

## VIP, CELEBRITY AND PUBLIC FIGURES VISITORS' POLICY

		POLICY	
Reference	GV/008		
Approving Body	Nursing, Midwifery and Allied Health Professional (AHP) Committee		
Date Approved	26 November 2024		
For publication to external SFH website	Positive confirmation received from the approving body that the content does not risk the safety of patients or the public:		
	YES	NO	N/A
	Y		
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Not applicable		Not applicable	
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## CONTENTS

Item	Title	Page
1.0	INTRODUCTION	3
2.0	POLICY STATEMENT	3
3.0	DEFINITIONS/ ABBREVIATIONS	4
4.0	ROLES AND RESPONSIBILITIES	5
5.0	APPROVAL	7
6.0	DOCUMENT REQUIREMENTS	7
7.0	MONITORING COMPLIANCE AND EFFECTIVENESS	12
8.0	TRAINING AND IMPLEMENTATION	13
9.0	IMPACT ASSESSMENTS	13
10.0	EVIDENCE BASE (Relevant Legislation/ National Guidance) and RELATED SFHFT DOCUMENTS	13
11.0	KEYWORDS	13
12.0	APPENDICES	14

## APPENDICIES

<i>Appendix 1</i>	<i>Approvals form</i>	14
<i>Appendix 2</i>	<i>Equality Impact Assessment</i>	17
<i>Appendix 3</i>	<i>Environment Impact Assessment</i>	19

## **1.0 INTRODUCTION**

- 1.1 The purpose of this policy is to inform all staff at Sherwood Forest Hospitals (SFH) NHS Foundation Trust about the procedures for organising and undertaking visits to its hospitals for VIPs and celebrities; volunteers; approved visitors and media (refer to section 3.0 for definitions).
- 1.2 All visits to SFH by VIPs and celebrities must be organised and managed in accordance with the procedures outlined in this policy.
- 1.3 If the VIP or celebrity is a patient, please refer separately to the Confidentiality Policy.
- 1.4 Celebrity and VIP visits play a significant role in enhancing our patients' experience and motivating our staff.
- 1.5 Although the Trust aims to accommodate these visitors wherever possible, it recognises its responsibility to protect the privacy of patients, families and staff. It also recognises the need to ensure any such visits do not have a detrimental effect on the Trust or a section of the Trust's ability to provide clinical care.
- 1.6 In view of the above, the Trust will take practical measures to:
- Handle external visits safely and minimise the disruption they may have on the hospital site
  - Advise staff of potential visits in their areas where appropriate and work with them to minimise the impact of visits on wards
  - Ensure robust procedures are in place to organise and manage external visits while providing the very best patient experience.
- 1.7 This policy is in line with national recommendations released in Kate Lampard's 'Lessons Learnt' report from February 2015 which was conducted in light of the abuse allegations against Jimmy Savile.

## **2.0 POLICY STATEMENT**

- 2.1 Ensure that staff are aware of the correct procedures for organising visits at the hospital site.
- 2.2 Build awareness among all staff in the organisation of their responsibilities in ensuring that visits are handled efficiently.
- 2.3 Prioritise full consideration of patients, families and staff when arranging and undertaking visits.

- 2.4 Ensure compliance with all other Trust policies and procedures, with particular notice to any restrictions to general visiting and infection prevention and control measures that may be in place locally or Trust-wide. For example, during the Covid-19 pandemic of 2020-2022 when visiting was limited.
- 2.5 Note: This policy is only intended to deal with VIP and publicity visits and not general patient visiting arrangements. This topic is covered by a separate Trust policy, entitled Patients Visitors Policy.

