



## Celebrity, VIP and Visitor access Policy

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The following documents are closely associated with this policy:

- Code of Conduct for Employees in Respect of Confidentiality
- Data Protection Policy
- Confidentiality Policy
- Recruitment and Selection Policy
- Communications, Marketing and Engagement Strategy
- Communications Major Incident Strategy
- Allegations Management policy (safeguarding)

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# Visitor access policy

## Assurance statement/policy scope

The purpose of this policy is to inform SCAS staff about the procedures for organising and undertaking visits to the trust for Celebrities, VIPs celebrities and Media representatives.

All visits to SCAS by Celebrities, VIPs and Media representatives must be organised and managed in accordance with the procedures outlined in this policy.

### 1. Introduction

1.3 The purpose of this policy is to ensure there is no risk to the safety and security of patients and staff arising from visits to South Central Ambulance Service NHS Foundation Trust by approved or invited visitors such as Celebrities, Very Important People (VIPs), or media representatives.

1.4 Celebrity visits play a significant role in enhancing our patients' experience and motivating our staff. Although the Trust aims to accommodate these visits wherever possible, it recognises its responsibility to safeguard the privacy of patients, families and staff. It also recognises the need to ensure any such visits do not have a detrimental effect on SCAS's ability to provide clinical care or advice, either face to face or on the phone.

1.5. The policy requires that one-off or very short-term approved official visitors are always accompanied throughout their visit to the Trust where there is a possibility of contact with vulnerable patients/visitors.

1.6. Where approved official visitors who are in the Trust for extended periods of time, such as documentary film crews, or who are here on repeated occasions, such as a charity patron or celebrity linked with a particular service, and they are likely to be unaccompanied, they must be appropriately checked and authorised.

1.7. All visits by media, VIPs or celebrities are to be handled and managed by the Communications and Engagement team because of the high profile they can attract. Any requests for celebrity or VIP visits must be referred to and approved by or organised by the Communications and Engagement team. Visit supervision may be delegated to area clinical teams if appropriate.

1.8. If a VIP or celebrity attends the Trust without any prior notice the Communications and Engagement team must be notified immediately. The visitor should be held in the reception of the building they arrive at until a member of the Communications and Engagement team, or other SCAS employee delegated by the team, arrives or is made contact with.

### 2. Objectives

2.1. The objective of this policy is to ensure there is no risk to the safety and security of patients and staff arising from visits to the Trust by approved or invited visitors such as VIPs and celebrities, or media representatives.

2.2 SCAS will prioritise full consideration of patients, families and staff needs when arranging and undertaking visit

2.3. To set out a standard approach, official visitors to the Trust must be organised and managed in accordance with this policy.

2.4 SCAS will take practical measures to ensure robust procedures are in place to handle external visits safely and minimise the disruption they may have on the sites visited, ensuring the very best staff/patient experience.

### 3. Scope

3.1. The Trust arranges visits by celebrities and VIPs from time to time and provides access to a range of services including Clinical Coordination Centre (EOC) and frontline. Celebrity and VIP visits play a significant 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 NHS.

3.2. The Trust aims to support and accommodate such visits wherever and whenever possible. However, we recognise our responsibility to safeguard the safety and security as well as the privacy and dignity of patients, families and staff. We also recognise the need to ensure any such visits do not have a detrimental effect on our clinical care.

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

3.4. This policy recognises that many 'approved' visits are organised as 'one-off' events so that standard safeguarding arrangements such as DBS checks may not be appropriate. However, it also covers circumstances where certain groups or individuals have long term or ongoing relationships with the Trust, such as dedicated fundraisers or campaigners, or charity patrons, or documentary film makers.

### 4. Definitions

4.1. **Approved visitor** - individuals or groups who are invited or who have approval for an official purpose or for the benefit of patients, staff, the Trust or the NHS.

4.2. **VIP** - key stakeholders including Member of Parliament, elected representative, overseas dignitary, member of the Royal Family, member of Healthwatch or Health Overview and Scrutiny Committee

4.3. **Celebrity** - famous/high profile figure who might be well known to the public and therefore to patients and their families; also includes costumed characters as these would be well known to children and young people.

4.4. **Media** – journalists or other representatives of print or broadcast media organisations i.e. newspapers or television. This category will also include associated technical or creative people such as camera / sound crews, or photographers.

4.5. **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.

## **5. Responsibilities**

5.1. All VIP, celebrity or media visitors to the Trust must be agreed by the Trusts Deputy Director of Communications or their Team.

