VIP Visitor Policy

Solent NHS Trust policies can only be considered to be valid and up-to-date if viewed on the intranet. Please visit the intranet for the latest version.

Purpose of Agreement	This policy outlines the Trust's process for VIP visits to ensure any risk to the safety and security of patients and employees is mitigated.
Document Type	Policy
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Document Manager (Job Title)	Associate Director of Communications
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Review and amendment log:

Version Number	Review date	Amendment section no.	Page	Amendment made / summary	Changes approved by
2	January 2019		6	Pre-visit process to ensure non-executive directors are informed of planned visits	Policy Steering Group, Assurance Committee
			Various	Changes of terminology	
			Various	Strengthen role of Communications Team in managing VIP visits	
			8	Change in role job titles, inclusion of CEO	
			11	Change to flow chart regarding unplanned visits out of hours	
3	February 2022		Various	General update, changes include updated job titles, policy names and inclusion of updated EIA Appendix	Policy Steering Group, Clinical Executive Group

SUMMARY OF POLICY

- This policy outlines the approach the Trust takes to VIP visits.

- It outlines the Trust's process for VIP visits to ensure any risk to the safety and security of patients and employees is mitigated.

- It includes guidance for staff to follow prior to a VIP visit, when a VIP arrives at a premises as well as during and post visit.

- The policy also includes guidance for staff to follow in the event that a VIP arrives at a service area outside of working hours.

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VIP VISITOR POLICY

1.   INTRODUCTION & PURPOSE

1.1   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 the Trust by approved or invited visitors such as very important persons (VIP) and celebrities, or media representatives. It is not concerned with celebrities/VIPs visiting people in a private capacity as a friend or family member, or patient. Such visits should be treated and managed like all other visitors unless there are specific security requirements identified.

1.2   The purpose of this policy is to ensure that there is no risk to the safety and security of patients or staff on the occasions of these visits to Trust premises by approved visitors.

1.3   All visits to the Trust by approved visitors must be organised and managed in accordance with this policy.

2.   SCOPE & DEFINITIONS

2.1   This policy applies to bank, locum, permanent and fixed term contract employees (including apprentices) who hold a contract of employment or engagement with the Trust, and secondees (including students), volunteers (including Associate Hospital Managers), Non-Executive Directors, and those undertaking research working within Solent NHS Trust, in line with Solent NHS Trust's Equality, Diversity and Human Rights Policy. It also applies to external contractors, Agency workers, and other workers who are assigned to Solent NHS Trust.

2.2   The Trust aims to support and accommodate such visits wherever possible; however, we recognise our responsibility to maintain the safety, privacy, security and dignity during visiting of our patients, families and staff. It is also recognised that we need to ensure such visits do not have a detrimental effect on clinical care provided.

2.3   The Trust will take practical measures to ensure robust mechanisms are in place to organise and manage external safety and minimise disruption to services.

2.4   This policy recognises that most visits by approved visitors will be a one- off event which means standard safeguarding arrangements such as DBS checks may be inappropriate. This may also be the case before or during an election (or pre-election period)) when politicians may arrange planned or unplanned visits to our premises.

Approved visitors – are individuals or groups who are invited or who have approval to be on Trust premises for an official purpose or for the benefit of patients, staff, the Trust or NHS. These may include:

- **Very Important Person (VIP)** – Key stakeholders including national and international Ministers, local elected representatives, ambassadors, civil servants, overseas dignitaries, member of the Royal Family
- **Celebrities** – Famous/high profile figures from sport, TV, film or music who are considered well known to the public. This could also include costumed characters as these would be well known to children and young people.
- **Media** – Representatives of local, national and international media including journalists, photographers and camera crew.

- **Volunteers/Fundraisers** – people who work for the Trust in a paid or voluntary capacity to support the business of the Trust to generate financial support or present funds for the benefit of patients, carers, public and staff.
- **Public areas** – any location within the Trust that is accessible to the general public and does not have secure entry. These include reception areas and catering areas.
- **Clinical and restricted areas** – any areas of the trust in which clinical care is provided to inpatient or outpatients. This would include wards, theatres, departments and clinics. It also includes areas associated with healthcare or business of the Trust that has a secure door or requires a pass or member of staff to gain entry.

