



# Medical provision at a licensed 'outdoor music event'

You must subscribe to <a href="www.thepurpleguide.co.uk/">www.thepurpleguide.co.uk/</a> for up-to-date guidance on medical provision. Please note that "The Purple Guide book" that can be found on the internet and downloaded for free is **out of date**.

- 1. Read the information in this document.
- 2. Score your event.
- 3. Include medical provision details in your event management plan (<u>as an appendix</u>), **AND**
- 4. Complete sections A, B & C on the back of this document and return it to ESOU.Events@secamb.nhs.uk & SAG@rother.gov.uk

The headings in the medical provision/medical plan section of your event management plan should follow the headings in the purple guide.

NOTE that in most cases, qualifications such as First Aid at Work, Emergency First Aid at Work, and ambulance service first responders are not considered suitable at public events.

# **Key Points**

- Organisers should provide a safe, effective and resilient medical service, which minimises the impact of the event on the local NHS
- The calculation of medical needs should not be based solely on expected numbers attending but should take account of all the relevant factors
- Every event should have an appropriate level of medical cover, set out in a specific medical plan and based on a comprehensive medical needs assessment
- Medical providers vary in capability and experience. Organisers should exercise due diligence in selecting one that is competent and reliable
- The medical provider should carry out a full needs assessment and produce an appropriate medical plan
- Organisers should ensure that medical staff are suitably qualified and be wary of designations which are not protected titles
- Proposed staffing levels and skill mix should be agreed by the organiser and the provider
- Medical facilities should be designed, sited, equipped and staffed in accordance with expected activity Reliable communications are key to effective working and where radio communications are used, a dedicated medical channel is recommended.

- Patient records are confidential and can only be released under certain circumstances
- Medical and welfare services should work together to reduce harm and safeguard adults and children who may be vulnerable
- Medical vehicles should be clean, reliable, fit for purpose and crewed and equipped to meet the clinical needs of the patient
- Organisers should consider all phases of the event, including build, break, ingress and egress, as these all have their own challenges
- Organisers should ensure that the medical plan includes capacity for unexpected contingencies

# Responsibilities

Refer to the on-line Purple Guide 'Medical Chapter'

## The Event Organiser should:

- ensure appropriate medical provision is available to all those attending or involved in delivering the event
- conduct due diligence in the selection of a competent medical provider, including ensuring suitable arrangements are in place for the transfer of patients requiring hospital care
- ensure the provision of all necessary infrastructure for delivery of the service
- minimise the effects of the event on the statutory healthcare services by providing good medical care on site
- encourage engagement from the Safety Advisory Group (SAG) where one is convened and/or NHS Ambulance Service

### Medical Provider should:

- plan and deliver a safe, effective and resilient medical service to the event.
- provide sufficient appropriately skilled, experienced and equipped staff to provide the service.
- identify a named Event Medical Manager to oversee all aspects of service delivery. At large events, this person should not have any other hands-on role.

The aim should be to manage casualties on site as far as it is safe and appropriate to do so and to arrange off-site transfer within a satisfactory timeframe when it is not.

# **Assessing The Medical Cover Needed the Event**

Refer to the on-line Purple Guide 'Medical Chapter'

The calculation of medical needs should not be based solely on expected numbers attending but should take account of all the relevant factors

Every event is unique and medical presentations may be influenced by a range of factors:

- nature of the event
- temperature and humidity
- · duration of the event
- numbers of people attending
- age profile and whether there are vulnerable groups
- activities on site
- site conditions
- camping

Where there is public camping at an event, this may present specific challenges in terms of medical cover, and these should be included in the needs assessment. If there are only a few crews staying overnight on site, this is unlikely to have an impact.

Organisers should create a medical specification for providers to work to. This should contain sufficient information, including medical reports from previous events, to enable them to make their own assessment of the cover required. Early engagement with the local NHS Ambulance Service may be helpful in determining an appropriate level of cover for a particular event.

