

# THIRD PARTY ACCESS TO SCHN HOSPITALS AND CODE OF CONDUCT

# POLICY AND PROCEDURE®

## DOCUMENT SUMMARY/KEY POINTS

- The Sydney Children's Hospital Network (SCHN) recognises the significant contribution that Third Parties make to the care and wellbeing of sick children and their families.
- For the purposes of this policy a Third Party is defined as a *non-hospital volunteer*, contractor, individual, group or organisation that requires access to a SCHN Hospital.
- Third Party *organisations* normally fall into one or more of the following categories: (a) Media, (b) Fundraising, (c) Family support services and (d) Entertainment
- Third Parties accessing a Hospital must seek approval.
- Third Party organisations wishing to access SCHN on a regular basis should have a memorandum of understanding developed.
- Third Party organisations must not visit a patient's bedside unless invited to do so, and with the consent of an appropriate staff member
- Third Party organisations must not use their access to the hospital to collect patient or family data
- Third party organisations must not promote themselves as part of the Hospital
- Informed consent must be obtained to film or photograph a patient from the patient/family via the relevant SCHN representative.
- Third Parties operating in the Hospital must abide by the NSW Health Code of Conduct and the procedures contained in this document, including the Ward Protocol in Section 4.
- This document does not apply to NDIS service providers
- This document does not apply to Company Representatives or Maintenance Contractors and couriers. Refer to the <u>Company Representatives Visiting SCHN</u> policy.

This document reflects what is currently regarded as safe practice. However, as in any clinical situation, there may be factors which cannot be covered by a single set of guidelines. This document does not replace the need for the application of clinical judgement to each individual presentation.

Approved by:	SCHN Policy, Procedure and Guideline Committee	
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Team Leader:	Entertainment Officer	Area/Dept: Public Relations

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# **CHANGE SUMMARY**

- Links to Ward protocol removed
- Link to Company Representatives Visiting SCHN updated
- Memorandum of Understanding or Agreement with an External Agency policy no longer exists. – reference removed
- Photography and Video Recording of Paediatric Patients Policy was rescinded in 2016, replaced with a Network version Photography, Film and Video Recording for Media, Promotional, Fundraising or Social Events this policy is under review, all references link to the old policy.

# READ ACKNOWLEDGEMENT

 All staff working with Third Parties anywhere in the Hospital should read and acknowledge this policy.

This document reflects what is currently regarded as safe practice. However, as in any clinical situation, there may be factors which cannot be covered by a single set of guidelines. This document does not replace the need for the application of clinical judgement to each individual presentation.

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#### 1 Introduction

The two Hospitals, The Children's Hospital at Westmead and the Sydney Children's Hospital, Randwick, of the Sydney Children's Hospitals Network [SCHN] strives to work collaboratively with and develop cooperative and effective relationships with external agencies, known as Third Parties. These relationships assist us to enhance and support the core business of the Hospitals.

#### **Definition of Third Party**

For the purposes of this policy a *Third Party* is defined as a *volunteer*, *contractor*, *individual*, *group* or *organisation* that requires access to a SCHN Hospital for reasons other than caring for or visiting a patient such as a family member. Third Party *organisations* normally fall into one or more of the following categories (a) Media, (b) Fundraising, (c) Family support services and (d) Entertainment.

# 2 Policy

- Children's health and wellbeing is always our first priority. Therefore the following principles should be adhered to:
  - The interest and privacy of the child and family are paramount: any relationship must respect this whilst providing benefit to the Hospital, its values and core business.
  - Clarity around the purpose of the relationship must be developed. That is, the relationship with the Third Party must be defined and accountabilities must be established.
  - Clear guidelines for staff that are interacting with Third Parties must be developed and where appropriate, provide support and/or education to staff to enable them to fulfil their role with the Third Party.
  - Ensure parents and families realise that they are under **no obligation** to participate or engage with the Third Party.
  - Ensure Third Parties abide by the NSW Health Code of Conduct and the procedures contained within this document and are bound to uphold the values and best interests of the SCHN Hospitals.
- The relationship with the Third Party must be defined and conflicts of interest identified.
- Where applicable, National Criminal Record Checks (NCRCs) and Working with Children Checks (WWCC) are the responsibility of the Third Party organisation.
- Requirements for immunisation must be determined and/or form part of the MOU
- Approval to access a hospital must be obtained.
- A Hospital contact person should remain with the Third Party at all times during the visit.
   There is provision for a Third Party to visit Wards unaccompanied by a Hospital staff member however this is closely regulated and approval will only be granted in special circumstances

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- A sign-in/sign-out procedure must be adhered to.
- The Ward Protocol must be followed if accessing patients or patient areas
- Informed consent to photograph/film a patient must be obtained from the family and hospital by an SCHN representative.

