. Legitimate enquiries will be dealt with via the UHB strategic communications team or Tactical / Silver control team (if established).

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ACTION CARD B

SENIOR NURSE ON DUTY – EMERGENCY UNIT or MEDICAL / SURGICAL ADMISSIONS UNIT

In the event that the VVIP / VIP/Celebrity arrive unannounced the actions on this card must be completed. In addition, the hospital switchboard operator must be informed in order to activate the alert cascade procedure.

When notified of a VVIP/VIP/Celebrity Emergency, the most senior nurse on duty within the Emergency Unit will:

- 1. Immediately notify the most senior doctor on duty in the Emergency Unit.
- 2. Dependent upon the injury and condition of the patient, prepare an appropriate area for treatment commensurate with the triage categorisation.
 - If the patient is a VVIP additional security measures will be required, and you must cooperate fully with the senior Police officer / official government personal protection security officer. **UHB staff will accredit primacy of decision making to the senior officer representing the territorial South Wales Police region.** Your clinical decision and prioritisation should not be influenced by members of private security companies, or from personal protection officers representing a foreign sovereign nation.
- 3. In the case of VIP / Celebrity due consideration must be given to respecting the privacy of all parties, including routine patients. It may be advisable to provide a degree of segregation to prevent undue levels of disruption.
- 4. The Senior Doctor on Duty will carry out emergency treatment and determine whether or not the patient needs to be admitted to the hospital.
- Ensure that all relevant decisions are communicated directly to the Patient Access team / Site Nurse Practitioner – who in turn will notify the appropriate senior managers.
- 6. In the case of a VVIP delegate a member of staff to open and clear the EU Seminar Room which should be made available to the accompanying security detail.
- 7. If available a secluded family room should be made available to official escorts and relations of those being treated.
- Remain mindful of the addition stress staff may experience in this situation. If necessary seek immediate assistance from your line manager to address any concerns and obtain additional resources.
- 9. Additional security officers and porters will be made available to assist you in minimising disruption within the department.

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ACTION CARD B (Continued)

When notified of a VVIP/VIP/Celebrity admission, the most senior nurse on duty within the Medical / Surgical Admissions Unit will:

- 1. Immediately notify the senior doctor on duty in the Admissions Unit as well as the admitting team Consultant.
- 2. In the case of a VVIP it is accepted protocol that the direct patient care will be delivered at Consultant and Lead Nurse / Therapist level.

There is no requirement to assume that only Consultants or Lead Nurses / Therapists must administer direct patient care for VIP / Celebrity patients. For these categories the attending medical / nursing / therapy teams will be allocated in line with the ongoing assessment of the patient's clinical condition.

3. Dependent upon the clinical condition of the patient, prepare an appropriate area for treatment commensurate with the triage categorisation.

If the patient is a VVIP additional security measures will be required, and you must cooperate fully with the senior Police officer / official UK government security officer. UHB staff will accredit primacy of decision making to the senior officer representing the territorial South Wales Police region.

Your clinical decision should not be influenced by members of private security companies, or from personal protection officers representing a foreign sovereign nation.

- 4. In the case of VIP / Celebrity due consideration must be given to respecting the privacy of all parties, including routine patients. It may be advisable to provide a degree of segregation to prevent undue levels of disruption.
- The senior doctor on duty will plan for further investigation and treatment, and liaise
 with the Patient Access team / Site Nurse Practitioner to determine the most
 clinically appropriate ward of admission.
- Ensure that all relevant decisions are communicated directly to the Patient Access team / Site Nurse Practitioner – who in turn will notify the appropriate senior managers.
- 7. Remain mindful of the addition stress staff may experience in this situation. If necessary seek immediate assistance from your line manager to address any concerns and obtain additional resources.
- 8. Additional security officers and porters will be made available to assist you in minimising disruption within the department.

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ACTION CARD C

PATIENT ACCESS TEAM / SITE NURSE PRACTITIONER

When notified of a VVIP/VIP/Celebrity Emergency, the Patient Access team manager / Site Nurse Practitioner will:

- 1. Confirm that the alert cascade has been activated by switchboard.
- Attend the Emergency Unit / Admission unit to complete an assessment of the situation.
- 3. Dependent upon your assessment of the nature and scale of the incident and the anticipated media interest you may wish to request that the Major Incident Control Centre (Tactical / Silver) function be activated. This will facilitate a central control point for Senior Management, Security, South Wales Police, and the Strategic Communications team to coordinate the overall UHB response.
- 4. Report findings to the Chief Operating Officer (in office hours) or Senior Manager on call and Executive Director (out of hours). If the Major Incident control centre function has been activated report directly to the Tactical / Silver team leader.
- 5. Take all necessary steps to minimise disruption. This may include facilitating accelerated admissions to relieve pressure within the EU / MAU / SAU.
- 6. Ensure that staff are supported and have access to adequate resources.
- 7. In conjunction with the senior doctor on duty, and the relevant Clinical Board triumvirate plan for further investigation and treatment, and determine the most clinically appropriate ward of admission.
- 8. Ensure that the receiving ward is fully briefed, and made aware of any specific security concerns.