3.   PROCESS / REQUIREMENTS

3.1   Pre visit instructions

3.1.1   All requests, even if embargoed by the authorities, must be made to the Communications Team using the form in Appendix 1. The Communications Team will liaise with the relevant clinical area/ operations director to ensure that it is appropriate to visit the area on the proposed date/s.

3.1.2   The Communications Team will use their judgement in informing the relevant Executive Team member (including relevant Director) and informing the CEOs office, via the Chief of Staff and the CEO's PA. The Chief of Staff, or nominated deputy, may decide to inform the Non-Executive Directors, and the rest of the Board, of any high- profile visits. The Communications Team will log all visits within the shared Teams file.

3.1.3   Prior to the visit, the VIP or celebrity visitor must advise the Communications Team of any infectious conditions they have been in contact with. If the Trust is notified of any infectious condition then the visit will be cancelled or postponed.   All celebrities or VIP visitors will be advised in advance by the Communications team and during the visit by local clinical staff to make frequent use of the alcohol hand sanitizers to clean their hands when moving around clinical areas. In addition, they will be advised to bare below the elbows.

3.2   Arrival at Trust premises instructions

3.2.1   When the approved VIP/celebrity visitor arrives at the Trust they will be met by a member of the Communications team. All approved visitors should be met at the main reception area so they can be escorted to the pre-arranged clinical areas where the visit will take place.

3.2.2   If a VIP or celebrity turns up without any prior notification and is not a private visit to see a relative or friend who is a patient, the Communications team should be notified immediately. The visitor should remain in the reception area or at the ward nursing station until clear instructions (including chaperoning if necessary) have been given by the Communications team.

3.2.3   If a visit occurs outside normal working hours, or at the weekend, the local service leader should check with the senior ward staff or the on-call Director to ensure that it has been authorised, the visit logged by the Communications Team, and that arrangements for chaperoning have been made. They should also check with the clinical area involved that it remains clinically appropriate.

3.3   **During visit instructions**

3.3.1   A member of the Communications Team and the service leader should remain with the approved visitor throughout the visit until they are escorted from the building.

3.3.2   Approved visitors who do not have appropriate checks and authorisation must not be left unaccompanied. In addition, any time they are in a patient's room they will be chaperoned by a member of the Communications Team and a member of staff from the ward.

3.3.3   The Trust representative will ask that all appropriate clinical protocols, including infection prevention and control are observed, by all attendees, including any VIP or celebrity visitor. All attendees will be asked if they have any infectious conditions.

3.4   **Confidentiality**

3.4.1   Prior to all approved visits the visitor will be informed by Communications team of the appropriate confidentiality and consent requirements for patients and staff, as well as themselves and will be expected to abide by them during and after the visit.

3.4.2   This includes obtaining appropriate consent for all images, still and moving, for use in all media, including social media, to protect patients, staff and approved visitor identity.

3.5   **Register of visitors**

3.5.1   A central register of visitors will be maintained by the Communications team. Staff have the responsibility of advising the Communications team of any VIP visits using the form in Appendix 1.

3.6   **Staff behaviour**

3.6.1   Members of staff are reminded that as employees they are representatives of the Trust and are expected to behave professionally at all times. During VIP and celebrity visits, staff should continue in their roles as usual while supporting the management of the visit where appropriate. Staff must refrain from taking photos, videos, requesting signatures or posting to social media accounts.

3.7   **Post visit instructions**

3.7.1   Following the approved visit the Communications Team will ensure:
   - The visit has been accurately logged
   - Where appropriate, internal and external promotion is undertaken
   - Appropriate letter(s) of thank you are issued to the visitor on behalf of the Trust
   - A debrief meeting is undertaken with all relevant stakeholders to consider any lessons learnt from the visit

3.8   **Breaches of policy**

3.8.1   Staff who become aware of a breach of policy are asked to raise the issue with their line manager in the first instance.

3.8.2   Line managers should seek to resolve the issue informally before escalating to People Services for further support if required.