### **3.0 DEFINITIONS/ ABBREVIATIONS**

- 3.1 VIPs: key stakeholders including a member of the Royal family, military, MPs, elected individuals (councillors and Mayors), overseas dignitaries, senior representatives of organisations including other NHS Trusts and overseas health organisations, members of Healthwatch, or Health Overview and Scrutiny Committee.
- 3.2 Celebrities: celebrity in this document refers to a famous/high profile figure, who might be well-known to the public, especially in entertainment or sport. This definition also extends to consumed characters for the purposes of this policy, as these would be well-known to children and young people.
- 3.3 Public areas: in this document public areas refer to any location in any hospital that is accessible by the general public and does not have a secure door to gain entry. These would include main reception, outpatients, the Faith Centre, catering and retail areas and areas outside such as nature reserve, courtyards and car parks.
- 3.4 Clinical areas: any area of the hospital in which clinical care is provided to inpatients or outpatients. This would include all wards, theatres, departments and clinics. It also includes any area associated with healthcare or the business of the Trust which has a secure door or requires a hospital pass or staff member to gain entry.
- 3.5 Volunteers: people who give their time and experience freely to support the business of the Trust for the benefit of patients, staff or the Trust.
- 3.6 Approved visitors: 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.
- 3.7 Media: journalists and other representatives of print, broadcast and social media, such as newspapers, radio and television. This category will also include associated technical or creative people, such a camera/sound crew or photographers as well as members of the public wishing to access our Trust sites for the purposes of documenting or publicising any element of their visit, for example, as community bloggers and community journalists, regardless of their media accreditation status.
- 3.8 Patients: those being treated at any of the Trust sites. All are classed as vulnerable regardless of age, gender (including transgender), race, sexual orientation, disability or religious beliefs, marital/civil partnership status.

## **4.0 ROLES AND RESPONSIBILITIES**

4.1 The Trust: the Trust must provide robust procedures for managing and handling visits to the Trust from VIPs and celebrities.

### **4.2 Head of Communications**

4.2.1 Has overall responsibility for ensuring all visits (and associated media opportunities and activity linked to the visit) are handled effectively and responsibly.

4.2.2 Has overall responsibility for negotiating and facilitating the approval of all internal and external communications relating to the visit.

4.2.3 Acts as Trust contact for all VIP and celebrity visits (unless delegated to another individual within the Communications Team or elsewhere in the organisation) and ensures the correct procedures are followed.

4.2.4 Liaises with the Charity and Community Involvement offices to ensure celebrity visits are managed and organised as effectively as possible.

4.2.5 Briefs Executive Office and other appropriate internal and external audiences (including NHS England and the Nottingham and Nottinghamshire Integrated Care Board) on VIP and celebrity visits and their potential impact when appropriate.

4.2.6 Alerts Trust security to all VIP and celebrity visitors to the hospital.

4.2.7 In the absence of the Head of Communications, these duties will be undertaken by Communications Specialists within the Communications Team, under the supervision of the Director of Strategy and Partnerships.

4.2.8 Regularly reporting the full register of Trust VIP visits to Patient Safety Committee via the Trust's Safeguarding Committee at a minimum of once per quarter.

### **4.3 Community Involvement Manager**

4.3.1 Arranges VIP and celebrity visits on behalf of the Trust charity and Community Involvement and ensures that all procedures outlined in this policy are followed.

4.3.2 Notifies the Head of Communications about expected visits. The Head of Communications or delegated individual will then take responsibility for points 4.2.4 and 4.2.5 with regards to these visits.

4.3.3 Ensures all VIP and celebrities are escorted appropriately throughout their visits.

4.3.4 Informs the relevant ward staff about upcoming visits to arrange access to ward areas.

4.3.5 Arranges visits by volunteers on behalf of SFH and ensures that all procedures outlined in this policy are followed.

- 4.3.6 Notifies the Head of Communications about expected visit and work with them if necessary.
- 4.3.7 Arranges for all visitors to sign-in at the Community Involvement office, with all visitors to be issued with a visitors' pass.

#### **4.4 Divisional Directors of Nursing, Matrons and Ward Leaders**

- 4.4.1 Notify the Communications Teams of planned visits and seeks approval for any volunteer or visitor to the clinical areas or public areas on the Trust estate even if not listed below.
- 4.4.2 Support the Communications Team and Community Involvement Team in facilitating approved visits to their areas.
- 4.4.3 Ensure that their staff working in their Divisions and Teams adhere to this policy.
- 4.4.4 Support families and patients during visits.

