



## Managing official visits procedure

### Document Summary

*This procedure ensures that there is an appropriate framework in place so that official visits are conducted in line with the Trust's commitment to ensuring the well-being, safety and dignity of patients, their families and staff.*

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### Important Note:

**The Internet version of this document is the only version that is maintained.**

Any printed copies should therefore be viewed as "uncontrolled" and, as such, may not necessarily contain the latest updates and amendments.





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## 1. Scope

This procedure is designed to ensure that official visits are conducted in line with the Trust's commitment to ensuring the well-being, safety and dignity of patients, their families and staff at all times.

The procedure requires that one-off or short-term approved visitors are always accompanied throughout their visit to the Trust when there is a possibility of contact with lone staff or vulnerable patients/visitors.

This procedure does not cover visits by family and friends to patients which are encouraged as part of normal visiting. Nor does this procedure cover visits to the Trust premises from other trusts where the visitor is an NHS professional visiting an NHS professional within this Trust.

## 2. Introduction

This procedure formalises existing arrangements within the Trust around official visits to ensure that official visits are always conducted in line with the overriding requirement to preserve patient, family and staff dignity, well-being and safety.

The Trust recognises that official visits have a positive impact and can increase the profile of the Trust's work as well as raise funds which are used to improve patient facilities and care.

This procedure recognises that official visits are one off events and so the standard safeguarding arrangements such as background and Disclosure and Barring Service (DBS) checks may not be appropriate. However, the procedure also covers certain groups or individuals who have a long standing relationship with the Trust, such as fundraisers, charity officials and the local press.

All visits to the Trust by official visitors must be organised and managed in accordance with this procedure.

## 3. Statement of Intent

The Trust arranges visits by VIPs, celebrities and fundraisers from time to time and provides access to a range of services and departments for media crews. VIP and celebrity 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.

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, families and staff. We also recognise the need to ensure any such visits do not have a detrimental effect on our clinical care.





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

#### 4. Definitions

**Approved visitors:** individuals or groups who are invited or whose request to visit the Trust have been approved for an official purpose for the benefit of patients, staff, the Trust or the NHS. These may include but are not restricted to:-

- VIPs. These include politicians, members of the Royal Family and other key stakeholders from outside the NHS;
- High profile public figures. These are people who are well known to the public and therefore to patients and their families. These include costumed characters; and
- Media. These include journalists and associated personnel including camera crews;
- Fundraisers. Anyone supporting the business of the Trust to generate funds raised for the benefit of patients and staff.

**Nominated representative:** Trust member with responsibility for hosting the visit/visitors. The Nominated representative must have enhanced DBS clearance

**Public areas:** Any location in the Trust which is accessible to the general public and which does not have secure entry. These include reception and catering areas;

**Clinical or restricted areas:** Any area of any building in which clinical care is provided to patients. It also includes any area associated with healthcare which has secure entry or requires a member of Trust staff to facilitate entry.

#### 5. Duties

- 5.1 Chief Executive. The Chief Executive is ultimately responsible for ensuring that official visits are conducted in line with the need to preserve patient, family and staff dignity, well-being and safety.
- 5.1 Head of Engagement & Communications. The Head of Engagement & Communications is responsible for ensuring that official visits are registered and managed through the communications department and that visits are appropriate and in line with this procedure.
- 5.2 Associate Director for Corporate Governance. The Associate Director for Corporate Governance is responsible for liaising with the Head of Engagement & Communications for corporately led or managed visits and for ensuring that the Head of Safeguarding is consulted on any changes to this procedure.
- 5.3 Deputy Director of Quality and Nursing with responsibility for safeguarding. The Deputy Director of Quality and Nursing is responsible for ensuring that adequate safeguarding arrangements are in place for service users, patients, children and adults at risk. The Deputy Director of Quality and Nursing must be consulted on all changes to this procedure.
- 5.4 Head of Service. The Head of Service is responsible for ensuring that approved visitors attending meetings in clinical or restricted areas within the Trust's premises are accompanied by a member of the Trust staff at all times. The Head of Services is responsible for ensuring that the Communications Department is informed of any meetings attended by politicians, members of the Royal Family, key stakeholders from outside the NHS or high profile public



figures

- 5.5 All staff. All staff are responsible for ensuring that official visits to their work areas or area of responsibility have been arranged and approved in accordance with this procedure. All staff should also ensure official visitors are accompanied by a member of the Trust's Communication Department or other nominated representative at all times during the visit.