3.8.3   If this policy could affect the reputation of the Trust the Communications team should be notified and the and an incident should be recorded on Ulysess.

3.9   **Major incident instructions**

3.9.1   During the response to an incident or during the recovery stage, visits by VIPs can be anticipated. A Government minister may make an early visit to the scene or areas affected to mark public concern and to report to Parliament on the current situation.

3.9.2   Depending upon the scale of the incident, visits by members of the Royal Family and Prime Minister may take place. Local VIP visitors may include religious leaders, local MPs, Mayor and local authority leaders.

3.9.3   If foreign nationals are involved, their country's Ambassador, High Commissioner or other dignitaries may visit. Visiting ministers and other VIPs will require comprehensive briefing before the visit and will require briefing before any meetings with the media.

3.9.4   VIPs are likely to want to meet patients who are well enough and prepared to see them. This will be dependent upon advice and respect for the wishes of individual patients and their relatives.

3.9.5   In the case of such visits to hospitals it is common for VIP interviews to take place at the hospital entrance to cover how patients and medical staff are coping.

3.9.6   The Trust representatives, including a member of the Communications team and the local service leader, should remain with the approved visitor throughout the visit.

4.   ROLES & RESPONSIBILITIES

4.1   The **Chief Executive** has ultimate accountability for the strategic and operational management of the organisation, including ensuring all policies are adhered to. Operational accountability for policy management is delegated to the Chief of Staff.

4.2   The **Chief of Staff** to liaise with Associate Director of Communications, and other colleagues as appropriate, to develop and maintain the approved visitor's policy and ensure it is delivered appropriately.

4.3   **Associate Director of Communications** is responsible for:
• Providing advice in this area to the Executive Team
• Managing and handling of approved official visits to the Trust
• Maintaining the Trust register of approved official visitors
• Ensuring all celebrity/VIP visits are handled effectively and responsibly
• Providing briefings to the Executive team or lead Director and other internal and external stakeholders, as appropriate, on media activity and celebrity/VIP visits and their potential impact
• Alerting the Executive team to all VIP/celebrity visitors to the Trust

4.4   **Chief Nurse** is responsible for patient safety and providing advice in this area to the Associate Director of Communications

4.5 **Managers** are responsible for:
- Ensuring employees are aware of this policy and that it is implemented in their area
- Taking appropriate action if the policy has not been adhered to

4.6 **Staff** must:
- act in accordance with this policy and support visits to their area by representing the Trust by checking for identification/authorisation where appropriate and acting professionally at all times
- Act in accordance with all policies to maintain staff, patient and approved visitor confidentiality
- Failure to adhere will initiate the Improving and Managing Conduct Policy

5. TRAINING

5.1 Line managers will be required to ensure that their respective staff are made aware of this policy when this is cascaded through usual dissemination routes.

6. EQUALITY IMPACT ASSESSMENT

6.1 An Equality Impact Assessment has been completed on this policy and there were no equality issues identified (see Appendix 3).

7. SUCCESS CRITERIA / MONITORING EFFECTIVENESS

7.1 Compliance with this policy will be monitored by the Chief of Staff. Where risks are identified in advanced, a mitigation plan will be devised by the Associate Director of Communications in conjunction with the Clinical Risk Manager and any other relevant staff.

7.2 Where incidents are reported during and after an event action plans will be developed to prevent recurrence and the policy will be reviewed and updated, as appropriate.

8. REVIEW

8.1 This document may be reviewed at any time at the request of either staff side or management but will automatically be reviewed on a three -yearly basis unless organisational changes, legislation, guidance or non-compliance prompt an earlier review.