#### **4.5 Security**

- 4.5.1 The Trust's Professional Lead for Security Management and Violence Reduction and Security Team will liaise with the local Police, those responsible for VIP security, the Communications Team, the Estates Department, Health and Safety Risk Manager and Local Authority where appropriate for the visit.
- 4.5.2 Before a VIP visit, the Trust's Professional Lead for Security management and Violence Reduction will be required to ensure that access to the Trust is secure, outline the safest route to the point of the visit, ensuring that external access to this, route is minimised and that staff and patients who wish to see the VIP will not block the emergency exit, ensure that any unoccupied/unallocated rooms or office space on the route are checked and locked, brief security staff on procedures to be followed if it becomes necessary to remove a person from the site, advise the local Police control room of the visit and any security concerns, liaise with the relevant managers to confirm which staff will be working in areas that day and that they will be included in the visit and ensure that they have ID cards.
- 4.5.3 The Trust's Professional Lead for Security Management and Violence Reduction and Security Team to provide support during visits as required and as agreed with the Communications Team, even when visits are being arranged under embargo.
- 4.5.4 They will also be responsible for the removal of individuals if necessary, during VIP visits, if they are or appear to be posing a threat or obstruction to providing patient care.
- 4.5.5 Post-event, the Trust's Professional Lead for Security Management and Violence Reduction will conduct a review, in conjunction with the stakeholders involved in the event. This should evaluate the success or otherwise of all aspects of the security procedures deployed.

- 4.5.6 If a review highlights examples of best practice, it should be forwarded to the relevant senior management teams.

#### **4.6 All Staff Members**

- 4.6.1 Must ensure that they act in accordance with this policy.
- 4.6.2 Will support visits to their areas and represent the Trust correctly by acting professionally at all times.
- 4.6.3 Advise the Communications Team in advance of all visits considered by this policy, even where publicity around these visits remains under embargo.

### **5.0 APPROVAL**

- 5.1 The policy has been approved at the Trust's Nursing, Midwifery and Allied Health Professional (AHP) Committee on 26<sup>th</sup> November 2024.
- 5.2 The Trust's Executive Team will be ultimately responsible for the approval of the visits described in this policy.
- 5.3 The Trust's Executive Team reserve the right to decline and cancel any visitors considered under this policy.

### **6.0 DOCUMENT REQUIREMENTS**

#### **6.1 Overview**

- 6.1.1 All visits by VIPs or celebrities are to be handled and managed by a member of the Communications Team, unless specifically agreed with the Community Involvement Manager or other authorised individual or where individuals/groups are specifically visiting the Community Involvement Team or Trust Charity.
- 6.1.2 All requests for a celebrity/VIP visit should be submitted to the Head of Communications by completing the form 12.1 (Appendix I). If the visit relates to fundraising or charity activity, the form will be passed to the Community Involvement Manager to manage.
- 6.1.3 If an individual or team is approached privately by a celebrity or VIP the visit must be approved by, and organised through, the Communications Team, following the same steps outlined in part 6.1.2.
- 6.1.4 The Trust will give more careful considerations to visits during the pre-election period immediately before any parliamentary, local, mayoral or other elections, in order to avoid influencing or interfering with an election process. During this time, the Trust will follow any available pre-election guidance that is in place.



## 6.2 Prior to the Visit

- 6.2.1 In advance of the visit, the Communications Team or Community Involvement Team will liaise with the relevant clinical areas to ensure that it is clinically appropriate to visit the areas on the proposed dates. For celebrity visits, the Communications or Community Involvement Team will work with the relevant Divisional and Ward Leaders to ensure that the proposed celebrity is appropriate and relevant to the age and interests of the patients.
- 6.2.2 The Head of Communications will alert the Trust Security Team to all VIP and celebrity visitors as soon as the Head of Communications is aware.
- 6.2.3 All details of any visit should be cascaded to the relevant Trust staff and volunteers a minimum of 24 hours before the visit occurs, unless where security controls mean this is not possible. Where this is the case, arrangements will be discussed with the appropriate Ward Leader or Divisional Leader for the area being visited.
- 6.2.4 If a visit is confirmed at less than 24 hours' notice the cascading process should take place as soon as possible with the Head of Communications or Community Involvement Manager, informing Security and other relevant parties.
- 6.2.5 If a VIP or celebrity turns up without any prior notice and is not on a private visit, they should be held in reception until a member of the Communications Team or another team nominated by the Executive Team arrives. Where a member of the Communications Team is not immediately available, another Trust colleague (such as a member of the Security team) will be nominated by the Trust Communications Team, Divisional General Management Teams or the Executive Team.
- 6.2.6 If a visit occurs outside normal working hours and especially at weekends, the member of the Communications Team or Community Involvement Team accompanying the visit should check with the area and/or Ward staff on day of visit to ensure it remains clinically appropriate for the visit to go ahead as proposed.
- 6.2.7 If a public figure attends out of hours and unannounced, the Trust Gold on Call should be called immediately for awareness. The Trust Gold on Call reserves the right to decline to accommodate an announced visit to the Trust out of hours.
- 6.2.8 The Communications Team are to be notified of all visits in advance, even if visits are under embargo.

