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Replaces: V1, VIP and Celebrity Visits, CORP/PROC/053		Head of Department: Mary Aubrey, Director of Governance	
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Which Principles of the NHS Constitution Apply? 3, 5, 7 <u>Principles</u>		Which Staff Pledges of the NHS Constitution Apply? 1 <u>Staff Pledges</u>	
Does this document meet the requirements of the Equality Act 2010 in relation to Race, Religion and Belief, Age, Disability, Gender, Sexual Orientation, Gender Identity, Pregnancy & Maternity, Marriage and Civil Partnership, Carers, Human Rights and Social Economic Deprivation discrimination? Yes			
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1. SUMMARY

The Trust arranges visits by VIPs from time to time and provides access to a range of services and departments for media crews. Celebrity and VIP visits play a relevant role in promoting our services, enhancing patients' experience and motivating staff. Positive media coverage is important in building and maintaining public confidence in the Trust and in the wider NHS.

The Trust aims to support and accommodate such visits wherever possible; however, we recognise our responsibility to protect the wellbeing, dignity and privacy of patients and to ensure there is no safety and security risk to families or staff. We also recognise the need to ensure any such visits do not have a detrimental effect on clinical care.

As a result, the Trust will take practical measures to ensure robust arrangements are in place to organise and manage external visits safely, and minimise disruption.

This procedure requires that official visits are always formally approved and visitors are always accompanied throughout the visit to the Trust, especially where there is a possibility of contact with lone staff or patients/visitors.

As celebrities/VIP/Non VIP's are often accompanied by their own entourage, this entails supervising and chaperoning any accompanying persons they may bring with them. This procedure applies without exception, in accordance with the report into the Lampard Enquiry 2015.

Themes and lessons learnt from NHS investigations into matters relating to Jimmy Savile

The Lampard Enquiry 2015 has demonstrated the need to have robust recording of visits, which is securely stored and can be accessed on a historical basis beyond the normal time frames for clinical /departmentally held records. Records will be kept in line with the Trust policy which in this case requires them to be retained within the Trust for a period of 20 years and then archived by the Trust.

This procedure recognises that many 'sanctioned' visits are organised as "last minute "one-off" events. As a result, standard safeguarding arrangements, such as Disclosure and Barring Service (DBS) checks, may not be appropriate. It also recognises circumstances where certain groups or individuals have long term or ongoing relationships with the Trust – such as dedicated fundraisers, Foundation Trust Members or video film crews.

2. PURPOSE

The purpose of this document is to inform staff at UHMBT about the procedures for organising and undertaking visits to the hospitals for sanctioned visitors such as VIP's, and celebrities. By the very nature of these visits, these procedures will also relate to local and national media organisations.

All visits to the Trust by 'sanctioned' visitors must be organised and managed in accordance with the procedures outlined in this document.

The procedure aims to:

- Ensure that staff are aware of the correct procedures for organising visits at our hospital sites.
- Build awareness amongst all staff in the organisation of their responsibilities in ensuring that

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VIP visits are handled properly.

- Ensure appropriate 'safeguarding' arrangements are in place for all patients.

3. SCOPE

The procedure applies to all Trust employees involved in the management of visits to the Trust by media, VIPs or celebrities.

4. PROCEDURE

4.1 Duties and Responsibilities

4.1.1 Head of Corporate Communications

- Provides team leadership and is responsible for developing and updating the procedure for managing and handling visits to the Trust by sanctioned visitors.

4.1.2 Corporate Communications Manager

- Ensures all media and celebrity/VIP visits are handled effectively and responsibly.
- In co-operation with the Associate Director of Corporate Affairs, provides briefing to the Executive Leadership team or board/lead director and other internal/external stakeholders, as appropriate, on media activity and VIP visits and their potential impact.
- Alerts Trust security and Support Departments to all media and VIP visitors to the hospital.
- Holds a schedule / register of who is coming to the Trust.
- Monitors the implementation of this policy

4.1.3 Security Team

- Provide support during visits as required and as agreed with the Communications Team.
- Together with the Communications Team, carry out risk assessments prior to the visit, if appropriate or liaise with local police or Royal Protection Officers.
- Assessment will determine the appropriate level of additional resources or control measures, if required. Risk assessment should include the likelihood of uninvited photographers and followers or fans potentially attracted by the presence of a celebrity or VIP.
- If disruption to hospital business or clinical care is judged likely, then senior staff may advise that the visit is inappropriate, suggesting a postponement or cancellation. This would need to be approved by an Executive.

