

## G.06 Safe Home Visiting Policy

### 1.0 INTRODUCTION/BACKGROUND

The values and philosophy of Mercy Services and society's laws direct us to keep staff and other people safe. Mercy Services' staff and volunteers often have to work in a client's home. In one sense we support the right of clients to live in a manner of their choosing, however when they agree to have us provide assistance in their home; they agree to cooperate with us in ensuring the environment is safe for our staff/volunteers. Staff/volunteers may be exposed to:

- a. Emotional risks:
  - staff/volunteer becoming distressed by what they see or hear at the client's home; and/or
  - staff/volunteer being harassed, bullied or threatened by people at the client's home, including neighbours.
- b. Physical risks:
  - substance abuse, access to weapons by client or by others on the premises;
  - hazardous substances used in home;
  - manual handling activities involved;
  - equipment and work environment;
  - heat/cold/confined spaces/noise/light/electricity/moving or falling objects; and/or
  - threat of violence from people at the client's home, including neighbours.

### 2.0 SCOPE

This policy applies to all Mercy Services' employees, volunteers and contractors. This policy sets out the ways the organisation will ensure their safety while working in clients' homes.

### 3.0 POLICY STATEMENT

On any home visit, an appropriate level of care must be exercised by workers, including volunteers, to ensure his or her safety at all times. Any identified risk to themselves or others should be acted upon.

### 4.0 PROCEDURES

#### 4.1 PRIOR TO HOME VISIT

##### 4.1.a New client

Before staff or volunteers visit a client's home for the first time a basic check of the safety risks of the client's home environment should be completed. Appropriate information is obtained at the time of referral regarding any history of violence by the client or household members; any untreated

mental illness, etc should be considered when allocating staff/volunteers to clients.

New clients will be given verbal and written information outlining their responsibility to cooperate with Mercy Services to ensure the safety of staff/volunteers assisting them in their home.

If the Coordinator (or delegate) believes the information provided by the client is insufficient or raises safety concerns s/he can:

- ask the client to provide the name of another person who can provide further information on the client; and/or
- two staff will together complete the initial assessment visit to the client's home, or
- ask the client to meet the Mercy Services' Coordinator at our office or another suitable venue.

The Community Transport service completes most of the client assessment over the telephone. Only when specific issues arise, such as concerns about the physical layout of a pick-up point, will the Coordinator, singularly or with a colleague, visit the client in their home.

#### **4.1.b Current client**

Some client home environments are considered high risk either all of the time or during certain circumstances. The risk may be due to deteriorating weather/natural disaster, unpredictable people in or near the home, or danger in the building/property. In these cases a phone call will be made to ensure the environment is safe prior to staff/volunteers attending. If the home environment is not safe we will:

- ask the client to meet the Mercy Services' staff/volunteer at another suitable venue (see section 4.3 of this policy); or
- cancel the service (see section 4.5 of this policy).

## **4.2 ENSURING SAFETY DURING VISIT**

Staff members should wear or carry a Mercy Services identity badge at all times.

### **4.2.a Assessing safety and exit options**

As part of the initial assessment, after referral, the Coordinator (or delegate) will complete an assessment of the client home environment at the first visit or soon after (see G.05 Risk Management Policy).

Staff/volunteers will be aware of the following guidelines:

- park cars to allow for easy access / exit e.g. not in driveways;
- choose a safe place to sit;
- be aware of access and exit points of the premises;
- make every attempt to ensure the safety of others in the area, especially children, but should not endanger themselves in doing so;
- notify the Coordinator if conditions change e.g., it is dark entering the property in winter, the driveway becomes slippery when wet;

- if staff/volunteer feels unsafe at any time with the client or other people in the home, s/he is to leave immediately and contact the Coordinator; and
- if the area around the client's home is prone to flash floods or bushfires there needs to be a plan for safe alternative routes in/out of the area.

#### **4.2.b Smoke free environment**

Clients will be told that WHS Legislation requires that Mercy Services' staff/volunteers be provided with a smoke free workplace. Therefore, clients and those they share a house with are respectfully requested to refrain from smoking while Mercy Services' staff are in their home. Mercy Services' staff are required to leave a client's home if someone refuses to extinguish a cigarette, etc.

#### **4.2.c Limiting volunteers with accompanied children**

Mercy Services does not encourage volunteers to include their family/friends in their volunteering role. Volunteers may only bring a child with them to a client's home if the Coordinator has given prior approval and only if they have signed an indemnity form (see Appendix 1).