## 6.3 Visitor Numbers

- 6.3.1 The Head of Communications and Community Involvement Manager will ensure that the number of members in any visitor party should be kept to a minimum to cause the least amount of disruption to clinical areas as possible, with the length of visits to be kept to a minimum.
- 6.3.2 Specifically no party should have any more than 10 people (including Communications and Community Involvement staff), except in exceptional circumstances by prior agreement by the Head of Communications or Community Involvement Manager.



- 6.3.3 If a party exceeds this number the excess guests will be asked to remain in the public areas of the Trust.
- 6.3.4 The Trust wants to prevent our patients feeling uncomfortable due to unsuitable or large numbers of visits in their clinical areas.
- 6.3.5 In addition, the Trust wants to protect any younger visitors from witnessing any potentially distressing occurrences during their visit.
- 6.3.6 If the celebrity is under 18 years of age, the visit would be at the discretion of the Head of Communications and in conjunction with the Executive Team.

#### 6.4 **During the Visit**

- 6.4.1 Upon arrival at the Trust, any visitors would be met by their chaperone, who would be a member of the Communication, Community Involvement Team or another nominated individual. That person would stay with them for the entirety of their visit until they are escorted from the building.
- 6.4.2 While they are at the hospital, at no time would they be left unaccompanied. Any time they are in a patient's room there will be either their Communications or Community Involvement chaperone or a member of staff from the ward, if space does not allow for both.
- 6.4.3 If a visitor group is large enough to warrant splitting into multiple groups, there will be a Communications or Community Involvement chaperone with each group.
- 6.4.4 The Communication or Community Involvement Team will ensure that we adhere to a strict ratio of three visitors to every one DBS-checked Trust or Charity staff member unless in exceptional circumstances which will be risk assessed and authorised by an Executive Director.

#### 6.5 **Arrival at the Trust**

- 6.5.1 Most visitors will be met at a pre-arranged entrance when they visit the Trust and then escorted to the pre-arranged clinical areas where the visit will take place.
- 6.5.2 However, some VIPs and celebrities are so well-known that their presence at the Trust might cause major disruption in main reception or might attract media attention outside the buildings. On these occasions the visitor would be brought on site via one of a number of alternate routes or entrances. During the visit, they would also be kept away from any public areas in the Trust unless the area was relevant to their visit.

#### 6.6 **Ward Protocols**

- 6.6.1 Once the visit is confirmed, the Ward Manager is notified.

- 6.6.2 On the day prior to the visit, the Ward is contacted to ensure that there are no infection risks or any other contraindications to the visit taking place. A member of the Communications or Community Involvement Team would confirm visit with clinical liaison person (Ward Manager/Play Specialist) to check whether it was still clinically appropriate.
- 6.6.3 The Communications or Community Involvement Team will ensure that any of the Ward protocols (including infection prevention and control) are observed by the VIP or celebrity visitor.
- 6.6.4 Before the visit any VIP or celebrity visitor will be advised that if they have any infectious conditions, they should not visit the Trust.

## 6.7 **Confidentiality**

- 6.7.1 All staff in the Trust including those working for partners who are on-site at the time (including Medirest, Skanska and other contractors) 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.
- 6.7.2 Staff will be notified of visits only where appropriate and should not divulge information on these visits to other colleagues, patients, families and external parties.
- 6.7.3 All 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 Trust.