4.1.4 Executive Chief Nurse

- Ensures that volunteers are authorised and properly managed by the Engagement Manager to work in the hospital. The process for management of volunteers is identified in the Management of Volunteers Procedure (Section 6).

4.1.5 Associate Director of Estates

- Ensures that all contractors on site are appropriately checked and authorised in line with existing procedures. The process for management of Contractors is identified in the Control

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of Contractors Procedure (Section 6).

4.1.6 Head of Charities and Fundraising – for visits related to Charitable Trust

- Arranges VIP/Celebrity visits on behalf of the Trust charity and ensures that all procedures outlined in this document are followed.
- Notifies the Associate Director of Corporate Affairs/Head of Corporate Communications about visits.
- Ensures VIPs/Celebrities are escorted appropriately throughout their visits.
- Agree access for future visits with local clinical staff who, in turn, will arrange access to ward areas.

4.1.7 Clinical Division (CD)

- Ensures clinical teams are aware of this procedure
- Monitors the implementation of this procedure
- Records appropriate details of the visit e.g. names, times of visit, areas visited, incidents. (See Appendix 1).

4.1.8 Assistant Chief Nurses

- Support the Corporate Communications Team in organising visits to their areas.
- Accompany sanctioned one-off or short-term visitors where appropriate.
- Report any risks identified in advance or incident that may occur during a visit.
- Ensure all staff adhere to this procedure.
- Ensure the safety, wellbeing and interests of patients and staff during visits

4.1.10 All Staff

- Must act in accordance with this procedure and support visits to their areas by representing the Trust properly and checking identification/authorisation where appropriate – acting professionally at all times.

4.1.11 Volunteers

- Must ensure they have appropriate checks and authorisation to work in clinical areas through the Engagement Manager. They must carry and display Trust identification badges at all times.

4.2 Requirements

One-off or short-term ‘sanctioned’ visitors must always be accompanied throughout their visit to the Trust as there will be the possibility of contact with lone staff or vulnerable patients/visitors.

‘Sanctioned’ visitors who are in the Trust for extended periods of time, such as video or documentary film crews, or who are visiting on repeated occasions must be checked and

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authorised.

All visits by media, VIPs or celebrities are to be managed by the Communications Team. Access by other sanctioned visitors will be authorised and overseen by local clinical leaders e.g. Ward Managers or Matrons and managed by relevant Trust or Charitable Foundation staff.

All requests for VIP/Celebrity visits to wards or for individual patients must be made to the Corporate Communications Team. All requests for VIP visits should be discussed with either the Associate Director of Corporate Affairs or the Head of Corporate Communications.

If an individual or team is approached directly by a celebrity or VIP, the proposed visit must be approved by, and organised through, the Corporate Communications Team. Visit supervision may be delegated to local clinical teams if appropriate.

4.2.1 Arranging Visits

In advance of any VIP/Celebrity or media visit, the Corporate Communications Team will liaise with the relevant clinical areas to ensure that it is clinically appropriate to visit the areas on the proposed dates.

The Head of Corporate Communications will ensure the executive team is made aware of the visit.

For Celebrity visits, the Head of Corporate Communications or a nominated representative, will work with the relevant clinical division to ensure that the proposed celebrity is appropriate and relevant to the age and interests of the patient as well as their healthcare needs. The details of any arrangements made should be logged by the CD team.

The Head of Corporate Communications will alert the Trust Security team to all VIP and Celebrity visitors as soon as possible.

Once any visit is confirmed, the CD will be notified. On the day prior to the visit, the ward will be contacted by the Corporate Communications Team, or a member of the CD management team to ensure there is no infection risk or any other reason the visit should not take place.

Before the visit, any VIP/Celebrity visitor will be must be advised that if they have any infectious condition, they should not visit the Trust. VIP/Celebrity visitors will be advised in advance that they must not wear anything in the wards below their elbows and that they will be asked to make full use of the alcohol hand sanitizers located around the hospital.

If a VIP/Celebrity arrives at the hospital without any prior notice, and is not on a private visit to see a relative or friend who is a patient, the Corporate Communications Team must be notified immediately on **01539 716675**.

The visitor should be held at reception or at the ward entrance until a member of the Corporate Communications Team arrives.

If a visit of this nature occurs at the weekend or outside normal working hours, the on-call Gold Command should be informed by the site manager / Senior Manager on Call (SMOC). They in turn will contact the on-call Corporate Communications representative.

