Home Visiting
Policy & Procedure

APPROVED BY: Pathways SouthWest Board of Management

APPROVAL DATE: January 2015
DOCUMENT NUMBER: POL01.20

REVIEW DATE: January 2018
VERSION: 2

THIS POLICY & PROCEDURE APPLIES TO: Pathways SouthWest Board of Management, Staff, Students, Volunteers, Consumers, Carers, other Stakeholders and the General Public
Home Visiting
Policy & Procedure

Policy
This policy demonstrates that Pathways SouthWest is committed to providing a supportive and safe working environment to staff, who conduct community visits. Pathways South West has a duty of care to provide optimal support and risk management strategies to staff working within consumer's homes or within community settings.

This policy is to be read in conjunction with the "No Response Policy When Home Visiting Policy & Procedure”.

Definitions
Community Visit: A visit is a period of time during which a Pathways South West staff member is required to carry out their work in a community setting, outside of the physical location of the office.

Low Risk: No known history of aggression, social stressors, or instability.

Low Risk Community Visit: A low risk community visit is where there is no awareness of pre-identified or anticipated risk factors.

High Risk: History of aggression, extenuating social situation, and threats of harm to self/others, family history of domestic violence, substance abuse associated with violence, history of mental illness associated with aggressive behaviours, or aggressive pets.

High Risk Community Visit: A high risk community visit is where there is an awareness of pre-identified or anticipated risk factors, with a potential threat to the safety of staff/visitors. Two staff members are to attend a high risk community visit.

Exceptional community visits: An “exceptional” community visit, is one being undertaken outside normal business working hours.
Procedure
Responsibilities
A nominated member of the Management Team is to provide:

- Employees with appropriate training and information as it relates to the community visiting service.
- Employees with training and information to appropriately respond to difficult behaviours.
- Appropriate communication resources to employees.
- Evaluate home procedures regularly to ensure they cover all aspects of staff workplace safety and occupational health issues.
- Consult with employees involved in community visiting on relevant issues including safety.
- It is the Service Delivery Manager and team decision to determine when a one staff member or two staff member visit is appropriate depending upon the risk. Hi Risk Community Visits must have two staff members visit.
- Notify personnel of other visiting services of potential risks identified in mutual consumers within Pathways SouthWest.

Employee Responsibilities

- Be cognizant of the “No Response Policy” and ensure that the client they are visiting has agreed to the identified procedures.
- Report all unresolved identified hazards, incidents and accidents to the Service Delivery Manager and complete an incident report.
- Ensure all equipment to be used is operating effectively.
- Ensure first aid and emergency supplies are in the vehicle before leaving the workplace base.
- Provide a community visiting schedule at the office as per whiteboard at reception.
- Ensure that sign-in/sign-out register is completed.
- Notify the nominated person when have completed one visit and going onto the next visit when undertaking two or more different and consecutive community visits.
- In the case of an exceptional community visit, the staff member is to discuss this proposed arrangement with, and receive the approval of, their Manager. If the visit is approved, the staff member is to give all relevant details to the Service Delivery Manager including their estimated time of return.
- Withdraw from home visit where safety is compromised and, if deemed appropriate, negotiate alternative arrangements following an assessment review. Consult with the consumer’s carer if and when appropriate and or possible.
- Use guidelines below for Community/Home Visiting to assess risks, identify hazards.
GUIDELINES FOR COMMUNITY/HOME VISITING

Prior to Visit:

Risk Assessment to be undertaken and documented within consumer electronic file (SMS database). This is to be conducted by Service Delivery Manager or other nominated person able to conduct risk assessments.

1. The staff member undertaking the visit should:

2. Identify potential risk factors from the source of referral if they can. Ask specific questions of the referring person about the consumer and others in the home, e.g. who lives in the home?

3. Ascertain where possible whether the consumer or others in the home have a known history of previous aggression, abusive behaviours, any intellectual or mental disorder, or history of drug and/or alcohol abuse.

4. Liaise with other staff/manager and carer if possible. Discuss any concerns and seek relevant information about the consumer before arranging an appointment with the consumer.