#### **4.2.d Assess and address client needs**

Coordinators may roster more than one worker when:

- clients being transported need a volunteer or accompanying staff member to provide them with support or supervision;
- delivering meals to client's homes;
- there are concerns about safety (e.g. visiting a family with a history of domestic violence); and/or
- a second person may be required as a witness.

Coordinators will ensure that staff/volunteers with sufficient skills and experience are rostered to support a client with complex care needs and /or challenging behaviours. Volunteers would rarely be rostered for such a client given the skills required.

#### **4.2.e Addressing personality clashes**

Staff/volunteers and clients may experience personality clashes, despite the best efforts of Coordinators to match personalities and interests and the best efforts of the people involved.

When such clashes occur staff/volunteers and clients are encouraged to report their difficulty to the Coordinator who may, after discussion with the staff/volunteer and/or client:

- explore ways to cope with (including training), address or otherwise resolve the clash so that the care relationship can continue in a happier state; and/or
- re-assign the staff/volunteer and appoint another for this client, where s/he believes this is the best option, or is the only option acceptable to the staff/volunteer or the client.

**4.2.f Maintaining appropriate boundaries**

Staff/volunteers should follow the requirements of the Mercy Services Code of Conduct to maintain appropriate boundaries with clients and the client's family (see A.02 Code of Conduct Policy).

**4.2.g Limiting Community Transport access at client's homes**

It is Community Transport policy that neither the drivers nor any transport assistants enter the homes of the clients, most particularly as this would entail delaying other clients who may be waiting on kerb-sides or in the transport vehicle.

At times, however, circumstances such as illness or debilitation of a client may override this policy. In this instance the driver will:

1. contact the Coordinator for direction and approval. The Coordinator will be able to notify the driver of, for example, whether or not a carer resides there who could help or of any potential hazards to entering the premises, such as an unfriendly pet;
2. the Coordinator and driver will also consider the safety of the other clients, both those waiting on the bus and any waiting to be picked up;
3. the Coordinator will decide the appropriate action, which may include directing other vehicles to assist in the situation; and
4. if permission is given to enter the home, the driver will adhere to the general principles for safe home visiting, as relevant, in Section 4 of this procedure.

**4.2.h Backup support available**

The location of all staff must be known by their Coordinator (or delegate). Should the staff member make any change in roster, the Coordinator must be notified immediately.

Staff are to carry a mobile phone which is fully charged, operating well and switched on. Volunteers are encouraged to have a mobile phone. Some vehicles are also equipped with two-way radios or mobile telephones which can be used in the event of any emergency or threatening situation. On a mobile phone the number to dial for emergency services is: 112.

Staff should turn their mobile phone to meeting setting (and vibrate) during client visits so they can be contacted in an emergency. Staff may leave their mobile phone on full ringing setting with the client's consent.

Mercy Services will provide back-up support to all staff. During office hours this support is available via the office or the Coordinator's mobile phone. Staff working after-hours will have support as organised by their Coordinator. The Coordinator will have access to staff rosters and contact details when they are the backup support for staff outside of office hours. In some instances detailed arrangements may be made e.g. Home Support Program (HSP) after-hours system.

**4.2.i Staff working early morning, late afternoon or evening**

Staff working in the early morning, late afternoon or evening need to communicate safety concerns regarding the routes they travel and properties they visit. The Coordinator will assess these concerns and ensure the safety of staff. Measures adopted by Mercy Services may include:

- assisting clients to install a sensor light;
- assisting clients to cut back bushes;
- providing staff with a portable duress alarm; and/or
- providing staff with a small torch.

#### **4.2j End-of-Day/shift security checks**

An essential component of ensuring the safety of staff is knowing when they are at work. For this reason all staff are to notify their Coordinator (or delegate) when they are finishing work via phone calls, sign-in books or sign-in boards.

Specific arrangements:

- linen drivers contact each other or a Coordinator at the end of their shift, except for the driver returning from Singleton who contacts the clock-off Coordinator.
- Home Care Package (HCP) Community Care Assistants (CCAs) phone their Coordinator who notes their completion times on the Program Security Check List.
- Home Support Program (HSP) CCA who finish after hours contact the HSP after-hours Coordinator.
- Community nurses phone every morning to Reception before commencing their home visits. Community nurses also contact Reception or the HSP after hours Coordinator at the end of their day.
- McAuley Outreach Service (MOS) assigns a delegate each day to ensure that all staff members are accounted for at the end of each day. Counsellors also check-in with Tighes Hill receptionist and are signed-off at the end of each visit to a client's home. A Staff Security Check form is used for this purpose which records the date and name of the MOS delegate and all visits scheduled for each Counsellor for that day. The Tighes Hill receptionist initials the form as staff members check-in and records the time. Workers complete details of their working day on the whiteboard before they leave the office each day i.e. time of appointments/meetings and venue (usually identified by client number). In the event that this system is not workable i.e. when only one MOS staff member is working that day and they are likely to be working after 5pm, then the Chief Executive Officer (CEO) or delegate is co-opted to be the delegate for the day. In this event the substitute delegate is given a form with the details of the worker and estimated time due back in the office.