4.2.2 Arrival at the Hospital

Upon arrival at the hospital, any VIP/Celebrity visitor will be met by a member of staff, who will normally be a senior member of the CD or Executive Team. Sanctioned visitors should be met at

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the main reception area of the hospital, and then escorted to the pre-arranged clinical areas where a briefing will take place by a member of the Corporate Communications Team in advance of the actual visit.

4.2.3 During Visits

A Trust representative, who will normally be a local clinical leader or member of the Corporate Communications Team, should remain with the sanctioned visitor throughout the visit until they are escorted from the building. If it is necessary for another representative to take over, this fact must be logged as part of the formal record of the visit.

Sanctioned visitors who do not have the appropriate checks and authorisation must not be left unaccompanied; In addition, any time they are in a patient's room, there will be a chaperone who should be a member of the Corporate Communications Team, member of the Trust Charities team or a member of staff from the ward.

4.2.4 Ward protocol

The Trust representative will ensure that all appropriate ward protocols including infection prevention and control are observed by the VIP/celebrity visitor, or media team.

The Clinical Division team will ensure that appropriate details of the visit are recorded and retained, and can be made available for inspection, e.g. sanctioned visitor names, times of visit, areas visited. A record must be kept to verify whether the visit was managed properly and that no incidents took place.

Any risks or incidents must be reported through the normal process as identified in Reporting and Management of Incidents including Serious Incidents (Section 6).

4.3 Confidentiality / Consent Forms

Any patients who may be involved in a VIP / celebrity visit, e.g. they are an in-patient on a ward being visited, will be asked in advance of the visit whether they mind being potentially approached by the visitor.

Any patient photographed with the VIP has to sign a consent form, provided by the communications team. This is necessary for both our in house photographers and for any press photography.

4.4 Photography

Any photography should be in a private space in the ward – whether a room or a bay – that does not have any patient information written on the walls behind.

4.5 Confidentiality

All sanctioned visitors will be reminded that what they witness is private to each family, and unless given express permission to do so by the family, should not be discussed in public forums upon leaving the hospital.

4.6 Staff Behaviour

Staff are reminded that as employees, they are representatives of the Trust and are expected to behave professionally at all times. During VIP/Celebrity visits, staff should continue in their roles as usual while supporting the management of the visit where appropriate.

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Sanctioned visitors to ward areas should always be greeted appropriately by staff and treated respectfully throughout their visit. Staff must not approach celebrities on any wards, corridors or other areas of the hospital unless advised to do so by the Corporate Communications Team. This includes requesting autographs or photographs.

During visits, staff should not be present on wards unless required to be there in a work-related capacity.

4.7 Raising Concerns About Visitors

If during a VIP / celebrity visit, the behaviour of the visitor or a member of their accompanying party gives cause for concern, then this should be raised at the time with the member of staff who is supervising them. If the behaviour is of a highly inappropriate nature, for example causing upset or distress to patients, then the person supervising the visit may, in conjunction with others present, take the decision to bring the visit to an end. Following this, follow up action may be required, for example, incident reporting.

4.8 Volunteers

All volunteers working in the organisation will be appropriately vetted, trained and inducted. This will include a check being carried out by the DBS, formally the Criminal Records Bureau (CRB).

4.9 Education Centre

VIP and celebrity visits to the Education Centre should be organised and approved by the Corporate Communications Team in association with the relevant organising department e.g. Workforce. The Head of the Unit will ensure all School, College, University and Centre staff adhere to the Trust procedure.

4.10 Monitoring Arrangement

Compliance with this procedure will be monitored by the Head of Corporate Communications and the Executive Chief Nurse.

Monitoring will be on-going and will include compliance with procedures outlined above, together with feedback from staff and those involved in visits.

All consent forms to be retained by the Corporate Communications Team.

The CD team will maintain a record of all issues related to VIP/Celebrity visits. Any negative issues identified will be considered for inclusion in the Trust's Risk Register.

Where risks are identified, an action plan will be devised by the Head of Corporate Communications, in conjunction with the appropriate Assistant Chief Nurse, Head of Security and any other relevant staff

4.11 Training

Induction Training will include local procedures and processes forming part of the Access Procedure for Sanctioned Visitors. Ad hoc advice may be sought from the Head of Corporate Communications.