5. Where possible, telephone consumer/carer and arrange an appointment time.

6. At times, when appropriate have a colleague or other professional accompany on the community visits if there are any concerns regarding “risks”.

Assess the risk:

LOW – No known history of aggression, no social stressors, stable condition/history.

OPTIONS –

a) Proceed with one or two-person visit as clinically indicated.

HIGH – History of aggression, condition unstable, extenuating social situation, threats of harm to self or others.

OPTIONS –

a) Proceed with a two-person visit as clinically indicated.
b) Do not proceed and arrange alternative care.
c) Plan an alternative strategy.

If degree of risk is unknown staff must assume that the risk is high and the control measures for high risk are used.

Note: If a potential risk is identified, under NO circumstances should staff place themselves in a position where they will be alone with the consumer. Workers should never place themselves or another staff member in a potentially dangerous situation.
Before leaving the work site

The staff member should

1. Notify their manager of their whereabouts. As a routine process prior to the visit, ask consumers or their carer regarding dogs/animals at the home address or other safety issues prior to leaving the workplace as this may have changed since the risk assessment.

2. If unable to contact the consumer by phone to arrange an appointment time, a card/letter (in sealed envelope) should be left in letter box of the known address or posted to arrange an appointment if appropriate/applicable.

3. Ensure their whereabouts is clearly recorded; name(s), time of departure and estimated time of return, the consumer's initials and vehicle on the office whiteboard. If there are confidentiality concerns, your intended location(s), mobile telephone contact number(s) may be used.

4. Ensure that a mobile phone is fully charged and is turned ON and is unlocked (if this facility is available). Important telephone numbers, such as the Police Service, should be programmed onto the 'speed dial' facility, if it is available, on all mobile phones that are used for work purposes. Prior to conducting community/home visits all staff must familiarize themselves with the proper use of service mobile telephones.

Safety precautions at the location

1. Observe the nearest probable source of help e.g. an occupied home, petrol station.

2. Drive past the address to gain an awareness of the immediate locality and orientate to possible emergency exits.

3. Park the vehicle where it is clearly accessible. Avoid parking in driveways. Face the vehicle in the direction of an exit route.

4. Exception: If the street is too narrow to permit safe parking the staff member should park in the driveway or council cross over to the driveway. Staff are to avoid being blocked in by other cars.

5. Always keep the keys for the vehicle on you so they are easily accessible. Do not place them in a handbag or bag in case having to leave in an emergency.

6. Be aware of the community visit environment such as sounds of domestic altercations, untethered / barking dogs, and obvious signs of drug / alcohol abuse.

7. If becoming concerned at any time, abandon the visit as soon as possible, return to base and inform the manager and other staff members. Complete an incident form and document on SMS data base case notes.

8. Wait for the door to be answered; do not respond to a call of “come in”. Stand to the side of the entrance and a few paces back after knocking on the door. Discreetly try to gauge whether other persons are present in the home before entering. If this is unclear, ask if there is anyone else at home.
9. **Exception**: If it is known that the consumer is unable to come to the front door a carer/family member or friend should be requested to be in attendance to open the door to the Pathways staff member. If this is not possible the staff member should undertake a risk assessment and, if it is safe to do so, continue with the visit or abandon it and contact his/her manager by mobile phone for advice.

10. Be courteous, friendly and non-judgmental in approach. Clearly state name and the reason for coming. Show your Pathways identification badge as proof of identity. Ask to speak to the person who is the subject of the visit.

11. If refused entry or requested to leave, comply quickly and courteously.

12. Request that any family pets be restrained.

13. If the person being visited is not home, leave name and number in a sealed envelope in the letterbox. It may be inappropriate to give the reason for the visit to other family members.

**Inside the location**

1. Always keep the keys for the vehicle easily accessible.

2. Be aware of and maintain appropriate personal space and distance from the consumer.

3. Look for any potential weapons in the area. Wherever possible, interviews should not be conducted in rooms such as the kitchen, a bedroom or the garage to reduce potential risk factors.