Events may be considered as falling into five tiers, each indicating a different level of medical complexity. There are no hard and fast rules to govern the allocation of events to specific tiers; judgement and common sense are needed. It is again emphasised that the number of people expected to attend an event is only one factor to be taken into account and a formulaic approach simply does not work. The descriptions below are intended to give guidance and are not prescriptive; not all the criteria for each tier need to apply.

**Tier 1** events are the smallest and simplest events (licensable activities will need authorisation under the Licensing Act 2003, possibly a Temporary Event Notice if less than 500).

The presence of some of these factors indicates that an event may be in Tier I:

- duration of a few hours or less.
- no activities carrying a risk of injury
- no or minimal alcohol consumption
- no or minimal recreational drug use
- fewer than five hundred attendees
- hospital referrals very unlikely

#### Cover level:

Tier 1 events can often be safely covered without a healthcare professional or an ambulance in attendance. In some cases, organisers might not need to provide a contracted resource, but they should still consider:

- provision of a suitable first aid kit and someone able to use it.
- location of nearest defibrillator and how to access it (www.defibfinder.uk).
- ensuring that appropriate people know how to access emergency assistance.

**Tier 2** events are somewhat larger events which often fall within the scope of local authority licensing.

The presence of some of these factors indicates that an event may be in Tier 2:

- duration more than a few hours but no longer than a day
- low risk of illness or injury from activities
- social drinking of alcohol
- no more than isolated drug use
- up to two thousand attendees
- hospital referrals unlikely

#### Cover level:

Tier 2 events need a dedicated first aid resource, preferably led by a healthcare professional.

Where indicated by the medical needs assessment, provision may include:

- a nominated lead who is responsible for the delivery of the service on site
- supporting first responders or healthcare professionals
- an ambulance with suitably qualified crew if there is an expectation of transfers to hospital.

**Tier 3** are normally larger events with greater potential for illness and injury.

The presence of some of these factors indicates that an event may be in Tier 3:

- duration more than one day
- moderate risk of illness or injury from activities
- alcohol intoxication likely
- drug intoxication likely
- up to five thousand attendees
- · hospital referrals foreseeable

#### Cover level:

Tier 3 events need a dedicated medical resource.

Provision should normally include:

- a clinical lead, who should be a registered healthcare professional with prehospital experience
- other healthcare professionals, such as doctors, paramedics and nurses
- first responders
- ambulance(s) with suitably qualified crew if hospital transfers are expected

**Tier 4** are larger events, where more medical presentations may be expected.

The presence of some of these factors indicates that an event may be in Tier 4:

- duration one to several days
- significant risk of illness or injury from activities
- alcohol intoxication expected
- drug intoxication expected
- up to ten thousand attendees
- hospital referrals likely

#### Cover level:

Tier 4 events need a dedicated medical resource.

Provision should normally include:

- a clinical lead, who should be a registered healthcare professional with prehospital experience
- healthcare professionals, such as doctors, paramedics and nurses
- first responders
- ambulance(s) with suitably qualified crew

**Tier 5** are the largest or most complex events, including all mass gatherings, as well as smaller events that have higher risks.

The presence of some of these factors indicates that an event may be in Tier 5:

- duration several days
- · high risk of illness and injuries
- · alcohol intoxication expected
- drug intoxication expected
- more than ten thousand attendees
- referrals to hospital expected

#### Cover level

Tier 5 events need a comprehensive dedicated medical resource.

Provision should normally include:

- a clinical lead, who should be a registered doctor, preferably an emergency medicine specialist
- registered healthcare professionals, including doctors, nurses and paramedics
- first responders
- ambulances with suitably qualified crew
- control staff
- Organisers should ensure that sufficient medical resources are provided to deliver the level of cover required throughout the event. If an ambulance and crew are required to undertake a hospital transfer, this should not compromise the cover left on site.
- Prospective medical providers should submit a specific Medical Needs
   Assessment which should be used to determine the extent and level of cover required. This will then be used to create a detailed Medical Plan.

Every event should have an appropriate level of medical cover, set out in a medical plan and based on a comprehensive medical needs assessment.

# **Choosing a Medical Provider**

Refer to the on-line Purple Guide 'Medical Chapter'

Where a contracted medical service is required, organisers should ensure they have the skills, experience and resources needed to provide safe and effective cover. It is good practice to take up references from other organisers who have used the provider.