9. REFERENCES AND LINKS TO OTHER DOCUMENTS

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

Solent NHS Trust Policies:
- Physical Security Management Policy
- Safeguarding Children, Young People and Adults at Risk Policy
- Risk Management Framework
- Chaperone Policy
- Volunteer Policy
- Business Continuity Management Policy
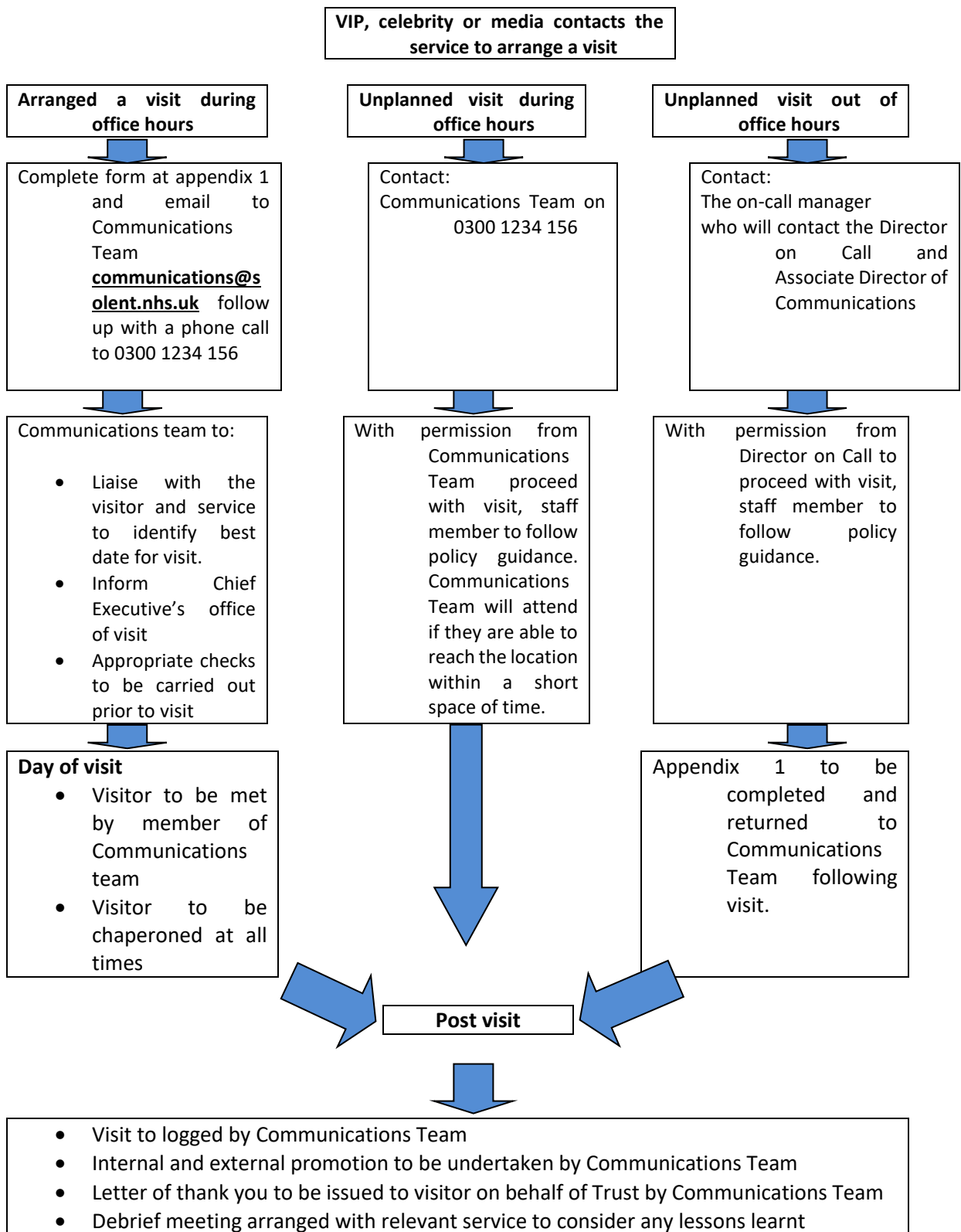- Media policy
- Prevent Policy

Appendix 1

Approved visitor events – record of arrangements

One form to be completed for each visit or agreement for longer term access. Once completed the form should be emailed to communications@solent.nhs.uk.

The Communications Team is responsible for completing details for corporately led or managed visits.   Details for locally managed and agreed visits to be notified by services, using the form, to the Communications Team.