# 3 Procedure for Third Party Access to SCHN Hospitals

## 3.1 Prior to coming to the Hospital

#### Define the relationship with the Third Party

Before the Third Party is granted access to a SCHN Hospital it is important to define the relationship. This enables the Hospital to place clear rules of engagement and define the boundaries of operation. To define the relationship you must:

- Articulate the purpose of the relationship.
- Describe how it will function both physically within the Hospital and in relation to:
  - o the patients and families (consent)
  - access to clinical information (patient privacy)
  - o working with hospital staff and,
  - the distribution of information and referral of services (with consent and clear boundaries)
- Identify any conflicts of interest and how they will be managed (e.g. staff members sitting on Boards of organisations who have a relationship with the Hospital). Refer to "Conflict of Interest and Gifts and Benefits Reporting" policy for more information. Board members from the Hospital should not be actively involved in fundraising for another organisation. There may be occasions when they should remove themselves from the meeting or abstain from voting.
- Where relevant, develop a Memorandum of Understanding (MOU) for Third Party organisations that will define the activities to be undertaken and the areas within the Hospital that will be involved. "

#### Granting access to a SCHN Hospital

All Third Parties as defined by this policy must seek approval to visit a SCHN Hospital. Requests to visit a Hospital and subsequent communications should include agreed visiting hours and duration and identification of the contact person, who should be employed by the Hospital, who will meet the Third Party organisation upon arrival.

#### Approval is granted by the following staff:

All **media** visits must be approved by both the Public Relations Manager *and* the clinical manager responsible for the area where filming will take place. Refer to Section 6 for more information.

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All **other** Third Party visits must be approved by PR and the appropriate manager in the area where the visit is to occur, such as the Nurse Manager, Department Head, Program Chair or Director.

## 3.2 When Visiting a Hospital

Once approval has been granted there must be an agreed 'sign-in' process. The staff contact person is responsible to ensure the following process is followed:

- A physical 'sign-in' location is identified and the visitor/s are taken there to sign-in.
   Possible locations are Security, Volunteer Department, or Public Relations Department.
- Where relevant, ensure an appropriate identification badge is worn at all times.
- Confirm with the visitor/s:
  - the agreed visiting hours and duration. If the visit involves going to a Ward, the Ward rest time should be observed.
  - the agreed Hospital location/s they are to visit and, if necessary
  - the purpose of the visit

At all times during the visit, the Hospital contact person (or delegate) should remain with the Third Party visitor/s.

- Ensure the Ward Protocol (Section 4) is adhered to.
- At the completion of the visit, the visiting party must return to the 'sign-in' location to sign-out. The Hospital contact person remains with the visiting party until they have left the premises.

#### Application to visit Wards unaccompanied

There is provision for a Third Party to visit Wards unaccompanied by a Hospital staff member however this is closely regulated and approval will only be granted in special circumstances. In this situation the visitor **must** 'sign-in/sign-out' at Security or another agreed location, obtain a "Visitors" ID badge and follow the Ward Protocol (Section 4). They must have a 'main point of contact' person at the Hospital where they notify them of their arrival and departure.