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5. ATTACHMENTS	
Number	Title
1	Record of Visit
2	Equality & Diversity Impact Assessment Tool

6. OTHER RELEVANT / ASSOCIATED DOCUMENTS	
Unique Identifier	Title and web links from the document library
Corp/Pol/002	Control of Contractors http://uhmb/cs/tpdl/Documents/CORP-POL-002.docx
Corp/Pol/109	Management of Volunteers http://uhmb/cs/tpdl/Documents/CORP-POL-109.docx
Corp/Proc/022	Reporting and Management of Incidents including Serious Incidents http://uhmb/cs/tpdl/Documents/CORP-PROC-022.docx

7. SUPPORTING REFERENCES / EVIDENCE BASED DOCUMENTS	
References in full	
Number	References
1	Lampard, K. (2014) Independent oversight of NHS and Department of Health investigations into matters relating to Jimmy Savile. Department of Health: London
2	
3	

8. DEFINITIONS / GLOSSARY OF TERMS	
Abbreviation or Term	Definition
Celebrities	Famous/High profile figures who might well be known to the public and, therefore, to patients and their families – also includes costumed characters as these would be well known to the children and young people
Clinical Areas	Any areas of the hospital in which clinical care is provided to inpatient or outpatients. This would include all wards, theatres, departments and clinics. It also includes any area associated with health care or business of the Trust which has a secure door or requires a hospital pass or staff member to gain entry.
Contractors	External workers contracted by the Trust to carry out specialist work within the Trust
DBS	Disclosure and Barring Service
Media	Journalists or other Representatives of the print or broadcast media. This includes associated technical or creative industries personnel such as video/sound crews, or photographers
Public Areas	Any location in the hospital that is accessible by the general public and does not have secure entry. These would include reception areas, catering and retail areas
Sanctioned Visitors	Individuals or Groups who are invited or who have approval to be on hospital premises for an official purpose or for the benefit of patients, staff, the Trust or the NHS These Include:
VIP's	Key stakeholders including Ministers, Elected representatives, Overseas Dignitaries, Royalty

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Volunteers/Fundraisers	People who are working in the Trust on a paid or voluntary basis to support the business of the Trust, or to generate financial support or present funds raised for the benefit of patients, staff or the Trust
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9. CONSULTATION WITH STAFF AND PATIENTS	
Enter the names and job titles of staff and stakeholders that have contributed to the document	
Name	Job Title
David Wallace	Head of Corporate Communications
Phil Woodford	Associate Director of Corporate Affairs
Gertie NicPhilib	Deputy Director of Workforce
Mary Aubrey	Director of Governance
Barbara Becker	Head of Compliance and Assurance
Liz Thompson	Named Nurse for Safeguarding Children
Sascha Wells	Head of Midwifery
Jane Heath	Named Midwife for Safeguarding

10. DISTRIBUTION PLAN	
Dissemination lead:	Christine Morris
Previous document already being used?	No
If yes, in what format and where?	
Proposed action to retrieve out-of-date copies of the document:	
To be disseminated to:	
Document Library	
Proposed actions to communicate the document contents to staff:	Include in the UHMB Weekly News – New documents uploaded to the Document Library

11. TRAINING		
Is training required to be given due to the introduction of this policy? *Yes / No * Please delete as required		
Action by	Action required	Implementation Date

12. AMENDMENT HISTORY				
Revision No.	Date of Issue	Page/Selection Changed	Description of Change	Review Date
V1.1	Nov 2017	Page 3	BSF Page Added	

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Appendix 1: Record of Visit

Form to be completed for each visit and record to be retained by Clinical Division

Name of CD:

Location of Event:

Date of Event:

Authorisation:

Trust Representative:

Name of Visitor/s:

Purpose of visit:

Time of Event:

Details of Visit:

Risk Assessment:

Incident Reporting:

Sign off:

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Appendix 2: EQUALITY & DIVERSITY IMPACT ASSESSMENT TOOL

		Yes/No	Comments
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	• Age	No	
	• Disability	No	
	• Race	No	
	• Sex	No	
	• Religious belief – including no belief	No	
	• Sexual Orientation	No	
	• Gender reassignment	No	
	• Marriage and civil partnership	No	
	• Pregnancy and maternity	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination are there any exceptions - valid, legal and/or justifiable?	N/A	
4.	Is the impact of the policy/guidance likely to be negative?	No	
4a	If so can the impact be avoided?	N/A	
4b	What alternative are there to achieving the policy/guidance without the impact?	N/A	
4c	Can we reduce the impact by taking different action?	N/A	

For advice in respect of answering the above questions, and / or if you have identified a potential discriminatory impact of this procedural document, please contact the relevant person (see below), together with any suggestions as to the action required to avoid/reduce this impact.

For Service related procedural documents: Lynne Wyre, Deputy Chief Nurse & Lead for Service Inclusion and Diversity

For Workforce related procedural documents: Karmini McCann, Workforce Business Partner & Lead for Workforce Inclusion and Diversity.

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