If a worker has not made contact after 30 minutes of their rostered finish time their Coordinator (or delegate) will try contacting them. If the Coordinator cannot contact them on the worker's mobile phone they will contact the worker's last appointment to confirm that the worker was there and the time they left. If after repeated unsuccessful attempts to contact a worker's mobile the Coordinator will contact the worker's home phone

and/or next of kin and ask them to have the worker make contact as soon as possible. The Coordinator will complete an incident report if s/he cannot contact the worker on their mobile and has to try another number e.g. their home number or next of kin.

If after repeated unsuccessful attempts to contact a worker's mobile the Coordinator will contact the worker's home phone and/or next of kin and ask them to have the worker make contact as soon as possible. The CEO must be notified if a staff person is not contactable and the worker's next of kin are contacted.

If a Coordinator is called out in the evening or night or during weekends or public holidays, he/she will contact the CEO or delegate before going out and again when safely at home. If the Coordinator has not telephoned in by a reasonable time, the CEO or delegate will follow up to locate and ensure the safety of the Coordinator.

There is no end-of-day or end-of-shift security check for **volunteers** as the potential for personal injury to volunteers is assessed as minimal given the screening checks that are in place before a volunteer is assigned to a client.

#### **4.3 Using alternative venues to client home**

Visiting or providing a service in a client's home may not be appropriate such as due to safety, privacy or health reason. Alternative venues to a client's home may include a: Mercy Services office, community health centre, park, coffee shop etc. The Coordinator (or delegate) must provide prior approval before use of any alternative venue.

#### **4.4 Guidelines for ensuring the physical safety of the client home environment**

##### **4.4.a Report changes**

Staff are to report to their Coordinator any concerns they have about their safety because of the property, equipment and/or behaviour/condition of the client or others at the client's home. If needed a Risk Assessment and/or Risk Management Plan will be completed before further appointments are made (see Risk Management Policy).

##### **4.4.b Assist client address building/property maintenance**

If there are safety issues at the client's home the Coordinator will assist the client to remedy these using suitable equipment and skilled repairers (e.g. HSP Home Maintenance, Mercy Services paying for repairs and sensor light and client repaying over an extended period). If needed a Risk Assessment and/or Risk Management Plan will be completed before further appointments are made (see Risk Management Policy).

#### **4.5 Refusal of service to a client due to safety issues**

Every reasonable effort to resolve safety issues will be attempted. Only in extreme situations of concern regarding staff safety, and after consultation with the CEO,

will service be denied to a client. Every effort will be made to refer the person to a more appropriate service, if this is relevant.

**4.6 Supervision**

Coordinators will ensure that regular supervision/support is provided to staff and volunteers who work in clients’ homes.

In the event of any traumatic incident experienced by staff or volunteers the Co-ordinator or, in their absence, the CEO is available to provide support and counselling, including referral to the Employee Assistance Program.

**4.7 Training**

Training in areas of personal safety and the handling of difficult situations, such as aggressive clients, will be provided to staff and volunteers and in response to perceived needs. The training will cover, to varying degrees depending upon the needs and qualifications of staff and volunteers, issues highlighted in this procedure and in the Workplace Aggression and Harassment Procedure.

**4.8 Compliance**

Compliance with this policy is being measured by:

- a) 100% of the time after hours support is available;
- b) 0% of staff of applicable staff contact the office within 30 minutes of their scheduled completion of a client home visit

**4.9 Evaluation**

The performance indicators for the evaluation of this policy are:

- a) 0% of Mercy Services staff injured at client’s home; and
- b) At least 90% of Mercy Services staff giving a positive rating on how well Mercy Services is committed to safety.