4. **Note**: Sometimes a staff member may need to conduct interviews/interventions in these rooms. In this situation the individual staff member is to undertake his/her own risk assessment.

5. When sitting, be careful not to be backed up into a corner and, if possible, maintain a clear view of the door. Place self in a position with access to an unobstructed exit. Always ensure that you are seated closer to the exit than the consumer. Never allow a door to be locked behind. Never sit in a low chair that is difficult to arise from quickly.

6. During the visit, if there are any indications that safety may be compromised or something is wrong, terminate the visit immediately.

**NOTE**: IF BEHIND TIME WITH VISITS, AND EXPECT TO GO BEYOND THE ESTIMATED RETURN TIME, ADVISE RECEPTION STAFF AT THE OFFICE OF REVISED TIME OF RETURN.
Back at the work site following community visit

1. Immediately notify reception staff and or a member of the Management Team of return and up-date the whereabouts whiteboard.

2. If the community visit was an “at risk” situation, it is important to clearly document the problems / potential hazards experienced e.g. aggressive dog/s, lack of privacy to see consumer, alcohol abuse, domestic violence and also notify the manager and other team members about these problems / hazards.

3. Note: Place alerts on SMS data base and a ‘Clinical Alert Form’ in the hard copy of the clients file. Identification of these risk factors for community visits will facilitate clear communication of risks to all staff that may be involved in future visits.

4. If the names of any other health care workers/NGO’s who are going to visit the consumer in that household in the near future inform them of any “at risk” issues. In the case of consumers where there are identified ongoing personal risk factors for home visits, such visits should be restricted to a ‘two staff visit’ only. In some situations it may be necessary to cease the home visits until staff safety can be assured.

*Note: If risk factors are identified and it is known that Pathways services or external agencies are also undertaking community/home visits to the consumer, Pathways Management Team staff are responsible for liaising with them regarding the identified risks to staff.*

1. If an incident occurred notify manager verbally and complete the relevant Pathways Incident report / other documentation and forward it them to your Manager. Details of the incident should be entered into the consumer’s/ carer’s clinical record.

2. If an injury is sustained, complete the prerequisite Worker’s Compensation documentation and give it to Manager within the required time frame.

3. Should the visit be abandoned for any reason notify the team to discuss any action that needs to occur and document these in SMS data base and place a copy inside cover of consumer’s /carer’s file.

Failure to report back by staff on community visits

If more than 30 minutes has passed since the expected time of return/contact time, and the staff member has not previously phoned to change his/her expected time of return; the following actions are to be taken:

The process is that the person who identifies that the staff member has not returned is to try to contact the staff member on his/her mobile phone number. If this is unsuccessful this person is to notify a member of the Management team and give the staff member’s last known whereabouts, the time of the last call and all other relevant details.
**Action by member of the Management Team**

1. If the situation is unknown or high risk contact the Police Service and inform them of concerns and ask them to check the situation.

2. If the situation is considered low risk the nominated member of the Management Team may consider the following options:
   a. Phoning last known community visiting location;
   b. Visiting last known place of contact, however this must only occur in accordance with these Guidelines;

3. If situation has not resolved then nominated Management Team member is to inform the Police Service and the CEO.

**Emergency help call**

A staff member can contact the work site and request support and assistance but this does not preclude direct contact with emergency services.

In an emergency situation the staff member receiving the call is to obtain the individual’s name and location and, if possible, the nature of the emergency.

**Then:**

1. Based on information given, provide additional staff support, phone the Police Service or other emergency services, e.g. Ambulance, to seek urgent assistance to attend staff member’s location.

2. Contact staff member’s Manager or, if not available, the nearest, most available, member of the Management Team

3. Inform the Management Team about the incident.

4. The staff member’s next of kin should be contacted to ensure that any urgent family circumstances are attended to, e.g. children requiring to be picked up from school/ day care centre.

**Vehicle safety**

- Refer to the Code of Conduct re usage and upkeep of vehicles and or policy re vehicle safety.