## 6.8 **Staff Behaviour**

- 6.8.1 Staff are reminded that as employees they are representatives of the Trust and are expected to behave professionally at all times.
- 6.8.2 During VIP and celebrity visits, staff should continue in their roles as usual while supporting the management of the visit where appropriate.
- 6.8.3 Visitors to Ward areas should always be greeted warmly by staff and treated respectfully throughout their visit.
- 6.8.4 Staff must not approach celebrities on Wards, corridors or other areas of the Trust unless advised to do so by the Communications Team. This includes asking for photographs and autographs.
- 6.8.5 During visits, staff should not be present on Wards unless required to be there in a work-related capacity. Any staff who are not supposed to be on a Ward during a visit will be asked to leave immediately.
- 6.8.6 Once the celebrity has met patients on the ward, it may then be possible for staff members to have a photograph with them, as long as it is done with the verbal consent of the visiting individual, and it does not interfere with colleagues' clinical duties.

## **6.9 Other VIP and Celebrity Visits**

- 6.9.1 Through personal connections, a family member may arrange their own private visit to the Trust for a celebrity or VIP. These visits should be treated in the same way that any visitor is treated when coming to visit a patient on a Ward, if staff are made aware of the visit, in accordance with the Trust's Patients Visitors Policy.
- 6.9.2 A family may also arrange for a celebrity visitor or their loved one via one of the 'wish' charities such as Rays of Sunshine, Starlight, Make a Wish and similar organisations. The Communications Team should be informed as soon as the family make staff aware of the visits so that Trust protocols can be followed.

## **6.10 Volunteer Services**

- 6.10.1 All Volunteers are placed and managed in accordance with the Volunteer Involvement Policy. More information can be found in the Volunteer Involvement Policy.

## **6.11 Concerns and Complaints Arising from Visits to the Trust**

- 6.11.1 Any concerns and complaints arising from visits to the Trust should be raised with the Trust, in accordance with its Receiving, Investigating, Responding to and Learning from Complaints, Concerns and Complements Policy.

## 7.0 MONITORING COMPLIANCE AND EFFECTIVENESS

- 7.1 This document will be made freely available to staff through the intranet site.
- 7.2 A link to this document will be circulated to all members of staff.
- 7.3 This document will also be circulated to PFI partners to make their staff aware of their responsibilities.
- 7.4 Compliance with this Policy will be monitored by the Communications Team, with concerns over compliance to be escalated to the Trust's Executive Team immediately.
- 7.5 Monitoring will be ongoing and will include compliance with procedures outlined within this policy together with feedback from staff and those involved in the visit.
- 7.6 All consent forms to be retained by the Communications Team.
- 7.7 A log of requests for visits and whether or not each visit was approved will be retained by the Communications Team.

Minimum Requirement to be Monitored  (WHAT – element of compliance or effectiveness within the document will be monitored)	Responsible Individual  (WHO – is going to monitor this element)	Process for Monitoring e.g. Audit  (HOW – will this element be monitored (method used))	Frequency of Monitoring  (WHEN – will this element be monitored (frequency/ how often))	Responsible Individual or Committee/ Group for Review of Results  (WHERE – Which individual/ committee or group will this be reported to, in what format (eg verbal, formal report etc) and by who)
Report of visit in local medias	Communications Team or Community Involvement Team, depending on visit	Media monitoring	Ad hoc, minimum weekly	Reported 'ad hoc' to Strategy and Partnerships Cabinet as part of Communications Department's highlight reporting
Report of visit in staff communications	Communications Team	The Bulletin		
Report of visit on social media	Communications Team	Google Alerts		

## **8.0 TRAINING AND IMPLEMENTATION**

- 8.1 There are no training requirements
- 8.2 Requirements around visitors requirements will be communicated to the Trust intranet with clear guidance and a link to this policy for reference.
- 8.3 If staff have queries, they should contact the Communications Team in the first instance.

## **9.0 IMPACT ASSESSMENTS**

- 9.1 This document has been subject to an Equality Impact Assessment, see completed form at Appendix 1.
- 9.2 This document has been subject to an Environmental Impact Assessment and there is no impact.

## **10.0 EVIDENCE BASE (Relevant Legislation/ National Guidance) AND RELATED SFHFT DOCUMENTS**

### **Evidence Base:**

- Sir David Nicholson letter to all NHS organisations in light of the recent abuse allegations against Jimmy Savile DH Gateway number: 18350 13<sup>th</sup> November 2012.
- Kate Lampard's 'Lessons Learnt' report from February 2015.

