

Visiting and Visitors Policy

Introduction

Quality Statement associated with this policy:

Quality statements are the commitments that providers, commissioners and system leaders should live up to. Expressed as 'we statements', they show what is needed to deliver high-quality, person-centred care.

When they refer to 'people' we mean people who use services, their families, friends and unpaid carers. This includes:

- people with protected equality characteristics
- those most likely to have a poorer experience of care or experience inequalities.

Elizabeth Finn Homes will commit to the following quality statement for Visitors to our homes

Treating people as individuals

"We treat people as individuals and make sure their care, support and treatment meet their needs and preferences. We take account of their strengths, abilities, aspirations, culture and unique backgrounds and protected characteristics."

Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 12, 13, 17, 18, 20

Scope

This policy is intended to set out the values, principles and policies underpinning Elizabeth Finn Homes' approach for visitors and visiting.

The policy aims are on the one hand to promote an open ethos whereby all bona fide visitors are made welcome and comfortable during their visit and are treated with courtesy and respect, and on the other to recognise that the home has a duty of care to protect its residents and staff from intruders and anyone who threatens their safety and security.

Equality Statement

EFH is committed to equal rights and the promotion of choice, person-centred care and the promotion of independence. This policy demonstrates our commitment to creating a positive culture of respect for all individuals. The intention is, as required by the Equality Act 2010, to identify, remove or minimise discriminatory practice in the nine named protected characteristics of age, disability, sex, gender reassignment, pregnancy and maternity, race, sexual orientation, religion or belief, and marriage and civil partnership. It is also intended to reflect the Human Rights Act 1998 to promote positive practice and value the diversity of all individuals.

Policy Statement

Elizabeth Finn Homes aims to minimise the risks to residents' safety and security, while enabling them to receive as visitors and guest's people of their own choosing at times that are mutually convenient to them.

The policy applies to everyone visiting the home on any business and to all staff in their treatment of visitors. It provides guidance for residents on what they can expect when they have visitors or arrange to have them.

The policy supports the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 9A

This regulation aims to make sure:

- people staying in a care home, hospital or hospice can receive visits from people they want to see

- people living in a care home are not discouraged from making social visits outside the home
- people attending appointments in a hospital or hospice, that do not require an overnight stay, are accompanied by a family member, friend or advocate if they want someone with them.

The regulation explains what providers must do to make sure they respect the right of each person to receive visits and to be accompanied, following an assessment of their needs and preferences.

The draft guidance currently supports the intention that:

- Everyone should work on the assumption that in-person visiting and accompaniment to appointments are possible. Providers must put in place any measures or precautions necessary and proportionate to ensure that visiting and accompaniment can happen safely. These must be the least restrictive options and should be decided with the person using the service, and their family, friends or advocates where appropriate.
- The provider must help people to understand their options and make informed decisions.
- The provider should regularly review any precautions that have been implemented and should remove them as soon as possible. (This will include local guidance during an outbreak which requires Infection Prevention and Control principles.)

EFH will consider:

- Very occasionally, there may be exceptional circumstances where, despite any precautions, a visit or accompaniment would still pose a serious risk to the health, safety or welfare of the person using the service or other people on the premises.
- This risk will mean that, despite considering all possible actions and precautions, an in-person visit or accompaniment cannot be safely facilitated.
- If this is the case, and the provider decides the exceptional circumstances mean there is no alternative to restricting visiting or accompaniment at that time, they should review arrangements regularly.
- As soon as circumstances change, the provider should remove the restrictions to allow in-person visiting or accompaniment again.
- Providers must make sure they take people's mental capacity into account, as well as their ability to consent. They must make sure that either the person, or someone lawfully acting on their behalf, is involved in planning, managing and reviewing their care and treatment. This includes their right to having visitors and being accompanied to appointments.
- Providers must make sure decisions are made by those with the legal authority or responsibility to do so. They must work within the requirements of the Mental Capacity Act 2005. The act includes a duty to consult others, such as families, unpaid carers and advocates, where appropriate.

The Policy

Definitions

A visitor is defined as someone who does not live or normally work on the premises as a paid staff member or accredited volunteer and who comes to the home for a short period of time to see residents or staff. For the purposes of this policy visitors include people who:

- deliver, provide or supply goods and services that have been bought or commissioned by the home, staff or residents, including repairs and maintenance
- provide professional services to residents such as GPs, community nurses, pharmacists, occupational therapists, physiotherapists, ministers of religion, social workers, advocates, hairdressers, opticians, etc.
- visit residents on a personal or social basis regularly or occasionally, e.g. relatives, friends and others who come to see an individual resident
- come to the home to see staff members for any reason

- visit the home on a professional or business basis, e.g. external managers, inspectors and other personnel from the employing organisation or similar who may not be coming specifically to see individual residents, but who may have some contact with them depending on the nature and purpose of their visit.

