

CFP TECHNICAL ASSISTANCE BULLETIN

HOME VISITS

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Introduction

Home visits and meeting clients in the field are essential components of the case management process. The home visit can provide the case management team with valuable assessment information. It allows for staff observation of individual and family functioning, including the status of children in the household, and helps to determine the overall state of a client's well-being. Community Follow-Up Program (CFP) policy requires home visits at assessment and reassessment. It is acceptable to exceed these requirements because it may assist in keeping clients connected to care providers; however, there should be a rationale for the additional home visits (as opposed to an office or community location). The intent of this *Technical Assistance Bulletin* is to assist Community Follow-Up Programs in developing an agency and program specific policy as it relates to home and field visits.

Community Follow-Up Program Home Visits

A home visit serves many purposes. Visits have been successfully used to engage and retain clients in the case management process. Meetings in the home enable team members to gather objective information at assessment and reassessment. When small children are involved and child care is an issue, a home visit eliminates a barrier and increases the parent's participation in addressing the family's needs.

While the CFP team by its very nature provides support to clients, it is not the intent for home visits to become routine supportive meetings. There must be a specific purpose beyond information sharing or trying to provide socialization for a client. Depending on client

need, staff should attempt to strike a balance between field work, office and home visits.

Agencies must establish specific guidelines and parameters related to home and field visits in program policies and procedures. The policy should include scheduling/reminders, unscheduled visits, appropriate length of time to wait when client isn't present at arrival, and documentation of the need for home visits in excess of the required amount.

Often the requirement for a home visit raises concerns for staff safety for a variety of reasons. These can be addressed in separate policies that include not only safety and when to use multiple staff, but issues such as drug use, domestic violence and mandated reporting for abuse and neglect. Staff should never stay at a location where there is violence or illegal activity.

Scheduling/Reminders

Home visits should be planned at a date and time mutually agreed upon between the team member and the client. Visits should be scheduled to coincide with a specific purpose (i.e., assessment, service plan activities).

Reminders, through letters and/or phone calls, should be a routine part of the visits. It is not only an efficient use of case management time but provides assistance to clients who may have memory or cognitive impairments. The type and frequency of reminders should be based on individual client circumstances.

Collaboration with clients in the scheduling and reminders of visits confirms that team members recognize clients have activities outside case management and enables them to accommodate all appointments.

Unscheduled visits

There may be situations when staff are unable to schedule a visit in advance and it is necessary to visit a client at home or in the field unannounced.

Unannounced visits may be prompted by:

- Lack of phone service
- Loss of housing
- Concerns over client health
- Non-adherence to care and treatment
- Unsuccessful attempts to contact.

Unscheduled visits should be used as a means to help keep clients engaged in the case management process and connected to care. Individual circumstances should guide the decision to make an unannounced visit and team members should try to schedule meetings whenever possible. The use of a Community Follow-Up Worker (CFW) is recommended when searching for a client that has not remained in contact with the team.

Waiting times

For a scheduled visit a team member should not wait more than fifteen minutes from the agreed upon meeting time. In the case of an unscheduled visit, staff should leave immediately if the client is not home.

When a client is not at home or is a no-show, no matter the reason, the result would be considered a negative visit. In these instances documentation in the client's chart must be clear that there was a planned meeting and the client did not show, or state the rationale for attempting an unscheduled visit.

Documentation

Documentation of home visits is noted in various sections of the case record. Home visit information should be included in assessments and reassessments, or a home visit form may be incorporated. Home visits at the time of assessment and reassessment should include an evaluation of the living space, furniture, needed repairs, and food supply. Overall, staff should determine if the housing is safe and appropriate for the client and their family.

Use of a home visit form is not a requirement but can be used in place of a progress note. If used as a progress note it must include date, start/end times, and staff signature in addition to visit-related information. A progress note should include the reason for an unscheduled visit (i.e., lack of phone, concern for client health, etc.).