### **Related SFHFT Documents:**

- Charitable Funds – Fundraising and Receipting Guideline
- Media Policy
- Social Media Policy
- Data Protection, Confidentiality and Disclosure Policy
- Volunteer Service Operational Policy
- NHS Protect Guidance – NHS Security Management Service – Security at VIP Visits and Other Public Meetings
- Safeguarding Adults Policy
- Safeguarding Children and Young People Clinical Guidance
- Domestic Violence Pathway
- Equality and Diversity Policy
- Receiving, Investigating, Responding to and Learning from Complaints, Concerns and Compliments Policy.

## **11.0 KEYWORDS**

Not applicable.

## 12.0 APPENDICES

### APPENDIX I

#### 12.1 – Approvals Form

Please refer to the VIP, Celebrity and Public Figures Visitors Policy when completing this form. This form enables you to request approval for a celebrity/VIP visit and must not be filled in retrospectively. The Communications Department will invite the celebrity/VIP and manage the visit.

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##### Details:

##### Which category best describes the visitor?

*Please select all that apply*

- VIP
- Celebrity
- Other public figure

##### What is the suggested date and times of the visit?

Please give at least 4 weeks' notice

##### Which Trust site does this relate to?

- King's Mill Hospital
- Mansfield Community Hospital
- Newark Hospital
- Other (please specify)

##### Who is the celebrity, VIP, public figure or visitor?

##### What are they famous for?

Tell us the sport, TV programme etc they are known for

##### What is the purpose of their visit and how will this support Trust business and strategic objectives

**What is the visit proposed to entail?**

Tell us the Ward and/or public area you propose they visit and what they will do during the visit including any patients or staff they will meet

**Please indicate the likely number of visitors in the visiting party?**

Note: This should include the visitor(s) themselves and any staff that are likely to accompany them – including security, police teams, media secretaries etc

**Is there any intended publicity to be shared in advance, during or following this visit?**  
 If so, please describe the nature of these plans here. This should include any planned social media, TV, radio or newspaper coverage.

**Does this activity relate to the Trust's Sherwood Forest Hospitals Charity?**

- Yes
- No

**Will this visit result in your visitor offering gifts to patients, members of the public or Trust staff?**

- Yes
- No

**Do you have the contact details for the individual/group visiting who will be coordinating arrangements for their visit?**

[   ] Yes   [   ] No

If yes, please provide this:

Name	
Contact telephone number	
Email address	



**Please give details of the person making this request from within Trust:**

Name	
Job title/Role	
Extension number	
Email address	

**Please give the names of the Divisional Directors of Nursing, Matrons, Ward Leaders or other member of senior management who is supporting this request:**

Name	
Job title/Role	
Extension number	
Email address	

**Risk Analysis:**


Please identify what potential/actual risks you have identified as part of your risk assessment process, as well as what steps you have put in place to mitigate those risks:

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**Please submit to the Trust's Communications Department by emailing [sfh-tr.communications@nhs.net](mailto:sfh-tr.communications@nhs.net) or using the online form on the Communications Team's intranet page.**

## APPENDIX II - EQUALITY IMPACT ASSESSMENT FORM (EQIA)

<b>Name of service/policy/procedure being reviewed:</b>			
<b>New or existing service/policy/procedure:</b>			
<b>Date of Assessment:</b>			
<b>For the service/policy/procedure and its implementation answer the questions a – c below against each characteristic (if relevant consider breaking the policy or implementation down into areas)</b>			
<b>Protected Characteristic</b>	<b>a) Using data and supporting information, what issues, needs or barriers could the protected characteristic groups' experience? For example, are there any known health inequality or access issues to consider?</b>	<b>b) What is already in place in the policy or its implementation to address any inequalities or barriers to access including under representation at clinics, screening?</b>	<b>c) Please state any barriers that still need to be addressed and any proposed actions to eliminate inequality</b>
<b>The area of policy or its implementation being assessed:</b>			
<b>Race and Ethnicity</b>	None		
<b>Gender</b>	None		
<b>Age</b>	Young patients will be protected by classing costume characters as VIPs; visitors are to be escorted at all times so that it protects all vulnerable patients whether old or young.		
<b>Religion / Belief</b>	None		
<b>Disability</b>	These will be planned for as part of the visits to ensure they are inclusive to all (whether it relates to the visitor or the people they are visiting).		
<b>Sexuality</b>	None		
<b>Pregnancy and Maternity</b>	None		
<b>Gender Reassignment</b>	None		

