

## The International Brotherhood of Magicians

Policies and Procedures for

# **OPERATION TRICKS ARE TREATS**

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#### **B. OVERVIEW**

"**Operation Tricks Are Treats**" is the name of the I.B.M.'s Benevolent Show Program. It is intended to bring magic performances to hospital-bound patients, gain positive public image exposure for the I.B.M. at both the international and local level, and introduce prospective members to the art and the organization. It is supervised at the International level, and operated by the local Ring.

The program was tested in a few selected cities the first year—three cities in the U.S.A., and one city in Canada. It proved to be highly successful and rewarding, and is now being continued and expanded to include the entire international organization. "**Operation Tricks Are Treats**" was initially targeted at hospital-bound children during the Halloween season, <u>however this program</u> <u>can be used to conduct Benevolent Shows for many types of audiences, institutions, and facilities throughout the year</u>.

Every person who takes part in this program must be *very* flexible. There are at least three primary areas of activity that must be addressed: ring participation, hospital administration (also applicable to other types of institutions and facilities,) and media coverage. There are also several additional considerations such as the institution's requirements, as well as compliance, insurance, and trademarking.

This "Policies and Procedures" document is designed to be printed, appropriately separated by tabs into the sections identified in the Contents, and placed into a binder. Additional copies of the "information worksheet" pages at the end of the sections can be printed if needed.

If you have any questions or concerns, please contact:

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### C. RING PARTICIPATION

1. If in the USA, emphasize *heavily* the need to quickly comply with any instructions given by institution's staff for the purpose of conforming to the Privacy Rule of the Health Insurance Portability and Accountability Act of 1996, or "HIPAA." A summary of this portion of the HIPAA is available at: http://www.hhs.gov/ocr/privacy/hipaa/understanding/summary/.

2. Try to have a minimum of two (2) magicians for bedside (close-up) performances, and three (3) magicians for day room (parlor) performances.

3. Try to include at least one Youth member, preferably to participate in the parlor show. Emphasize his/her presence and status.

4. Individual acts should be five to fifteen minutes long. Bedside (close-up) visits should be from one or two performers, and total no more than fifteen minutes. The day room (parlor) show can include multiple performers. It should be thirty to forty-five minutes in total length, and should not in any case exceed one hour.

5. Screen the acts' content to prevent repeat effects, and to avoid inappropriate material. *Be very cautious:* 

a. The material should **not** include any loud noises, including blank guns, whistles, etc.

b. Balloons should **not** be used because of the potential for popping, as well as the chance of contact with a patient who may suffer from latex allergies.

c. Effects such as "arm-choppers" or "sword-through-neck" should be avoided—there may be patients in the audience recovering from amputations or tracheotomies.

d. Clowns should not be used, and will be prohibited by some hospitals and other institutions. Young and otherwise vulnerable patients and clients are already in an uncertain situation and may be frightened by clowns.

e. Avoid routines in which props will be handled by several people, especially if patients are involved. This may include sponge balls. If feasible, use a fresh set of props for each patient when contact is involved. It may be wiser to involve a nurse or nearby healthy family member in the handling of props. Sanitize your hands prior to and between performances. Some facilities may require performers to wear gloves and/or gowns.

6. If the performers move from room to room or from ward to ward, they are likely to be escorted by a nurse or other staff member. This person will know the limitations of each patient and client, and will be know whether a short visit or longer performance would be most suitable. Accommodate and be flexible.

## Act Lineup (page # \_\_\_ )

Act # Performer name(s):
Stage name(s) if applicable:
Venue (circle as appropriate): Bedside Close-up / Parlor-Stage Time:
Effects:
Remarks/Special considerations:
□ Act screened for planned content
Act # Performer name(s):
Stage name(s) if applicable:
Venue (circle as appropriate): Bedside Close-up / Parlor-Stage Time:
Effects:
Remarks/Special considerations:
□ Act screened for planned content
Act # Performer name(s):
Stage name(s) if applicable:
Venue (circle as appropriate): Bedside Close-up / Parlor-Stage Time::
Effects:
Remarks/Special considerations:

