

AR25 - Visitors Policy and Procedure

Category: Administration Sub-category: Registration & Compliance







Policy Review Sheet

Review Date: 12/12/16 Policy Last Amended: 12/12/16

Next planned review in 12 months, or sooner as required.

Note: The full policy change history is available in your online management system.

Business Impact:	Low	Medium	High	Critical
		X		
Changes are important, but urgent implementation is not required, incorporate into your existing workflow.				

 Reason for this review:	Best practice
 Were changes made?	Yes
 Summary:	Policy rewritten in new format and includes reference to the results of the Lampard Enquiry and the need for increased vigilance and awareness of the potential for abuse
 Relevant Legislation:	<ul style="list-style-type: none"> The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Human Rights Act 1998
 Underpinning Knowledge - What have we used to ensure that the policy is current:	<ul style="list-style-type: none"> Care Quality Commission, (2016), <i>Information on Visiting Rights</i>. [Online] Available from: http://www.cqc.org.uk/sites/default/files/20161025_Visiting-rights-information-detailed.pdf [Accessed: 14/11/2016] Kate Lampard and Ed Marsden, (2015), <i>Themes and lessons learnt from NHS investigations into matters relating to Jimmy Savile</i>. [Online] Available from: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/407209/KL_lessons_learned_report_FINAL.pdf [Accessed: 11/11/2016]
 Suggested action:	<ul style="list-style-type: none"> Notify all staff of changes to policy Share key facts with professionals involved in the service Share key facts with people involved in the service Discuss in team meetings

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1. Purpose

1.1 To ensure that protects people that use the service from unwanted visitors or interference, and that their rights are protected.

1.2 That family and friends of the Service User is involved in the care and the importance of their involvement is reflected in the Care Plan of the individual.

1.3 To support in meeting the following Key Lines of Enquiry:

Key Question	Key Line of Enquiry (KLOE)
SAFE	S2: How are risks to individuals and the service managed so that people are protected and their freedom is supported and respected?
WELL-LED	W1: How does the service promote a positive culture that is person centred, open, inclusive and empowering?

1.4 To meet the legal requirements of the regulated activities that is registered to provide:

- | The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- | Human Rights Act 1998



2. Scope

2.1 The following roles may be affected by this policy:

- | All staff

2.2 The following Service Users may be affected by this policy:

- | All service users

2.3 The following stakeholders may be affected by this policy:

- | Family
- | Advocates
- | Representatives



3. Objectives

3.1 That all people using the service only receive visitors that they wish to see, and that they are not subject to any unwanted attention, or abuse.

3.2 For people who have been assessed as lacking capacity, a best interest decision and Care Plan includes information on visitors.

3.3 To recognise the importance of the sustained and supported involvement of families and carers in the care of their loved ones.

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4. Policy

4.1 The organisation acknowledges that the establishment is the home of the Service User, and the flexibility and control that a person would exercise in their own home will be encouraged and supported.

4.2 recognises that family and loved ones being able to visit the person using services is central to developing person-centred care.

4.3 recognises the implications of the Lampard Enquiry for all services, not just NHS establishments. All visitors will be required to follow the procedure detailed within this policy no matter what their status, role or influence.

4.4 In order to comply with regulations, all visitors will sign in and out of the premises.

4.5 Staff will respect the person's relationships and give them as much privacy as possible.

4.6 will always respect the choices of the person using services, and if it is assessed that they do not have capacity in this area then all decisions will be made in the person's best interests, following the principles of the Mental Capacity Act.

4.7 If there is conflict between visitors, the service, people using services or staff members then will seek to resolve the issues amicably and to the satisfaction of the person raising the concern, although the primary concern is the promotion of the welfare of the Service User.