Names of clinical service area or corporate department	Name of clinical service area/corporate department
Location of visit	Speciality or ward/department
Date and time of visit	dd/mm/yyyy
Authorisation	Name and job title of person authorising visit
Trust representative from service	Name and job title of person accompanying approved visitor
Approved visitor/s	Name of visitor/s
Role of visitor	Include a summary of the role of visitor
Purpose of visit	Summary of details
Details of visit	e.g. itinerary or schedule
Risk assessment	Supplementary sheet if appropriate
Unmitigated risks	Please list any
Incident reporting	List and reference report of any incidents occurring
Sign off	Form should be signed by authorising person or be Trust representative who accompanied approved visitor

Appendix 2

What to do when a VIP contacts your service to arrange a visit. or arrives at your service to visit

VIP, celebrity or media contacts the service to arrange a visit

Arranged a visit during office hours	**Unplanned visit during office hours**	**Unplanned visit out of office hours**
Complete form at appendix 1 and email to Communications Team **communications@solent.nhs.uk** follow up with a phone call to 0300 1234 156	Contact: Communications Team on 0300 1234 156	Contact: The on-call manager who will contact the Director on Call and Associate Director of Communications
Communications team to: • Liaise with the visitor and service to identify best date for visit. • Inform Chief Executive's office of visit • Appropriate checks to be carried out prior to visit	With permission from Communications Team proceed with visit, staff member to follow policy guidance. Communications Team will attend if they are able to reach the location within a short space of time.	With permission from Director on Call to proceed with visit, staff member to follow policy guidance.
Day of visit • Visitor to be met by member of Communications team • Visitor to be chaperoned at all times		Appendix 1 to be completed and returned to Communications Team following visit.

Post visit

- • Visit to logged by Communications Team
- • Internal and external promotion to be undertaken by Communications Team
- • Letter of thank you to be issued to visitor on behalf of Trust by Communications Team
- • Debrief meeting arranged with relevant service to consider any lessons learnt

Appendix 3

Equality Analysis and Equality Impact Assessment

Equality Analysis is a way of considering the potential impact on different groups protected from discrimination by the Equality Act 2010. It is a legal requirement that places a duty on public sector organisations (The Public Sector Equality Duty) to integrate consideration of Equality, Diversity and Inclusion into their day-to-day business. The Equality Duty has 3 aims, it requires public bodies to have due regard to the need to:

- **eliminate unlawful discrimination**, harassment, victimisation and other conduct prohibited by the Equality Act of 2010;
- **advance equality of opportunity** between people who share a protected characteristic and people who do not;
- **foster good relations** between people who share a protected characteristic and people who do not.

Equality Impact Assessment (EIA) is a tool for examining the main functions and policies of an organisation to see whether they have the potential to affect people differently. Their purpose is to identify and address existing or potential inequalities, resulting from policy and practice development. Ideally, EIAs should cover all the strands of diversity and Inclusion. It will help us better understand its functions and the way decisions are made by:

- **considering the current situation**
- **deciding the aims and intended outcomes of a function or policy**
- **considering what evidence there is to support the decision and identifying any gaps**
- **ensuring it is an informed decision**

You can find further information via the e-learning module here

Equality Impact Assessment (EIA)

Step 1: Scoping and Identifying the Aims		

Service Line / Department	Communications Team	
Title of Change:		
What are you completing this EIA for? (Please select):	Policy	*(If other please specify here)*
What are the main aims / objectives of the changes	Revised and updated policy to reflect potential risks and impacts of visitors to Solent NHS Trust sites.	

Step 2: Assessing the Impact		

Please use the drop-down feature to detail any positive or negative impacts of this document /policy on patients in the drop-down box below. If there is no impact, please select "not applicable":

Protected Characteristic	Positive Impact(s)	Negative Impact(s)	Not applicable	Action to address negative impact: *(e.g. adjustment to the policy)*
Sex			x	

Gender reassignment			x	
Disability			x	
Age			x	
Sexual Orientation			x	
Pregnancy and maternity			x	
Marriage and civil partnership			x	
Religion or belief			x	
Race			x	

If you answer yes to any of the following, you MUST complete the evidence column explaining what information you have considered which has led you to reach this decision.

