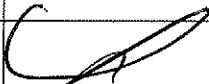


<b>POLICY TITLE:</b>		<b>VISITORS POLICY AND PROCEDURE</b>		
<b>SERVICE IMPACT</b>	<b>Low</b>	<b>Medium</b>	<b>High</b>	<b>Critical</b>
		X		
<b>DATE IMPLEMENTED:</b>				
<b>DATE OF NEXT REVIEW:</b>		01/09/2021		
<b>AUTHOR:</b>		WENDY HENRY Training and Policy Lead		
<b>APPROVED BY:</b>				

<b>Reason for this review:</b>	Promote best practice
<b>Were changes made?</b>	No
<b>Summary:</b>	Policy written in new format. Promotes appropriate safeguards to protect service users, staff and visitors and minimises potential risks for abuse or harm.
<b>Relevant Legislation:</b>	<ul style="list-style-type: none"> <li>• The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014</li> <li>• Human Rights Act 1998</li> </ul>
<b>Underpinning knowledge – What we have used to ensure that the policy is current:</b>	<ul style="list-style-type: none"> <li>• Care Quality Commission, (2016), Information on Visiting Rights. {Online} Available from: <a href="http://www.cqc.org.uk/sites/default/files/20161025_Visiting-rights-information-detailed.pdf">http://www.cqc.org.uk/sites/default/files/20161025_Visiting-rights-information-detailed.pdf</a> (Accessed: 02/10/2019)</li> <li>• Kate Lampard and Ed Marsden, (2015), Themes {Online} Available from: <a href="http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/407209/KL_lessons_learned_report_FINAL.pdf">http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/407209/KL_lessons_learned_report_FINAL.pdf</a> (Accessed: 02/10/2019)</li> </ul>
<b>Suggested action:</b>	<ul style="list-style-type: none"> <li>• Notify all staff of this new/changes to policy</li> <li>• Share key facts with other appropriate professionals involved in the service as necessary</li> <li>• Staff to read and sign up to this policy</li> </ul>

## 1. PURPOSE

- To ensure service users are protected from undesired visits or interference and, their rights are protected.
- The family and friends of service users are involved in the care and the importance of their involvement is reflected in the individuals Care Plan.
- To support in meeting the following Key Lines of Enquiry:

Key Question	Key Line of Enquiry (KLOE)
<b>SAFE</b>	How are the risks to individuals and the service managed so that people are protected and their freedom is supported and respected?
<b>WELL-LED</b>	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:

**1.4a** The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

**1.4b** Human Rights Act 1998

## 2. SCOPE

**2.1** The following people may be affected by this policy:

- All staff
- All service users
- Family
- Advocates and representatives e.g. Deputy/Lasting Power of Attorney/Priest/Social Care Officer/Councillor etc.

## 3. OBJECTIVES

**3.1** That all service users only receive visitors they wish to see and 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.

## 4. POLICY

**4.1** The directorate 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 within reason.

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

**4.3** 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 regardless of the number of times they visit the establishment on any given day.

**4.5** Staff will respect the service user's relationships and give them as much privacy as possible unless a court of law directs differently.

**4.6** We will always respect the choices of service users, 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, service users or staff members, management will seek to resolve the issues amicably, albeit the primary concern is always the promotion of the welfare of the service user.

## **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. A Visitors Log Book will be available for this purpose and kept at the reception/entrance of each facility.

**5.3** Unless specifically authorised by the service user, visitors will be asked to wait in a reception area while staff seek permission for their visit. If a service user does not wish to be disturbed, the visitor will be advised accordingly.

**5.4** Service user's views on which of their visitors, if any, may be given unannounced access to them will be noted in the Care Plan. Staff will not grant unauthorised person's 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 the service user, in order for the establishment to exercise its duty of care in this area.

**5.7** To minimise the chance of any misunderstanding, visitors are requested to declare to a member of staff any possessions taken from or given to the service users.

**5.8** Visitors, where possible, will be escorted to the resident/tenant 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, this must be reported to the manager immediately, who will address the issue promptly with the visitor concerned. If the visitor refuses to adhere to advice the manager will assess the level of risk and the impact on the person or to the service. In extreme cases, the manager should refer the matter to the Social Care Officer a/Director to provide oversight of the situation and to consider investigating the case under their safeguarding procedures. If criminal activity is suspected, the police must be contacted immediately.

**5.11** If a manager receives information from another agency that indicates that a visitor may pose a threat to either a service user or staff, they must discuss this with the agency concerned to agree how it may be disseminated. They must then consider and document the safeguarding issues raised before briefing appropriate staff and/or implementing any conditions in relation to that visitor.

**5.12** 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 service user's 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.

**5.13** If issues cannot be resolved, as an extreme measure, the manager may consider placing some conditions that restrict the visitors ability to enter the premises if, for example, they believe (having sought advice from the director) that the visitor poses a risk to other service users and staff or to the running of the service. The manager could limit visits to take place in the resident's/tenants room only.

**5.14** Any conditions should be proportionate to the risks to other people or staff and kept under review. The provider 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.

**5.15** To promote the safety and respect for all people using the service, visitors will only be allowed in the private accommodation of the person visited, or the recognised communal areas of the service. Visitors will not be permitted into the private accommodation of any other person without the expressed permission of the resident concerned.

**5.16** If the visitor is a person who is looking at providing a service for themselves or another person in the future, these visits will be required to be pre-booked and agreed with the manager/ director. The visitor will be accompanied at all times. They will only be permitted to communal areas to minimise the impact on current service users.

**5.17** If the visitor is a VIP, or a person of 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 service user's personal accommodation will not be permitted without their permission.

**5.18** The service provider must ensure a copy of the SHG complaints policy/procedure is available and readily accessible to service users and their visitors. The service provider will ensure that the complaints policy is followed in the event a complaint arises. They will also make sure that the service users' care/treatment is not negatively impacted as a result of any complaint being made, nor will their visitors or loved ones experience any negative treatment.

**5.19** 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 which 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 manager.

### **Key Facts – Qualified staff**

All staff providing this service should be aware of the following:

- Visitors should be encouraged
- If the service user wishes not to see someone, their choice must be respected
- Visitors can visit at any time unless the service users states differently.

### **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 service user, and consistently respects their wishes
- There is wide evidence of service users and 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.











**St Helena  
Government**

## Children's Social Care Mission Statement

Saint Helena Children's Social Care provide services to ensure the health, safety and well-being of children, young people and their families. We assess the needs of children and their carers to ensure the allocation of appropriate services to support parents and carers in their parenting role.

We do this by offering help, advice, support or information to:

- Parents/carers who are having difficulties which impact on their ability to meet their children's needs.
- Children whose health and welfare may be at risk if they do not receive support.
- Children and young people (including unborn babies) who are at risk of being neglected or harmed.
- Children with disabilities and their families.
- People who would like to provide a home for a child through fostering or adoption.
- Children who require an alternative placement to the family home.
- Children and young people involved in criminal activity.
- Children in need of day care provision. We regulate childminders and crèches.
- Children in need of protection and support outside of the family home. We investigate safeguarding allegations against professionals.

A handwritten signature in black ink, consisting of a large, stylized loop.