5.2 The Deputy Director of Communications has overall responsibility for ensuring all visits are handled effectively and responsibly. They will act as Trust contact for all VIP visits to ensure the correct procedures are followed. They will brief the Executive Office and other appropriate audiences on VIP visits and their potential impact when appropriate.

5.3 This agreement is made on behalf of the Chief Executive, Director of Operations and Director of Quality and Patient Care. In instances where the Deputy Director of Communications feels necessary direct consultation with the relevant parties will occur.

5.4 The Communications and Engagement team will hold overall responsibility for the arrangement and monitoring of all observers/ visitors to the Trust.

5.5 The Area Manager, Emergency Services Manager or Clinical Mentor will have overall responsibility in ensuring that the observer / visitor is supervised at all times by a named member of the Trust.

### **Director of Quality and Patient Care**

5.6 The Director of Quality and Patient Care has overall responsibility of the Trust's Compliance and Quality. The Director of Quality and Patient Care is the owner of this policy.

### **SCAS Safeguarding Lead**

5.7 The Safeguarding Lead is responsible for ensuring that the Trust is fully compliant with the Safeguarding legislation and advising the Trust in all aspects of safeguarding vulnerable persons.

5.8 The document lead is responsible for ensuring that the development, monitoring and content of this policy remains fit for purpose and reviews it regularly.

### **Deputy Director of Communications and Marketing**

5.9 The Deputy Director of Communications and Marketing (DDoCM) is responsible for liaising with: Chief Executive, Director of Operations and Director of Quality and Patient Care and other colleagues as appropriate to develop and maintain the policy for managing and handling visits to the Trust by approved official visitors.

5.10 The DDoCM will Provide briefing to Executive team or lead director and other internal and external stakeholders, as appropriate, on media activity and celebrity / VIP visits and their potential impact

5.11 The Membership, Engagement and Support Officer will maintain the Trust Register of approved official visitors

## **6. Procedure**

6.1. The policy requires that one-off or very short-term approved official (VIP, celebrity or media) visitors are always accompanied throughout their visit to the Trust where there is a possibility of contact with lone staff or vulnerable patients/visitors.

6.2. Where approved official visitors who are in the Trust for extended periods of time (i.e. for several months), such as documentary film crews, or who are here on repeated occasions, such as a charity patron or celebrity linked with a particular service and they are likely to be unaccompanied, they must be appropriately DBS checked to enhanced level and authorised.

6.3. All visits by media, VIPs or celebrities are to be handled and managed by the Communications and Engagement team. Any requests for celebrity or VIP visits must be referred to and approved or organised by the Communications and Engagement team.

6.4. Visit supervision may be delegated to Area Managers, Emergency Services Managers or Clinical Mentors if appropriate.

6.5. For celebrity visits, the Communications and Engagement team will work with the relevant area manager to ensure that the proposed celebrity is appropriate and is aware of their role whilst accompanying SCAS staff carrying out their duties.

## **7. Before the Visit:**

7.1 The Communications and Engagement team will alert a member of the Executive Team and the Trust risk team to all VIP and celebrity visitors as soon as details are known or any request is made.

7.2 All details of any visit should be cascaded to the relevant Trust staff and volunteers a minimum of 24 hours before the visit occurs.

7.3 If a visit is confirmed at less than 24 hours' notice, then the cascading process should take place as soon as possible. The DDoCM will inform the Head of Risk and all other relevant parties.

7.4 The Communications and Engagement team will alert relevant members of acute hospitals, Police, Fire and other services' Communications & Engagement Teams of the visit if there is a possibility that the visitor will come into contact with their patients or colleagues (i.e. out on the road, in an ED department etc.).

7.5 If a visit occurs outside normal working hours and especially at weekends the member of the communications team accompanying the visit should check with the Area Managers or another member of the Senior Leadership Team on the day of visit to ensure it remains clinically appropriate.

7.6 As soon as possible after any visit is proposed there should be a discussion to ensure that there are no infection risks or any other reasons the visit should not happen.

7.7 Before the visit any VIP or celebrity visitor will be advised that if they have any infectious condition they should not visit the Trust.

## **8. Arrival at SCAS premises:**

8.1 Most visitors will be met at the main reception if at Northern or Southern House when they visit and then escorted to the pre-arranged areas where the visit will take place. If the visit is at an ambulance station or resource centre or is a third manning observational visit, entry should not be permitted unless a member of staff has been identified to greet the visitor and has checked their ID.

8.2 However some VIPs and celebrities are so well-known that their presence might cause major disruption in main reception or might attract media attention outside the building. On these occasions the visitor would be brought on site via another route if at all possible.