Residents' Visitors and Visiting Arrangements

Residents may receive visitors at any times that are acceptable and reasonable to them and no general restrictions are imposed. This ensures EFH are compliant with the proposed draft visiting guidance as detailed at the start of the policy. There may be occasions when a resident finds it difficult or inconvenient to receive a visitor, e.g. because of ill health or current circumstances. However, any such decisions to refuse or defer access will be determined by those individual circumstances and the wishes of the resident will always remain paramount.

Residents have the right to receive visitors in the privacy of their own room and for the visits to remain private. Where it is inconvenient or uncomfortable to use the resident's own room, e.g. because of numbers, the home will arrange for a more suitable venue in line with the resident's wishes.

Staff should make enquiries on the nature and purpose of any visits only where the resident is evidently vulnerable to harm or injury or there is evidence that the resident may have been subject to some form of abuse because of a visit or the actions of a visitor. If there is evidence of abuse, the home will follow its safeguarding procedures.

Normally, the home will get to know whom a resident has or wishes to have as a visitor so there will be no reason to enquire into the nature and purpose of the visit. Where a resident receives a visit from an apparent stranger or at an unusual or irregular time it is appropriate to ask the resident first whether he or she wishes to receive the visitor. In coming across strangers, it is appropriate and reasonable for staff to enquire about the identity of the person and the nature and purpose of the visit, especially if the resident is uncertain or confused by it. For example, this might happen in the cases of visitors who are cold-calling for commercial purposes.

In connection with their care plan, residents are asked by the appropriate person whom they are likely to have as bona fide visitors and any people whom they would find unacceptable or whom they would wish to be consulted over first before receiving them. This information, with the resident's consent, is recorded on the care plan and provides some general guidance to staff under circumstances where they are uncertain about a visitor's credentials or credibility. However, the cardinal rule is to always consult the resident or their representatives whenever in doubt.

Staff Visitors

Staff are not expected to receive visitors while they are working or to be interrupted in the course of their duties by social calls. However, it is acceptable to have people whom they know as family members or socially to call to leave messages or have some brief contact if the matter is urgent. This is quite consistent with the open ethos that the home is trying to promote. The same principle applies to staff receiving telephone calls, which are acceptable for information exchange, but not general conversational purposes.

Procedures for Receiving Visitors

The home has a single port of entry policy so that all visitors report on arrival to the receptionist or an available staff member, who will ask them their name and whom they wish to see and direct them accordingly.

All visitors who enter the premises other than those who are simply delivering or dropping off items such as the mail or supplies must sign the visitors' book. This will record time of arrival, time of departure, any car registration number if parked on the premises and the main contact person. This ensures that the home is able to account for everyone in the building at all times, which is important in the event of any emergency evacuation of the building.

All visitors will thus in effect have a “responsible person”, who can be a resident or staff member, and who will be able to account for the nature and purpose of the visit and visitor’s whereabouts.

As part of its general approach to customer service, staff are expected to treat every visitor courteously and to make them feel welcome and comfortable. Where visitors have to wait to see the person they have come to see, they should be offered a comfortable seat and refreshments as available.

Where staff encounter someone, they do not know or who seems lost or uncomfortable in the building it is appropriate to ask them politely whether they need help and whom they are there to see.

Training

Everyone will read this policy and receive support to fulfil the requirements of the policy as part of their induction and thereafter.

The Registered Manager will ensure that agency staff working at the home have completed the necessary policy update for their role and that they understand the homes policy and procedure.

The Registered Manager will:

- Monitor performance against this policy.
- Assess knowledge and competence at least annually.
- Provide learning and development opportunities when identified or required. These may include reflective learning, opportunities to explore problem solving, and explanations of concepts and terminology if needed (to ensure accessible information).

Supervision and Team Meetings

Supervision, team meetings and other learning opportunities should be used to:

- Share best practice
- Challenge poor practice or discuss uncertainty around safeguarding practice related to the visiting policy.

Registered Managers should make particular efforts to involve staff who work alone or who get very little direct oversight (for example, night staff).

Seeking Feedback about

This organisation will seek feedback from people, families, staff, involved professionals and volunteers about their experiences of visiting the home and how visits have been arranged, managed and evaluated. We will seek feedback in person during conversations and via surveys and meetings. We will respond to feedback and tell people about changes and improvements we make as a result of their feedback.

Review date	Next Review Date
January 2024	January 2027