Assessment Questions	Yes / No	Please document evidence / any mitigations
In consideration of your document development, did you consult with others, for example, external organisations, service users, carers or other voluntary sector groups?)	No	N/A
Have you taken into consideration any regulations, professional standards?	Yes	Following the review of the Jimmy Saville Enquiry, NHSE guidance on visitors to NHS locations has been updated and this is reflected in the proposed policy.

Step 3: Review, Risk and Action Plans

	Low	Medium	High
How would you rate the overall level of impact / risk to the organisation if no action taken?	☐	☐	■

What action needs to be taken to reduce or eliminate the negative impact?	Ratification of the updated VIP Policy, which should then be shared throughout the Trust, including on SolNet and to all Managers. To be shared with stakeholders who visit Solent sites.
Who will be responsible for monitoring and regular review of the document / policy?	Associate Director of Communications

Step 4: Authorisation and sign off

I am satisfied that all available evidence has been accurately assessed for any potential impact on patients and groups with protected characteristics in the scope of this project / change / policy / procedure / practice / activity. Mitigation, where appropriate has been identified and dealt with accordingly.

Equality Assessor:	Fiona Garth	Date:	30/03/2022

Additional guidance

Protected characteristic		Who to Consider	Example issues to consider	Further guidance
1.	**Disability**	A person has a disability if they have a physical or mental impairment which has a substantial and long term effect on that person's ability to carry out normal day today activities. Includes mobility, sight, speech and language, mental health, HIV, multiple sclerosis, cancer	• Accessibility • Communication formats (visual & auditory) • Reasonable adjustments. • Vulnerable to harassment and hate crime.	Further guidance can be sought from: Solent Disability Resource Group
2.	**Sex**	A man or woman	• Caring responsibilities • Domestic Violence • Equal pay • Under (over) representation	Further guidance can be sought from: Solent HR Team
3	**Race**	Refers to an individual or group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.	• Communication • Language • Cultural traditions • Customs • Harassment and hate crime • "Romany Gypsies and Irish Travellers", are protected from discrimination under the 'Race' protected characteristic	Further guidance can be sought from: BAME Resource Group
4	**Age**	Refers to a person belonging to a particular age range of ages (eg, 18-30 year olds) Equality Act legislation defines age as 18 years and above	• Assumptions based on the age range • Capabilities & experience • Access to services technology skills/knowledge	Further guidance can be sought from: Solent HR Team
5	**Gender Reassignment**	" The expression of gender characteristics that are not stereotypically associated with ones sex at birth" World Professional Association Transgender Health 2011	• Tran's people should be accommodated according to their presentation, the way they dress, the name or pronouns that they currently use.	Further guidance can be sought from: Solent LGBT+ Resource Group
6	**Sexual Orientation**	Whether a person's attraction is towards their own sex, the opposite sex or both sexes.	• Lifestyle • Family • Partners • Vulnerable to harassment and hate crime	Further guidance can be sought from: Solent LGBT+ Resource Group
7	**Religion and/or belief**	Religion has the meaning usually given to it but belief includes religious and philosophical beliefs, including lack of belief (e.g Atheism). Generally, a belief should affect your life choices or the way you live for it to be included in the definition. (Excludes political beliefs)	• Disrespect and lack of awareness • Religious significance dates/events • Space for worship or reflection	Further guidance can be sought from: Solent Multi-Faith Resource Group Solent Chaplain
8	**Marriage**	Marriage has the same effect in relation to same sex couples as it has in relation to opposite sex couples under English law.	• Pensions • Childcare • Flexible working • Adoption leave	Further guidance can be sought from: Solent HR Team
9	**Pregnancy and Maternity**	Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth and is linked to maternity leave in the employment context. In non-work context, protection against maternity discrimination is for 26 weeks after giving birth.	• Employment rights during pregnancy and post pregnancy • Treating a woman unfavourably because she is breastfeeding • Childcare responsibilities • Flexibility	Further guidance can be sought from: Solent HR team