8.3 The SCAS risk team would carry out the risk assessment and make appropriate arrangements including guiding the Communications team together with the VIPs security (if they have them). The risk assessment is to limit SCAS's exposure to paparazzi, if there were multiple members of the press this would be factored into the response by the risk team.

## **During the visit:**

8.4 Any visitor to the Trust should not be left unaccompanied within the Trust premise and must not be left unaccompanied at any time with any patients. Upon arrival at the SCAS site any visitor would be met by their chaperone, who would be a member of the Communications team or nominated senior clinical member of staff. That person would stay with them for the entirety of their visit until they are escorted from the building.

8.5 Whilst they are on SCAS premises, at no time would they be left unaccompanied. Any time they are in contact with a patient and/or their relatives/families, there will be either their chaperone or a member of staff, if space does not allow for both.

8.6 If a visitor group is large enough to warrant splitting there will be a chaperone with each group.

8.7 The Communications team will ensure that any of the trust protocols including infection prevention and control are observed by the VIP or celebrity visitor

8.8 Celebrities and VIP visitors will be encouraged to make frequent use of the alcohol hand sanitizers located around the trust premises.

8.9 If the celebrities and VIP escort or any staff member becomes concerned with the behaviour of the visitor during their visit then the escort must stop the visit and notify the nominated communications team staff member responsible for the visitor immediately. If the concerns are of a safeguarding nature then the safeguarding lead must be informed as soon as possible seeking advice on further actions required.

## **9 Confidentiality:**

9.1 All approved official visitors must be advised by the Communications and Engagement team member or by the Clinical manager accompanying them that patients and visitors are entitled to full confidentiality. Unless specific written and signed consent otherwise is given by the family, information and identities must not be made public.

9.2 All staff in the Trust should understand that high profile visits must be treated confidentially and often on a 'need to know' basis. This is to enable the visit to take place as smoothly and with as little disruption as possible.

9.3 Staff will be notified of visits only where appropriate and should not divulge information on these visits to other colleagues, patients, families or external parties.

9.4 All visitors will be reminded that what they witness is private to each patient and their family and unless given express permission to do so by the family must not be discussed in public forums including on social media channels

9.5 All approved official visitors must complete, understand and sign the Visitors Disclaimer and the Confidentiality Form at the time the placement is agreed.

9.6 Staff are reminded that, as employees, they are representatives of the Trust and are expected to behave professionally (SCAS Code of Conduct) in accordance with the Trust values at all times

9.7 During VIP and celebrity visits, staff should continue in their roles as usual while supporting the management of the visit where appropriate.

9.8 Visitors to all areas should always be greeted warmly by staff and treated respectfully throughout their visit.

9.9 Staff must not approach celebrities unless advised to do so by the Communications team. This includes asking for photographs and autographs.

9.9.1 Any concerns raised during the visitor's time within SCAS must be reported immediately and where possible appropriate action taken to terminate the visit.

9.9.2 All incidents involving visitors must be formally reported in accordance with Trust policy.

9.9.3 All staff must act in accordance with this policy and support visits to their areas by representing the Trust properly by checking for identification / authorisation where appropriate and acting professionally at all times.

## **10. Consultation**

10.1 The Director of Quality and Patient Care, the Trust Safeguarding Lead and the Deputy Director of Communications and Marketing have agreed the need for this policy. Its implementation is subject to review once agreed at Clinical Governance. This draft is in response to the Saville enquiry.

10.2 The Trust Equality and Diversity lead will be consulted to ensure that this policy supports the equality and diversity requirements

## **11. Dissemination**

11.1 This document will be made freely available to staff through the intranet site and a link to this document will be circulated to all members of staff.

## **12. References**

12.1 Equality Act (2010)

12.2 Sir David Nicholson letter to all NHS organisations in light of the recent abuse allegations against Jimmy Saville DH Gateway number: 18350 13 November, 2012

12.3 Health and Care Professionals Council (HCPC) <http://www.hpc-uk.org/>

12.4 Nursing and Midwifery Council (NMC) The Code: Standards of Conduct, Performance and Ethics <http://www.nmc-uk.org/>

12.5 Data Protection Act (1998)

12.6 Disclosure and Barring Service (2014) [www.GOV.UK/DBS](http://www.GOV.UK/DBS)

### **13. Monitoring Compliance and Effectiveness of the Policy**

13.1. Compliance with this policy will be monitored by the Deputy Director of Communications and Marketing.

13.2 This policy will be reviewed every two years by the Document Lead.

13.3 Where risks, deviations or failings to adhere to this policy are identified, this will be escalated to the Director of Quality and Patient Care and the Trust Chief Executive. An action plan will be formulated and monitoring arrangements with clear timescales drawn up.