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ACTION CARD D

SECURITY SUPERVISOR

When notified of a VVIP/VIP/Celebrity Emergency the Security Supervisor will:

- 1. Inform supervisory counterpart within the Portering team.
- 2. Deploy available security officers to the EU. Under the direction of the Senior Nurse (as far as is practicable) clear the emergency ambulance entrance to allow easy passageway for the patient.
- 3. Instruct security officers to remain in position until the arrival of the VVIP police escort, or Celebrity and their security staff.
- 4. When the police escort/official government security officers / personal protection officers' staff arrive, the security officer should remain on standby in the Emergency Unit ambulance entrance lobby under the direction of the most senior nurse on duty. They may subsequently be redeployed to an assessment unit / admission ward if the patient is transferred.
- 5. Establish contact with the UHB Head of Emergency Preparedness, Resilience and Response who will be in receipt of a security briefing from the Senior Police Officer including risk analysis and threat assessment. Be prepared to initiate further action to minimise risk to the hospital site, personnel and patients.
- 6. UHB security staff presence will be required to minimise disruption, and assist with segregation if required. At no point will they be required to expose themselves to harm by responding to an imminent threat. Protection of the "Principle" will remain the responsibility of the Police and government security forces.
- 7. If the admission is likely to be protracted contact the Head of Security to authorise the deployment of additional security officers to maintain normal service levels throughout the remainder of the site.

PORTERING SUPERVISOR

When notified of a VIP/Celebrity Emergency the Portering Supervisor will:

- Arrange for two porters to be sent to the EU main reception desk to be on standby.
 Please note that these two porters will work under the direction of the most senior
 Nurse on duty. They may subsequently be redeployed to an assessment unit /
 admission ward if the patient is transferred.
- If the admission is likely to be protracted contact the Portering senior manager to authorise the deployment of additional porters to maintain normal service levels throughout the remainder of the site.

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ACTION CARD E

EXECUTIVE DIRECTOR/CHIEF OPERATING OFFICER / SENIOR MANAGER ON CALL

When notified of a VVIP/VIP/Celebrity Emergency:

- 1. **DO NOT** attend the Emergency Unit / Admission Unit unless the nurse in charge specifically requests your assistance.
- 2. Liaise with the Patient Access team / Site Nurse Practitioner to obtain an objective assessment of the situation. If the Major Incident control centre function has been activated communicate directly with the Tactical / Silver team leader.
- 3. If there is a possibility that the VVIP/VIP/Celebrity is to be admitted:

Ensure that the Patient Access team liaise with the senior doctor and Clinical Board triumvirate to agree the most clinically appropriate ward of admission.

If the patient is a VVIP additional security measures will be required, and it will be necessary to isolate part of a ward. In this instance you may be required to arbitrate or authorise variation to the usual "protected" bed plan.

In the case of VIP / Celebrity due consideration must be given to respecting the privacy of all parties, including routine patients. It may be advisable to support a degree of segregation to prevent undue levels of disruption.

- 4. Obtain a security briefing from the Senior Police Officer and UHB Head of Emergency Preparedness including risk analysis and threat assessment. You may be required to initiate further action to minimise risk to the hospital site, personnel and patients.
- 5. Liaise with the UHB Strategic Communication team to agree a media briefing strategy. Dependent upon the status or prominence of the individual media briefings may be managed by the Police or UK Government department.
- Notify the office of the UHB Chief Executive and Chair; and (only with the
 agreement of patient and his / her security detail) prepare a status update for
 Welsh Government. The Strategic Communication team will advise on agreed
 protocol.

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ACTION CARD F

CLINICAL BOARD TRIUMVIRATE

When notified of a VVIP/VIP/Celebrity admission:

- 1. Identify a <u>single</u> member of the triumvirate to attend the Emergency Unit / Admission Unit to assess the situation and support the staff.
- Dependent upon your assessment of the nature and scale of the incident and the
 anticipated media interest you may wish to request that the Major Incident Control
 Centre function be activated. In this eventuality identify and instruct clinical board
 colleagues accordingly.
- 3. It is fundamental that members of the general public will continue to receive treatment in line with their clinical priority. In so far as it is possible retain the objective of "business as usual". Taking all necessary steps to ensure that disruption throughout the hospital is kept to a minimum.
- 4. If there is a possibility that the VVIP/VIP/Celebrity is to be admitted:
 - a. Ensure that you liaise directly with the Patient Access team and the senior doctor to agree the most clinically appropriate admission ward. Brief the ward staff accordingly.
 - b. If the patient is a VVIP additional security measures will be required, and it will be necessary to isolate part of a ward. In this instance you may be required to arbitrate or authorise variation to the usual "protected" bed plan.
 - In the case of a VVIP you must ensure that accepted protocol is maintained and that direct patient care is delivered at Consultant and Lead Nurse / Therapist level.
 - c. In the case of VIP / Celebrity due consideration must be given to respecting the privacy of all parties, including routine patients. It may be advisable to support a degree of segregation to prevent undue levels of disruption.
 - There is no requirement to assume that only Consultants or Lead Nurses / Therapists must administer direct patient care for VIP / Celebrity patients. For these categories the attending medical / nursing / therapy teams will be allocated in line with the ongoing assessment of the patient's clinical condition.