Medical teams may need to be able to manage a wide range of medical, trauma and mental health presentations, including substance misuse and chronic conditions.

In England ambulance services undertaking off site patient transport services need to be registered with the Care Quality Commission for the provision of such services. Further guidance can be found here: CQC Guidance

# **Event Planning for Medical Cover**

Refer to the on-line Purple Guide 'Medical Chapter'

## **Medical Staff**

Refer to the on-line Purple Guide 'Medical Chapter'

Organisers should obtain assurance from the medical provider that all staff working at the event hold current and appropriate qualifications and certification for their designated role.

Be wary of other designations which are not protected titles and give no indication of clinical competence or ability.

#### Protected titles:

Currently registered healthcare professionals whose status can be checked on a publicly accessible database (links below):

#### **Doctor**

A person currently registered as a doctor with the General Medical Council

- the doctor should be an active part of the medical team
- they should ideally have pre-hospital, acute or emergency care qualifications

#### **Paramedic**

A person currently registered as a paramedic with the <u>Health Care Professionals Council</u>

 a pre-hospital specialist who will be accustomed to providing unscheduled care in difficult environments

## Registered nurse

A person currently registered as a nurse with the <u>Nursing and Midwifery Council</u>, and preferably with experience in:

- pre-hospital care, emergency and urgent care or primary care
- useful sub-specialties such as minor injury and illness, wound care, prescribing, substance misuse, mental health, and sexual health

## **Unprotected titles:**

Providers might use a range of titles to describe their medical staff. Some indicate an appropriate qualification, whilst others such as "medic" have no generally accepted definition.

Because the range of qualifications available both now and historically has varied, providers should map staff to the Royal College of Surgeons of Edinburgh (RCSEd) Faculty of Prehospital Care (FPHC) Pre-hospital Emergency Medicine (PHEM) competency framework.

The RCSEd FPHC PHEM identifies eight levels of prehospital qualification from A to H, based on competency and capability.

The minimum qualification level for working unsupervised at licensed events is a nationally recognised PHEM D qualification in pre-hospital care.

In most cases, qualifications at PHEM C or below, are not considered suitable at licensed events, except when working as part of a larger team under direct supervision. However, such qualifications may be acceptable at Tier 1 Events.

Organisers should ensure that medical staff are suitably qualified and be wary of designations which are not protected titles

NOTE that in most cases, qualifications such as First Aid at Work, Emergency First Aid at Work, and ambulance service first responders are not considered suitable at public events.

# **Medical Staffing Levels**

Refer to the on-line Purple Guide 'Medical Chapter'

Having selected a medical provider, the event organiser should be satisfied that the proposed cover is appropriate and adequate in terms of numbers and skill mix. In the case of larger events, a Safety Advisory Group may also have a view. See Appendix 1 (Medical section – Purple Guide) for guidance on assessing suitable levels of provision.

## **Medical Facilities on Site**

Refer to the on-line Purple Guide 'Medical Chapter'

The organiser should ensure that the medical provider has a suitable place in which to treat patients which is:

- clean & well lit
- safe & warm
- accessible
- fit-for-purpose

# Medical Provision During the Build & Operational Phase

Refer to the on-line Purple Guide 'Medical Chapter'

## **Medical Vehicles**

Refer to the on-line Purple Guide 'Medical Chapter'

# **Medical Provision During the Egress & Post-Event Phase**

Refer to the on-line Purple Guide 'Medical Chapter'

## **Off Site Transfers**

Refer to the on-line Purple Guide 'Medical Chapter'

The transfer of patients outside of an event footprint is a regulated activity under the Health & Social Care Act (2012) and enforced by the Care Quality Commission. Therefore, if the assessment of an event indicates that transfers to hospital is likely, you must seek assurance that this service is not only available from your chosen provider but falls within the legislation outlining this area. You may find that your chosen provider is able to provide this service via a sub-contractor who is registered, so do raise the question.