## 6. Details

- 6.1 Before any visit. All proposed visits including those by VIPs, high profile public figures and the media must be co-ordinated through the Trust Communications Department at Voreda. The Communications Department will consider the reasons for the visit, the benefits to the organisation and the NHS and will approve or decline the visit. The department will liaise with both the visiting party/person and with the proposed part of the Trust to be visited and any other department in the Trust whom the communications team consider appropriate. In addition the communications team will liaise with an appropriate executive director as soon as any proposed visit is anticipated.

The communications team will liaise with the manager of the relevant care group and agree the nominated representative. The communications team will keep a record of all such visits and associated correspondence in accordance with the templates at Appendix 1 and 2.

- 6.2 Arrival on Trust premises. On arrival approved visitors will be met by a member of the Trust's communications team and the nominated representative.

Approved visitors should be met at a Trust reception area and accompanied to the arranged area where the visit will take place.

- 6.3 During the visit. The Trust's nominated representative must remain with the approved visitor throughout the duration of the visit until they are escorted from Trust premises. If another member of Trust staff has to take over the role of nominated representative during the visit, this must be logged as part of the formal record of the visit. It is the responsibility of the Trust's nominated representative to ensure that the approved visitor complies with all Trust procedures and policies, for example Infection Prevention and Health & Safety.
- 6.4 Staff are reminded that, as employees, they are representatives of the Trust and are expected to behave professionally in accordance with the Trust's values at all times.
- 6.5 During VIP and celebrity visits, staff should continue in their roles as usual while supporting the management of the visit where appropriate.
- 6.6 Any concerns raised during the visitors time within the Trust must be reported immediately to the Head of Engagement & Communications and where possible appropriate action taken to terminate the visit.





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

## 7. Training

No specific training requirements identified. Ad hoc advice may be sought from the Head of Communications.

## 8. Monitoring compliance with this policy

The table below outlines the Trusts' monitoring arrangements for this policy/document. The Trust reserves the right to commission additional work or change the monitoring arrangements to meet organisational needs

Aspect of compliance or effectiveness being monitored	Monitoring method	Individual responsible for the monitoring	Frequency of the monitoring activity	Group / committee which will receive the findings / monitoring report	Group / committee / individual responsible for ensuring that the actions are completed
Adherence to approved visitor procedure	Review of Communication Team register of visits	Head of Engagement & Communications	TBC	Trust Management Board	Trust Management Board

## 9. References/ Bibliography

Official guidance <http://www.nhsemployers.org/your-workforce/need-to-know/the-savile-inquiry/good-practice-guidelines-for-devising-local-policies-for-official-visits>

Themes and lessons learnt from NHS investigations into matters relating to Jimmy Saville – independent report for the Secretary of State for Health [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/407209/KL\\_lessons\\_learned\\_report\\_FINAL.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/407209/KL_lessons_learned_report_FINAL.pdf)

## 10. Related Trust Policy/Procedures

POL/01/006 Safeguarding Policy  
[https://www.cumbriapartnership.nhs.uk/assets/uploads/policy-documents/Safeguarding\\_Policy.pdf](https://www.cumbriapartnership.nhs.uk/assets/uploads/policy-documents/Safeguarding_Policy.pdf)



## Appendix 1 Approved Visitor Events – Record of arrangements

One form is to be completed for each visit or agreement for longer term access. Communications Team or Associate Director of Corporate Governance responsible for completing details for corporately led or managed visits

<b>Section</b>	<b>Details</b>
<b>Name of department</b>	<i>Name of department</i>
<b>Location of event</b>	<i>Location of event</i>
<b>Date of event</b>	<i>dd/mm/yyyy</i>
<b>Authorisation</b>	<i>Name and title of person authorising the visit</i>
<b>Trust representative</b>	<i>Name and title of the person accompanying the visit</i>
<b>Approved visitors</b>	<i>Name(s) of visitors</i>
<b>Purpose of event</b>	<i>Set out the purpose of the visit</i>
<b>Time of event</b>	
<b>Details of visit</b>	<i>Insert the itinerary</i>
<b>Risk assessment</b>	<i>Use extra sheet if necessary</i>
<b>Unmitigated risks</b>	<i>List any</i>
<b>Incident reporting</b>	<i>List and reference any incidents arising from the visit</i>
<b>Signoff</b>	<i>Authorising signature</i>





## Appendix 2 Non approved visitor events – record of applications

The Head of Engagement & Communications shall keep a record of all applications for visits or longer term access which are declined and the reasons for the visit not going ahead

<b>Section</b>	<b>Details</b>
<b>Name of department</b>	<i>Name of department</i>
<b>Purpose of event</b>	<i>Set out the purpose of the visit</i>
<b>Risk assessment and reasons for declining the visit</b>	<i>Use extra sheet if necessary</i>
<b>Signoff</b>	<i>Head of communications signature</i>

