

## **Home Visits Policy**

Moorfield House Surgery, Garforth & Rothwell

Policy Owner: People and Patients Manager

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### **1. Purpose**

The purpose of this policy is to outline the criteria, process, and responsibilities for managing home visits to ensure patients who are genuinely housebound receive appropriate and safe care, while making the best use of clinical resources.

This policy aligns with:

- NHS England Home Visiting Guidance
- CQC's Key Lines of Enquiry (KLOEs)
- Modern General Practice (MGP) model
- The Surgery's core values of equity, kindness, personalised care, and continuity

### **2. Definition of Housebound**

A patient is considered housebound only if they are unable to leave their home due to a physical or mental health condition and it would cause detriment to their health or wellbeing to travel to the practice or an external site.

Patients who do not leave their home for convenience or due to lack of transport do not qualify for home visits.

### **3. Eligibility for Home Visits**

A home visit may be appropriate if a patient:

- Is terminally ill or nearing end of life
- Is physically unable to attend the surgery due to disability or acute illness
- Has a severe mental health issue preventing safe attendance
- Lives in a residential care home

A home visit is not normally appropriate if:

- The patient has access to mobility aids or transport but prefers to stay at home
- The condition is minor or better assessed with in-practice tools
- The patient refuses to travel without clinical justification

#### **4. Requesting a Home Visit**

Home visit requests must:

- Be made before 10:30am (where possible)
- Be submitted by phone via reception or by care professionals (e.g., district nurse)
- Include clear clinical reasons and mobility status

Receptionists will not promise a visit. All requests are subject to clinical triage.

#### **5. Triage and Clinical Review**

- All visit requests are triaged by the clinical team on the same day
- A telephone or video consultation may be offered first to assess urgency
- Triage outcomes:
  - Home visit allocated
  - Surgery or hub appointment offered
  - Referral to urgent care services
  - Monitoring with safety netting advice

#### **6. The Visit, Timing and Allocation**

- Home visits are usually conducted between 12:00 and 14:00pm,
- Visits are prioritised based on clinical need, not time of request
- For operational reasons, the timing of visits cannot be arranged at a specified time for the convenience of the patient or family members. Patients who are eligible for visits will be, by definition, unable to leave their home.
- Patients, their families and carers are expected to treat attending clinicians with respect and politeness in line with the practice Zero Tolerance Policy.
- All household pets should be secured away from the patient before clinicians arrive.
- Clinicians are expected to document all decisions clearly in the patient record

#### **7. Clinical Safety and Safeguarding**

- Staff must follow lone working policies for home visits

- Concerns around abuse, neglect or domestic violence must be escalated in line with the Safeguarding Policy
- If a visit reveals issues of concern (e.g. hoarding, unsafe environments), the clinician must document and report appropriately

### **8. Equality and Reasonable Adjustments**

- Where a patient has a disability or mental health condition that affects access, reasonable adjustments (e.g., offering transport support) should be considered
- Interpretation services should be arranged if required

### **9. Care Home Visits**

- Scheduled regular ward rounds will be undertaken for patients in care or nursing homes
- Urgent issues will be triaged as with other home visit requests
- MDT collaboration is encouraged with community nursing, pharmacy and social care

### **10. Monitoring and Review**

- Home visit trends and data will be reviewed quarterly by the clinical and management team
- Audit criteria include: appropriateness, outcomes, patient satisfaction, and safety incidents
- Feedback from patients and carers will inform ongoing improvement

### **11. Patient Communication**

This policy is summarised on:

- The practice website
- Patient registration leaflets
- Reception scripts and training materials

Patients are encouraged to:

- Use the phone or online systems to request visits
- Inform the practice early in the day
- Understand when a home visit may not be clinically appropriate