**5.0 REFERENCES**

<b>1. Current issues</b>	a) None identified
<b>2. Australian Standards</b>	b) AS/NZS 4804: Occupational health and safety management systems — General guidelines on principles, systems and supporting techniques c) AS/NZS 4801: Occupational health and safety management systems — Specification with guidance for use. d) AS/NZS 4360:2004 — Risk Management
<b>3. Legislation</b>	a) Work Health and Safety Act, 2011 (NSW) b) Work Health and Safety Regulations, 2011 (NSW) c) Anti Discrimination Act, 1977(NSW)
<b>4. Professional guidelines</b>	a) None identified
<b>5. Codes of Practice</b>	a) Safe Work Australia (2011) Code Of Practice: How to Manage Work Health and Safety Risks <a href="http://www.safeworkaustralia.gov.au/AboutSafeWorkAustralia/WhatWeDo/Publications/Documents/633/How_to_Manage_Work_Health_and_Safety_Risks.pdf">http://www.safeworkaustralia.gov.au/AboutSafeWorkAustralia/WhatWeDo/Publications/Documents/633/How_to_Manage_Work_Health_and_Safety_Risks.pdf</a> b) Safe Work Australia (2009) Model Code of Practice - Managing the Work Environment and Facilities <a href="http://www.safeworkaustralia.gov.au/sites/swa/about/publications/pages/environment-facilities-cop">http://www.safeworkaustralia.gov.au/sites/swa/about/publications/pages/environment-facilities-cop</a>

<b>6. Codes of Ethics</b>	<ul style="list-style-type: none"> <li>a) Australian Association of Social Workers Code of Ethics 2010 <a href="http://www.aasw.asn.au/document/item/1201">http://www.aasw.asn.au/document/item/1201</a></li> <li>b) Australian Psychological Association Code of Ethics <a href="http://www.psychology.org.au/Assets/Files/APS-Code-of-Ethics.pdf">http://www.psychology.org.au/Assets/Files/APS-Code-of-Ethics.pdf</a></li> <li>c) Code of Ethics for Nurses in Australia 2008 <a href="http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Codes-Guidelines.aspx#codesofethics">http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Codes-Guidelines.aspx#codesofethics</a></li> <li>d) Integrity in the Service of the Church <a href="https://www.catholic.org.au/media-centre/media-releases/cat_view/10-organisations/38-national-committee-for-professional-standards">https://www.catholic.org.au/media-centre/media-releases/cat_view/10-organisations/38-national-committee-for-professional-standards</a></li> <li>e) Mercy Services Code of Conduct</li> </ul>
<b>7. Evidence</b>	a) None identified
<b>8. Mercy Services Values</b>	a) Justice, Respect, Care, Unity, Service

## 6.0 OTHER RELATED POLICIES AND PROCEDURES

- E.01 Service Guarantee
- E.02 Service Access and Equity
- E.03 Meeting Individual Needs
- E.05 Client Participation, Decision Making & Advocacy
- E.06 Involvement of Families and Friends
- E.07 Client Rights and Responsibilities
- E.08 Complaints
- E.10 Nursing care
- E.11 Coordination with other services
- E.12 Client Exit from Programs
- E.13 Cultural Awareness
- E.14 Duty of Care
- E.15 Privacy Policy
- E.16 Protection of Vulnerable adults from Abuse and Neglect
- E.17 Protection of Children from Abuse and Neglect
- F.01 Employment conditions
- F.10 Volunteers
- G.01 WHS Policy
- G.04 WHS Training Policy & Procedure
- G.05 Risk Management Policy & Procedure
- G.07 Anti Aggression & Bullying Policy and Procedure
- G.08 Infection Control Policy & Procedure
- G.09 Manual Handling Policy and Procedure
- G.10 Hazardous Substances Policy & Procedure
- G.12 Stress Management Policy & Procedure
- G.13 Post Traumatic Incident Policy & Procedure
- G.15 First Aid Policy & Procedure
- G.16 Emergency Response Policy & Procedure
- G.17 Incident Investigation Policy & Procedure
- G.20 Safer Driving Policy & Procedure
- G.21 Personal Protective Equipment Policy & Procedure
- G.22 Staff Wellness Policy & Procedure

**7.0 RELATIONSHIP WITH STANDARDS**

<b><i>Aged Care Accreditation Standards</i></b>	<b><i>Home Care Standards</i></b>	<b><i>NSW Disability Standards</i></b>	<b><i>EQuIP Standards</i></b>
<i>None identified</i>	<i>1.4, 1.5, 2.1, 2.2, 2.3, 2.4, 2.5, 3.1, 3.2, 3.3, 3.4, 3.5</i>	<i>1.1, 1.2, 1.3, 3.2, 3.5, 4.4, 5.1, 5.4, 6.3, 6.4</i>	<i>1.1.2, 1.1.3, 1.1.7, 1.6.1, 1.6.2, 1.6.3,</i>