#### Incidents

Refer to the on-line Purple Guide 'Medical Chapter'

## After the Event

Refer to the on-line Purple Guide 'Medical Chapter'

#### **Medical Needs Assessment**

Refer to the on-line Purple Guide 'Medical Chapter'

• Every event is unique, and the medical cover required is determined by the specific characteristics and risks of the event, rather than by using a 'score sheet' approach.

- All events have risks associated with them. The aim should be not to eliminate risk, which is rarely possible, but to reduce it to an acceptable level.
- Only recognised risks can be satisfactorily managed. The aim of a medical needs assessment is to identify the issues and determine the residual level of risk after mitigation measures have been put in place. It will then be possible to see where further mitigation is needed to reduce this to an acceptable level.
- The needs assessment does not have be complicated and should be widely accessible. It is a "live" document and will be added to as new issues are identified.
- There should be wide input into conducting the assessment. This is a useful exercise enabling the event team to consider everything that might go wrong.

## **Conducting a Medical Needs Assessment**

Refer to the on-line Purple Guide 'Medical Chapter'

All identified issues are listed, and consideration is given to:

- the likelihood of these occurring (L)
- their potential consequences (C)
- the mitigation currently in place.
- Concerns may then be stratified using a simple "5 x 5" scoring matrix; multiplying L x C gives a risk rating for each item.

		Likelihood (L)					
			Rare	Unlikely	Possible	Likely	Certain
Consequences (C)			1	2	3	4	5
	Major	5	5	10	15	20	25
	Significant	4	4	8	12	16	20
	Moderate	3	3	6	9	12	15
	Minor	2	2	4	6	8	10
	Insignificant	1	1	2	3	4	5

## **Medical Plan**

Refer to the on-line Purple Guide 'Medical Chapter'

The Event Medical Plan written by the medical provider after completing a full needs assessment should include:

- name(s) and roles of the medical provider(s)
- named individual(s) with responsibility for coordinating medical provision and normally available on-site during the event
- type of event with reference to audience profile, activities on site and past history
- event location with access and egress routes
- · agreed start and finish times of contracted cover
- site plans showing access routes (including routes for emergency access) and delineating medical provider's area of responsibility (agreed with NHS ambulance service)
- specific arrangements for covering campsites
- medical staff numbers and skill-mix
- arrangements for staff camping, catering, showers, toilets, and parking
- · communications plan, with command-and-control structure where appropriate
- records policy & GDPR arrangements for information sharing, including RIDDOR reporting
- safeguarding arrangements for vulnerable adults & children
- infection prevention and control measures, including the management and disposal of sharps and other clinical waste
- contingency plans for major or mass casualty incidents
- medical needs assessment and contingency plans for known hazards

# Complete Sections A, B & C and return it to ESOU.Events@secamb.nhs.uk

& SAG@rother.gov.uk

Section A:					
Tier rating of event (1 to 5):					
Name of event:					
Location:					
Date of event:					
Numbers attending:					
Audience age range:					
Music genre:					
Organiser:					
Organiser email:					
Organiser phone number:					
Section B					
Enter risk scores (1 to 5) for each category (5 highes	t risk)				
<ul> <li>Expected number of patient presentations</li> </ul>	:				
Expected acuity	:				
Expected levels of drug & alcohol problems	:				
Expected levels of violence & disorder	:				
Will your medical cover be, tick as relevant					
• First Responder led service :					
Paramedic or Nurse led service :					
Doctor led service :					
Emergency Medicine Doctor led service :					

# Section C medical cover details:

Medical Provider Details Company Name and full address	
CQC registration number if registered	
Email contact	
Telephone Number(s)	
Contact phone number during the event.	
Name of person(s) in charge of medical cover during the event.	
Medical team command structure and lines of responsibility	
Start time for medical cover.	
Finish time for medical cover	
Number of medical staff on duty and qualification levels.	
Will you have the ability to convey patients to hospital from the event?	
Number of ambulances at the event.	
Number of first aid treatment areas and their location(s) at the event.	

Can you confirm all medical staff have no other duties i.e. a security role?	
How will the medical team communicate during the event?	
Who will have the responsibility to ring 999 if NHS ambulance services are required?	