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5. Procedure

- 5.1** There will be no restrictions on visiting hours, other than those requested by Service Users collectively or individually.
- 5.2** Visitors will be encouraged to announce themselves to staff on entry to the establishment, and to sign in and out of the premises.
- 5.3** Unless specifically authorised by the Service User, visitors will be asked to wait in a reception area while staff ask the Service User if they wish to receive the visitor. If a Service User does not wish to be disturbed, the visitor will be told that the Service User has asked not to be disturbed at the moment.
- 5.4** Service Users views on which of their visitors, if any, may be given unannounced access to them will be noted in the Care Plan, and staff will not grant other people unannounced access.
- 5.5** If the Service User is assessed as not having capacity in the area of deciding who visits them, visits should still be enabled and encouraged, unless there are compelling reasons to say they are not in the person's best interest. The Mental Capacity Act decision making process should always be followed in these circumstances.
- 5.6** Visitors are requested to declare to a member of staff all food and drink brought onto the premises for the consumption of Service Users, in order for the establishment to exercise its duty of care in this area.
- 5.7** To minimise the chance of any future misunderstanding, visitors are requested to declare to a member of staff any possessions taken from or given to Service Users.
- 5.8** Visitors, where possible, will be accompanied to see the person they are visiting.
- 5.9** On entering the premises, visitors must agree to abide by the policies and procedures of the establishment.
- 5.10** In the event of a visitor presenting a risk to the person they are visiting, other people accommodated, or staff, the provider should talk to the visitor, who may not realise that what they are doing poses a risk. If this continues, the provider would need to assess the level of risk and the impact on the person. In extreme cases, refer the matter to the local authority's safeguarding team to provide oversight of the situation and to consider investigating the case under their safeguarding procedures. If criminal activity has taken place the police should be contacted.
- 5.11** Seeing a loved one in a care home can be distressing, especially in the beginning or as they become more dependent because of frailty, illness or decreasing capacity. Bearing this in mind, if issues or conflict develops, the provider should first meet with the visitor and try to resolve them. Conflict between the provider and a family member or friend may be detrimental to the wellbeing of the resident. If the visitor has concerns about a Service User's care, these should be acknowledged, understood and acted on.
- 5.12** If issues cannot be resolved, as an extreme measure, the provider may consider placing some conditions that restrict the visitor's ability to enter the premises if, for example, they believe (having sought advice from others, like the safeguarding team) that the visitor poses a risk to other people using the service and staff, or to the running of the service. For example, the provider could limit visits to take place in the resident's room only.
- 5.13** Any conditions should be proportionate to the risks to other people or staff and kept under review. must be able to demonstrate that any conditions are not a response to the visitor raising concerns about the service as this would be a breach of the regulations.
- 5.14** To promote the safety and respect for all people using the service, visitors will only be allowed in the private accommodation of the person being visited, or the recognised communal areas of the service. Visitors will not be permitted into the private accommodation of any other person without the express permission of the person concerned.
- 5.15** If the visitor is a person who is looking at providing a service for themselves or another person in the future, then these visitors will be accompanied at all times. They will only be permitted to communal areas and the impact on people using the service will be minimised.

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5.16 If the visitor is a VIP, or other person with power and influence, then the same procedures for other visitors will be followed. They will be accompanied at all times and access will only be permitted to communal areas. Visits to people using services in their personal accommodation will not be permitted without their express permission.

5.17 will ensure that the complaints policy is available and accessible to Service Users, their visitors and their loved ones. will ensure that the complaints policy is followed in the event a complaint arises. They will make sure that the Service Users care and/or treatment is not negatively impacted as a result of any complaint being made, nor will their visitors or loved ones experience any negative treatment.

5.18 Where there are concerns about the visitors, should follow the local safeguarding procedures and seek advice from the safeguarding team.

5.19 Volunteers will comply with safer recruitment best practices which will include the need for Enhanced DBS check if their role requires it. All new volunteers should undergo an induction and this will include the need to maintain professional boundaries. In addition, staff supervising volunteers will need to be mindful of the volunteer's role and raise any concerns with the Registered Manager should they arise.



6. Definitions

6.1 The Lampard Enquiry

- | An independent report into the themes and lessons learnt from NHS investigations into matters relating to Jimmy Savile and the abuse that took place
- | Focussed on the NHS and makes recommendations for future practice to reduce the chances of similar happening again



Key Facts - Professionals

Professionals providing this service should be aware of the following:

- | Visitors should be encouraged, and are central to providing a person-centred service and should be reflected in the Care Plan where applicable
- | Visitors need to sign in and out when they visit
- | Visitors should only have access to communal areas and the private space of the person they are visiting
- | Visitors should be accompanied to the person they are visiting where possible
- | If a Service User does not want to see a visitor, then this should be respected
- | When a Service User is assessed as not having capacity to decide whether they see someone or not, then decisions must be made in their best interests following the principles of the Mental Capacity Act
- | When conflict occurs with a visitor, it should be managed sensitively and where possible the wishes of the Service User followed
- | The safety of the Service User, other Service Users and staff are paramount
- | Service Users and visitors should not be adversely affected for making a complaint



Key Facts - People affected by the service

People affected by this service should be aware of the following:

- | Visitors should be encouraged
- | If the Service User doesn't want to see someone then this choice should be respected
- | Visitors can visit at any time, and there are not fixed hours for visits to take place

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Further Reading

As well as the information in the 'underpinning knowledge' section of the review sheet we recommend that you add to your understanding in this policy area by considering the following materials:

Care Quality Commission, Better care in my hands: A review of how people are involved in their care, May 2016:

<http://cqc.org.uk/content/better-care-my-hands-review-how-people-are-involved-their-care>

Outstanding Practice

To be outstanding in this policy area you could provide evidence that:

- | The service is proactive in identifying visitors for people using the service, and increasing their network of friends
- | Visits are facilitated in a highly flexible manner and in locations at the direction of the person using services
- | The service always discusses visitors with the person using services, and consistently respects their wishes
- | There is wide evidence of visitors being extremely satisfied with the input of the service in maintaining relationships
- | There is evidence that feedback from visitors is used to improve services

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