<b>Marriage and Civil Partnership</b>	None		
<b>Socio-Economic Factors (i.e. living in a poorer neighbourhood / social deprivation)</b>	None		
<b>What consultation with protected characteristic groups including patient groups have you carried out?</b> <ul style="list-style-type: none"> <li>Visits to all areas have been ongoing for a number of years without any issues. There are no Human Rights issues I'm aware of that need taking into account. Therefore, it is perceived as having a low level impact.</li> </ul>			
<b>What data or information did you use in support of this EqIA?</b> <ul style="list-style-type: none"> <li>Previous knowledge of visits at the Trust.</li> </ul>			
<b>As far as you are aware are there any Human Rights issues be taken into account such as arising from surveys, questionnaires, comments, concerns, complaints or compliments?</b> <ul style="list-style-type: none"> <li>No</li> </ul>			
<b>Level of impact</b>  From the information provided above and following EQIA guidance document Guidance on how to complete an EIA ( <a href="#">click here</a> ), please indicate the perceived level of impact:  High Level of Impact/Medium Level of Impact/Low Level of Impact ( <i>Delete as appropriate</i> )  For high or medium levels of impact, please forward a copy of this form to the HR Secretaries for inclusion at the next Diversity and Inclusivity meeting.			
<b>Name of Responsible Person undertaking this assessment:</b>			
<b>Signature:</b> 			
<b>Date: 18<sup>th</sup> November 2024</b>			

## APPENDIX III – ENVIRONMENTAL IMPACT ASSESSMENT

Use this appendix if it is applicable by completing all rows of the last two columns or delete

The purpose of an environmental impact assessment is to identify the environmental impact, assess the significance of the consequences and, if required, reduce and mitigate the effect by either, a) amend the policy b) implement mitigating actions.

Area of impact	Environmental Risk/Impacts to consider	Yes/No	Action Taken (where necessary)
<b>Waste and materials</b>	<ul style="list-style-type: none"> <li>Is the policy encouraging using more materials/supplies?</li> <li>Is the policy likely to increase the waste produced?</li> <li>Does the policy fail to utilise opportunities for introduction/replacement of materials that can be recycled?</li> </ul>	N	Not applicable
<b>Soil/Land</b>	<ul style="list-style-type: none"> <li>Is the policy likely to promote the use of substances dangerous to the land if released? (e.g. lubricants, liquid chemicals)</li> <li>Does the policy fail to consider the need to provide adequate containment for these substances? (For example bunded containers, etc.)</li> </ul>	N	Not applicable
<b>Water</b>	<ul style="list-style-type: none"> <li>Is the policy likely to result in an increase of water usage? (estimate quantities)</li> <li>Is the policy likely to result in water being polluted? (e.g. dangerous chemicals being introduced in the water)</li> <li>Does the policy fail to include a mitigating procedure? (e.g. modify procedure to prevent water from being polluted; polluted water containment for adequate disposal)</li> </ul>	N	Not applicable
<b>Air</b>	<ul style="list-style-type: none"> <li>Is the policy likely to result in the introduction of procedures and equipment with resulting emissions to air? (For example use of a furnaces; combustion of fuels, emission or particles to the atmosphere, etc.)</li> <li>Does the policy fail to include a procedure to mitigate the effects?</li> <li>Does the policy fail to require compliance with the limits of emission imposed by the relevant regulations?</li> </ul>	N	Not applicable
<b>Energy</b>	<ul style="list-style-type: none"> <li>Does the policy result in an increase in energy consumption levels in the Trust? (estimate quantities)</li> </ul>	N	Not applicable
<b>Nuisances</b>	<ul style="list-style-type: none"> <li>Would the policy result in the creation of nuisances such as noise or odour (for staff, patients, visitors, neighbours and other relevant stakeholders)?</li> </ul>	N	Not applicable