#### 4 Ward Protocol

If a Third Party has received approval to visit a Ward/s the following protocol should be observed:

- Ward rest periods should be observed (the time varies on different wards).
- All visitors must check-in at the nurses' station upon arrival.
- All visitors must wash hands on arrival, between patients and on departure. If there are specific infection control instructions for patients, these must be followed.
- All mobile phones must be turned off.
- If a Third Party visitor has been invited to meet with a specific patient, the visitor should
  not talk to other patients/families unless invited to do so by that family and the SCHN
  representative escorting the third party.
- Visitors should:
  - NOT intrude on a patient's bed or room. Always ask before entering and NOT ask patients, parents/carers or staff why the child is in hospital as this is a private matter.
  - NOT block corridors.
- If a procedure is taking place or a Doctor, Nurse, Allied Health professional or Teacher is seeing a patient, the visitor should come back to see that patient at a more appropriate time.
- All visitors should be mindful of other patients in the room; eg, they may be sleeping or just back from surgery.

# 5 Third Party Fundraising at SCHN Hospitals

# 5.1 Fundraising

Hospitals within the SCHN rely on donations for some equipment, research and services. This fundraising may take place within the hospitals or involve hospital patients. Other charities that support the Hospital or Hospital families in some way may want access to the hospitals to sell fundraising merchandise or wish to involve a patient in a fundraising appeal.

# 5.2 Fundraising Appeals

If an external organisation wishes to use a Hospital patient as the face of an appeal, they must first make that request to the Public Relations Department..

All requests are considered in terms of the best interests of the child and their family. The child's care team will be consulted.

Fundraising for the Sydney Children's Hospitals Network (SCHN) is conducted by the Sydney Children's Hospitals Foundation (SCHF) who works closely with the SCHN Executive



and SCHN Public Relations to ensure that fundraising opportunities are maximised whilst always protecting the rights of children and their families.

# 6 Media (Film, Interview or Photography) Access to SCHN

#### 6.1 Consent from Patient/Family

The NSW Health and SCHN policies relating to media in the Hospital cover issues related to visitors for clinical, marketing, fundraising and public relation purposes. **Informed written** consent MUST be obtained to film or photograph a patient in any of these situations.

There are different consent forms to complete if the filming/photograph is for clinical purposes or for non-clinical purposes (e.g. fundraising or public relations purposes). For more information and details about obtaining consent and related processes, refer to:

- Clinical images (photography / video / Audio Recordings) Of Paediatric Patients policy and procedure
- Photography, film and video recordings for Media, Promotional, Fundraising or Social <u>Events</u>

These policies have been developed to protect the privacy of patients, their families and staff and maintain courtesy and respect for all concerned.

The "Multimedia Consent Form" should be completed for all filming/photography requests relating to non-clinical purposes.

All filming/photography/media for non-clinical purposes must be arranged in consultation with the Public Relations Department.

# 6.2 Permission to Interview, Photograph or Film in the Hospital

Permission to film, photograph or interview patients or family members must be obtained in advance from the Public Relations Department. Permission will not be given until consent has been obtained by Public Relations from:

- The child (if appropriate)
- The parent or guardian (with Media Release Form signed and filed)
- The Nursing Unit Manager or nurse in charge
- The doctor in charge (if applicable)
- The Chief Executive of the SCHN
- and, if applicable, the Ministry of Health and Health Minister's office

For photography or film, the intended use of the image must be explained to the parent and/or carer and agreed to: for example, media (e.g. newspaper or television), brochure, annual report or Facebook. This information is noted on the Media Consent Form.

Images should not be used for additional purposes without seeking permission.

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As the Public Relations (PR) Department must manage all non-clinical media, photography and filming at the SCHN Hospitals, requests can only be met if a Public Relations staff member is available. A mutually convenient date and time must be arranged. The Public Relations Department will endeavor to meet requests.

#### 6.3 Media on Hospital Grounds

Media are not permitted into the Hospital unless they are accompanied by a member of the Public Relations Department or a senior staff member (with the consent of the Public Relations Department). This is to protect patients, families and staff of the Hospital.

Media will be escorted off the premises by Public Relations at the conclusion of the interview.

## 7 Entertainment in the Hospital

There are many Third Party organisations providing entertainment for our patients. This includes regular visitors like the Clown Doctors and Delta Dogs as well as one-off visitors such as school groups, football teams or celebrities. It is important that these groups follow the ward protocols to ensure that the visit is a positive one for all parties and does not negatively impact any patients or families.

All visitors must follow the Ward Protocol (Section 4).

