CONSIDERATIONS:

- 1. Home visit safety is a shared responsibility between employer and employee.
- Risks for visiting staff can occur in any location or community; however, risks may be increased depending upon the demographics of the areas served.
- Agencies should provide training in personal safety and maintain mechanisms for reporting and recording incidents.
- 4. Emergency contact numbers and procedures need to be available to all staff.
- 5. All issues of staff safety should be documented and corrective action should be taken to minimize future risk.

EQUIPMENT:

Cell phone Flash light

Whistle

Other personal safety equipment, as appropriate

PROCEDURE:

- Identify safety risk factors during the intake process. Alert visiting staff to known safety risks prior to making a home visit:
 - a. Contain all pets prior to making a home visit
- 2. Assure that cell phone is in working order:
 - a. Program emergency telephone numbers into cell phone
- 3. Arrange for visit escorts, as needed. Call US Security Associates (800) 228-3840.
- 4. Conduct visits during daylight hours, if possible.
- 5. Prior to entering a home, assess the area for risks.
- 6. Lock your car doors.
- 7. Avoid leaving items in view when leaving your car.
- 8. Dress in a protective manner:
 - a. Wear shoes/clothes that allow for ease of movement
 - b. Avoid wearing expensive jewelry
 - c. Do not carry a purse
 - d. Carry a minimal amount of money
- 9. Use elevators instead of stairs.
- 10. Upon entering a home, assess the layout of the home.
- 11. Keep the door in sight.
- 12. Recognize possible escape routes.
- 13. Leave home immediately if personal safety is in doubt.
- 14. Contact supervisor after leaving home.

- 15. For visits made after dark:
 - a. Assess the area in daylight, if possible
 - b. Call patient prior to the visit
 - c. Park as close to home as possible
 - d. Arrange for visit escorts as needed
 - e. Follow procedure as above

AFTER CARE:

- 1. Document any potential safety risks.
- 2. Conference with supervisor.
- 3. Alert physician of safety risks as needed.

REFERENCE:

- Gershon, R. et al. (n.d.). Home Health Care Patients and Safety Hazards in the Home. Retrieved July 4, 2012 from <u>http://www.ahrq.gov/downloads/pub/advances2/</u> vol1/Advances-Gershon_88.pdf
- Public Health, Seattle & King County. Health Care for the Homeless Network – Community Health Services (2007). Promoting Personal Safety During Outreach, Shelter and Home Visits. Seattle, WA.

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