 $\Box$  Act screened for planned content

#### **D. HOSPITAL (OR OTHER INSTITUTION) ADMINISTRATION**

1. Contact the appropriate office at least three months ahead of time (when possible) to introduce the program and to ask for the hospital's permission. In the case of hospital shows for children, this is often the "Child Life Department" or "Pediatric Social Activity Department." If the show is planned at another type of institution, you'll need to inquire tactfully.

a. Each facility may have its own protocol for this type of event. In some smaller communities, there may not be a precedent for organizational visits. (You'll be the first in these cases, so be sure to leave a positive impression.) In some situations with frequent personnel turnover, it may be advantageous to delay the final scheduling of actual events until the month preceding the event.

b. Generally, mid-morning (10AM) and mid-afternoon (2 PM) will work best for hospitals and residential-type facilities, but be ready to work around meal times, activities, and physician rounds. Evening hours will often not work at all.

c. Keep *very* accurate records and notes of all communications. The date and time of the communication, the name of the contacts, the name of their department or office, and the details of the exchange will all be important as the project progresses. Repeated errors or omissions can leave an unprofessional impression, and make things difficult.

2. Explain and cover the major areas.

a. "We would like to perform in both the bedside (close-up) and day room (parlor) arenas." Be prepared to explain the difference between close-up and parlor in terms easily understood by lay people. Children who are bed-ridden will receive a personal, eight to fifteen minute performance/visit from one of our magicians. If a day room is available for a parlor type magic show, children who are ambulatory will be treated to several magic acts. Adult patients and family members are welcome, but the magic will be "kid oriented."

b. "*What time or times of day will work best?*" Again, mid-morning (10AM) and mid-afternoon (2 PM) frequently work best for hospitals and residential-type facilities, but be ready to work around meal times, activities, and physician rounds. Evening hours will often not work at all.

c. Emphasize that this is an I.B.M. program, and that the magicians will be performing appropriate and family-friendly material.

d. Emphasize that you understand that there is a possibility that patients may have food sensitivities, allergies, or other restrictions. Assure them that "*No actual* "*treats*" will be distributed without specific approval from the hospital staff."

e. Share the restrictions already outlined under "Ring Participation," and be prepared to accept additional limitations and restrictions.

f. Assure the staff that all actions necessary to accommodate and comply with the Privacy Rule of HIPAA will be taken.

3. Get contact information for the institution's Public Affairs staff, and explain that, if possible, we would like to have portions of the event covered by media representatives. There will likely be forms to complete and submit if photographs will be taken.



## **Hospital (or Other Institution) Contact Information**

Hospital Name:	Phone:
Address:	e-mail:
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Additional info:	RANK RANK
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Contact Name / Department:	Phone:
Address:	e-mail:
S - Car	
>	
Additional info:	
Contact Name / Department:	Phone:
Address:	e-mail:
Additional info:	

#### **E. INFORMATION DISSEMINATION AND ADVERTISING**

1. Ask the Administration point of contact for permission to post flyers and posters in the facility. They may have some suggestions for the best locations, e.g. bulletin boards, cafeteria doors, etc.

2. There are poster "PDF" files available online, and from the Benevolent Show/OPERATION TRICKS ARE TREATS Committee.

3. Some institutions may be able to advertise for you on their own "in-house," closed circuit television system (CCTV).

4. Try to have a supply of I.B.M. membership application pamphlets on hand, in case patients or their families and friends are interested. Contact the I.B.M. International Office to obtain these. They can also be downloaded as a ".PDF" file at:

http://www.magician.org/membership\_application.pdf

## Information dissemination within facility

 $\hfill\square$  I.B.M. membership applications ordered / on hand

□ Posters placed (location):	
□	D
□	□
	•
□	
CCTV considered CCTV notes:	
CCTV Contact Name:	Phone:
Address:	e-mail:
- Level	
No.ssa	
Additional info:	
Contact Name / Department:	Phone:
Address	e-mail.
Additional info:	

#### F. MEDIA COVERAGE

1. Notify television, radio, and print media approximately two (2) weeks prior to the event through press releases. Again, there may be forms to complete and submit if photographs will be taken.

a. Tel	evision	
	Station:	, notified on date:
	Station:	, notified on date:
	Station:	, notified on date:
	Station:	, notified on date:
b. Rac	lio	
	Station:	, notified on date:
	Station:	, notified on date:
	Station:	, notified on date:
	Station:	, notified on date:
c. Prin	nt media	
	Publication:	, notified on date:
	Publication:	, notified on date:
	Publication:	, notified on date:
	Publication:	, notified on date:

2. Provide press packages with additional information about the I.B.M., your local Ring, and the individual performers on performance day. Use the press release file as a starting point.