Any entertainers who are bringing a guest, a donor or a media representative must follow the approval process outlined above and must be accompanied by a public relations staff member during the visit.

All 'regular' or 'frequent' entertainers visiting a Hospital will be approved for a period of time following the process outlined above via a Memorandum of Understanding which will include any needs, rights or responsibilities specific to that person, group or organisation.

# 8 Family Support Services

The SCHN Hospitals acknowledge that there are many agencies that provide support and assistance to patients and their families in relation to their medical conditions, and their social, emotional and economic circumstances. The following information is to assist staff if and when this situation arises.

# 8.1 Family Requests

Families are free to consent to staff from other agencies visiting them at a SCHN Hospital. This may be due to a pre-existing relationship with a particular service (e.g. religious or complimentary services such as a naturopath or massage therapist). When this occurs, families should be encouraged to let SCHN staff know that they have requested staff from another agency to visit. This allows initiation of the approval process and opportunity to clarify roles that provide optimal care for our patients.

This is particularly important, if the visitor is a clinician giving advice and/or treatment options to an <u>admitted child</u> which may impact on treatment.

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**Note:** Practitioners NOT employed by SCHN are NOT PERMITTED to practice within a SCHN Hospital without specified authorisation from the relevant Director.

(Refer to Complementary and Alternate Medicine Use at SCHN Policy)

## 8.2 Referral to Support Agencies

Where appropriate, hospital staff will talk to families about support agencies in the community which may assist them in relation to their individual circumstances. These agencies provide a range of services including family support, counselling, financial support and other practical assistance.

Staff will make referrals to these agencies only with the express consent of families. **Staff should not give any patient details to agencies without this consent.** *If the external agency is required to visit the patient and family in hospital, the referring staff member should facilitate the approval process outlined above.* However, most contacts between families and external agencies will occur outside of the hospital context.

#### 8.3 Routine Hospital Visitation

There are a number of Family Support Services which have historically visited patients and their families whilst in hospital. It is important that the privacy of patients and families is always respected and that agency staff only see families where consent (verbal or written) has been given. Routine Hospital visitation agencies should follow the approval process and Ward Protocol as outlined above.

In addition, it should be made clear to these agencies that

- they cannot have general access to patient lists, schedules or medical records.
- they cannot offer advice or opinions to patients or families regarding service provision, staff competency or treatment options which are the mandate of the hospital.

It remains at the hospital's discretion to allow this "routine visiting" and these arrangements may be terminated if found not to be in the best interest of the patient and family, or if it compromises the core values and function of the hospital. An MOU should be established to support these relationships

#### 8.4 Written Information

Hospital staff will inform families as appropriate about relevant support agencies which may assist them. At times they will also give them written information developed by the agency.

Brochures about other services will not be displayed on Wards or in Ward Family Rooms. Agencies are able to put their brochures in the Carer Support Centre and Social Work Department.

In some instances Wards will keep brochures and distribute to families as appropriate.

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#### 8.5 Information Sessions

Periodically external agencies may seek to hold information/support sessions for families on hospital premises.

These events need to be negotiated with clinical staff and have an agreed role and purpose. At times it may be appropriate for clinical staff to attend. Families can be invited to these events but should not feel obligated to attend. **These events should not be held in the ward/clinical area**.

## 8.6 Complimentary Services for Parents

Sometimes external agencies agree to fund a complimentary service for families. Examples of these include a hairdresser and/or beautician for parents. Please ensure that all service providers have appropriate public liability insurance before permitting access to the Hospitals.

Visitors in this capacity should ensure they have the Ward/clinical area's approval to provide this service, as arranged via the SCHN Public Relations or other representative. For individuals who provide this service on an ongoing basis, they should be registered via the volunteer program.

**Note:** Using Complementary and Alternative Medicine (CAM) on <u>inpatients</u> is <u>not permitted</u> (except under exceptional circumstances). Refer to the SCHN Complementary and Alternative Medicine policy for more details.

Services provided by a Third Party which may be considered a CAM, such as providing a massage therapist <u>for parents</u>, is permitted so long as the service <u>does not involve or impact on patients</u>. Appropriate approval must be attained as outlined in this policy prior to providing the Service.

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