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 Obtain a security briefing from the Senior Police Officer and UHB Head of Emergency Preparedness – including risk analysis and threat assessment. You may be required to initiate further action to minimise risk to the hospital site, personnel and patients.

ACTION CARD G

SENIOR NURSE ON DUTY - ADMISSION WARD / UNIT

- It is fundamental that members of the general public will continue to receive treatment in line with their clinical priority. In so far as it is possible retain the objective of "business as usual". Taking all necessary steps to ensure that disruption throughout the ward is kept to a minimum.
- 2. You will receive guidance from the Patient Access team / Site Nurse Practitioner or a member of the Clinical Board triumvirate as to bed allocation, and associated security considerations.
- 3. You will be required to allocate staff in line with advice from the Clinical Board Nurse Director.
- 4. Brief all ward staff, and emphasise the requirement for enhanced vigilance with regard to confidentiality. It is possible that unscrupulous methods may be utilised in an attempt to extract information from staff. If any staff member becomes aware of such behaviour, or believes that they have been tricked into divulging information, they should immediately notify their line manager.
- 5. Any staff member who has been tricked into divulging confidential information will require reassurance and emotional support. If appropriate line managers should ensure that the staff member can access on going professional support e.g. UHB staff wellbeing service.
- 6. Condition status updates must only be given in line with the UHB 'condition check' protocol. If you are in any doubt as to the validity of the call ask that a member of the Strategic Engagement and
- Communication team or Clinical Board triumvirate will attend the ward in person to obtain such information – ensuring that they are in receipt of a valid CVUHB photo identification badge.
- 8. Remain mindful of the addition stress staff may experience in this situation. If necessary seek assistance from your line manager to address any concerns and obtain additional resources.
- 9. If necessary request that additional security officers and porters will be made available to assist you in minimising disruption within the ward.

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ACTION CARD H

STRATEGIC ENGAGEMENT AND COMMUNICATIONS TEAM

When notified of a VIP/Celebrity Emergency the team will:

- Contact the Head of Emergency Preparedness; the senior manager on call or Executive Director (out of hours); or Patient Access team (in hours), to establish facts regarding the incident and condition of VVIP/VIP/Celebrity. If the Major Incident control centre function has been activated, you should attend and communicate directly with the Tactical / Silver team leader.
- Contact Emergency Unit or Ward (if VIP/Celebrity has already been admitted) and follow 'condition check' protocol to establish what information, if any, can be provided to the media. If staff have any doubt as to the validity of your call they will request that you attend in person with UHB photographic identification.
- 3. Liaise with South Wales Police Media Office and agree a media briefing strategy.
- 4. Liaise with the Clinical Board triumvirates to select an appropriate senior manager as UHB spokesperson and provide them with a media statement if necessary.
- 5. Liaise with Security to arrange a media briefing/ press conference preferred location. This may require management in conjunction with South Wales Police.
- 6. In non-emergency situations
 - a. Contact Ward to establish facts regarding the VIP/Celebrity's condition and follow 'condition check' protocol as per normal.
 - b. Take the lead in managing the media; select an appropriate UHB spokesperson and provide them with a media statement if necessary and agreed with VVIP/VIP/Celebrity.
 - c. Manage media on-site, liaising with Security if necessary to manage film crews, journalists and/or photographers.

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ACTION CARD I

HEAD OF EMERGENCY PREPAREDNESS, RESILIENCE AND RESPONSE

When notified of a VVIP/VIP/Celebrity Emergency:

- 1. Attend the Emergency Unit / Admission Unit and establish contact with the Senior Police Officer and Nurse in Charge to obtain an objective assessment of the situation.
- Obtain a security briefing from the Senior Police Officer including risk analysis and threat assessment. Establish contact with the UHB Head of Security / Supervisor and initiate any further action necessary to minimise risk to the hospital site, personnel and patients.
- Dependent upon your assessment of the nature and scale of the incident and the anticipated media interest you may wish to request that the Major Incident Control Centre function be activated. In this eventuality identify and instruct clinical board colleagues accordingly.
- 4. Liaise with the UHB Strategic Communication team to agree a media briefing strategy. Dependent upon the status or prominence of the individual media briefings may be managed by the Police or Government department.

If there is a possibility that the VVIP/VIP/Celebrity is to be admitted:

- 1 Attend the admission unit (with the holder of action card F) to assess the impact of additional security measures. It may be necessary to isolate part of a ward. In this instance you may be required to arbitrate or authorise variation to the usual "protected" bed plan.
 - In the case of VIP / Celebrity due consideration must be given to respecting the privacy of all parties, including routine patients. It may be advisable to support a degree of segregation to prevent undue levels of disruption.
- 2 Ensure staff are aware of the admission, and the reason for the additional security measures. Take steps to ensure staff are not unduly worried by the actions. Identify, and introduce the Senior Police officer and nurse in charge to each other ensure effective communication.
- 3 If appropriate, coordinate a formal debrief of the event.