3. Ensure that all media activity will be in compliance with the facility staff's desires concerning HIPAA.

## Media Contact Information

1 V Station/ Radio Station / 1 don	eation (encic as appropriate)	
Contact Name:	Phone:	e-mail:
Address:		
	100	
Additional info:		
TV station/ Radio station / Publi	cation (circle as appropriate).	
Contact Name:	Phone:	e-mail:
Address:		
	est 11	
Additional info:		
TV station/ Radio station / Publi	cation (circle as appropriate):	
Contact Name:	Phone:	e-mail:
Address:		
	Y V V V	
Additional info:		

#### **G. ADDITIONAL CONSIDERATIONS**

1. Background checks

a. Some hospitals or other institutions may require extensive criminal background checks of anyone who may have contact with a client or patient who is not a friend or family member.

b. Rings might find it helpful to seek law enforcement personnel who are I.B.M. members for advice, guidance, and assistance.

2. Training and certification

a. Some hospitals or other institutions may require participants to complete training for protocol and procedures regarding subjects such as privacy, sensitivity, or infection control.

b. Rings might find it helpful to seek staff members of the institution (or similar institutions) who are I.B.M. members for advice, guidance, and assistance.

3. Insurance (requirements and information will vary depending on institution, Province, State, Country, etc.)

- a. (No applicable information, as of yet)
- b. (*No applicable information, as of yet*)
- 4. Trademarking and branding
  - a. (No applicable information, as of yet)
  - b. (No applicable information, as of yet)

#### H. NOTES COLLECTED FROM PREVIOUS PARTICIPANTS

"Each hospital or institution may have its own site policy on how it treats volunteers in the hospital. There may be specific Provincial/State/local differences that need to be observed."

"It may be a requirement that the performers sign a "confidentiality agreement" as the privacy of patients is paramount. Photographs and media may need to be cleared and coordinated with the facility's Public Relations Department. Consent forms may need to be signed and photographs may need to be staged, as opposed to being shot during the actual performances."

"The safety of the performers must be taken into account, as well as that of the patients. To this end, magic effects that are handled by the patients should be made of materials that will not support germs. Sponge balls were a problem. The props should also be made of materials that can quickly and easily be sterilized between bedsides or following the performance in a day room. Consider having many sets of these types of props on hand. As for the performers, if they even suspect that they may be ill or may be coming down with something they should voluntarily pull out – even if it is the day of the performance. This is for the safety of the patients."

"Some hospitals may require some type of medical clearance form signed by a physician prior to working at the facility. This is a site regulation as opposed to a blanket requirement."

"Some facilities may require that a police check be completed prior to the day of the performance."

"Performers need to be very aware of touching patients. The concern here is not that the touch would be inappropriate, as I would hope we all know how to respect an audience member, but it may be from a disease transmission perspective. The disease concern may be transmission from the patient to the performer. To this end, the effects used may have to be items that can be done with disposable gloves and/or a gown worn by the performer."

"As for the number of performers, this will be governed by the hospital. Typically, there should be no more than two magicians to a room. This may be altered depending on the room configuration and the hospital rules. There is also the issue of the number of nurses available to assist that day. The staffing level will also determine the numbers."

"Some children were scheduled to be discharged in the morning, just prior to the event. Their parents really wanted them to be able to watch the show, so their Doctors arranged for a "Late Discharge," and they were able to attend."

"Control the advertising; if you're hoping for a crowd comprised exclusively of children, don't advertise all over a huge hospital—pick the ad locations carefully."