**8.0 DOCUMENT CHANGES RECORD**

<b><i>Dates of change</i></b>	<b><i>Section altered</i></b>	<b><i>Natures of changes made</i></b>
04/11/2004	all	First record of policy creation
05/05/2008	Addition of Other Related Mercy Services Policies/Procedures; Relationship to standards and Policy Amendment Record.	Addition of these sections
06/05/2009	<ul style="list-style-type: none"> <li>a) All sections</li> <li>b) 1.0, 2.0, 5.0 – 8.0</li> <li>c) New 4.1</li> <li>d) New 4.2a</li> <li>e) New 4.2.f Maintaining appropriate boundaries</li> <li>f) New 4.2i working at night</li> <li>g) New 4.2j</li> <li>h) New 4.4a</li> <li>i) New 4.4b</li> <li>j) 4.6</li> <li>k) 7 References</li> <li>l) Old Appendix 1 Family Support Services Association of NSW Worker Safety Policy</li> <li>m) Appendix 3</li> </ul>	<ul style="list-style-type: none"> <li>a) Reformatted in new layout</li> <li>b) New sections</li> <li>c) New section drawing on old 5.1.1 and adding communicating clients role in ensuring staff security.</li> <li>d) Added need for staff to assess risk and impact of natural disasters on area and changed conditions</li> <li>e) Much detail deleted as it is now in the Code of Conduct Policy</li> <li>f) New section</li> <li>g) Consolidated arrangements that are common across services. Added role of HACC after hours</li> <li>h) Added</li> <li>i) Added</li> <li>j) Added reference to regular supervision/support</li> <li>k) EQuIP Standards added in place of QMS Standards</li> <li>l) Delete – as a duplication</li> <li>m) Addition of sentence on child responsibility compromising voluntary work</li> </ul>
31/05/2010	a) New 4.2.b Smoke free environment	a) Section added
09/08/2010	a) 4.2.c	a) Shortened as this is now addressed in F.10 Volunteer Policy
28/03/2011	7.0 Relationship to Standards	Updated Community Care Common Standards and EQuIP5 Standards
06/02/2012	<ul style="list-style-type: none"> <li>a) All sections</li> <li>b) 2.0 Purpose</li> <li>c) 4.8 Compliance</li> <li>d) 4.9 Evaluation</li> <li>e) 5.0 References</li> </ul>	<ul style="list-style-type: none"> <li>a) Updated with how new WHS laws and Codes of Practice apply at Mercy Services</li> <li>b) Delete reference to superseded Client Risk Management Policy</li> <li>c) New section</li> <li>d) New section</li> <li>e) Changes to legislation, Code of Practice and link to Nurses Code of Ethics</li> </ul>
21/02/2012	<ul style="list-style-type: none"> <li>a) 4.2.h</li> <li>b) 4.2.j</li> </ul>	a) Coordinators to have access to not necessarily copies of rosters etc.

<i>Dates of change</i>	<i>Section altered</i>	<i>Natures of changes made</i>
		b) Coordinator to complete an Incident Report if they cannot contact a worker's mobile phone when that worker has not "clocked off"
27/11/2012	All Sections	Organisation name updated
07/10/2015	<ul style="list-style-type: none"> <li>a) All sections</li> <li>b) 4.01.a New client</li> <li>c) 4.01.b</li> <li>d) 4.2j End-of-Day/shift security checks</li> <li>e) 5.0 References</li> <li>f) 7.0 Relationship with Standards</li> <li>g) Appendix one</li> </ul>	<ul style="list-style-type: none"> <li>a) HACCP changed to HSP; CACP changed to HCP; Co-ordinator changed to Coordinator; General Manager changed to Chief Executive Officer</li> <li>b) Rephrase "verbal character reference" with "further information"</li> <li>c) Expand options for interviewing client if their home environment is too risky</li> <li>d) Expand Linen Driver section</li> <li>e) Codes of Practice - add: Model Code of Practice - Managing the Work Environment and Facilities. Codes of Ethics – update. Evidence – delete: Family Support Services Association of NSW Worker Safety Policy (as no weblink found)</li> <li>f) Update Disability Standards. Add Aged Care</li> <li>g) Change logo</li> </ul>
Review due 07/10/2018		



As a volunteer for Mercy Services I take full responsibility for taking a child on a Mercy Services activity.

My caring for this child will not compromise my Mercy Services voluntary work. If this were to happen I would contact the Coordinator immediately.

I understand that this child is not covered by Mercy Services Volunteer Accident insurance.

Signature: .....  
*Volunteer*

Signature: .....  
*Roy Hambly*  
*Chief Executive Officer, Mercy Services*