

## POLICY AND PROCEDURE MANUAL CENTRAL VALLEY HEALTH DISTRICT

**SECTION: NURSING SERVICES** 

**POLICY #: 418 HOME VISITS** 

**POLICY**: Central Valley Health District nurses will provide home visits to client within the designated service areas.

## PROCEDURE:

- 1. Home visits are provided based on referrals from client, family, Health Care Providers, service agencies or any concerned individual.
- 2. Upon request the Director of Nursing or office nurse will assess need for home visits based on telephone interview. (See Request for Nursing Services yellow form). The following criteria must be assessed to determine eligibility:
  - Inability to participate in community functions, i.e. shopping, bingo, non-medical appointments without significant physical assistance.
  - Visual handicap or mental illness which impedes the ability to do necessary daily activities
  - Severe physical limitations i.e. filling syringes, handling medications, performing foot cares
  - No available family members or care providers to assist with health needs, (i.e. Social Service aides, Easter Seals, Quality Service Providers(QSP), private caregivers).
  - In Home Nursing Visits **WILL NOT** be available to clients that have chosen to leave a care facility Against Medical Advice.
- 3. Once client is determined eligible for home visits a nurse will be assigned to visit and assess home setting. In order to receive home visits the home must be determined to be a safe environment for both client and nurse providing services. Initial home visit assessment will be made as soon as possible within 2 weeks.
- 4. Types of home visits include: **Short term visits** may be conducted when a referral is made for an individual that is returning from a facility such as a hospital or nursing home but does not need ongoing skilled nursing services such as medication set up. **Long term visits** will be appropriate for individuals with a chronic need for skilled nursing services.
- 5. Frequency of home visits:
  - a. No more than 1 time per week, (i.e. every 2 weeks, monthly, bi-monthly or as necessary)
- 6. Clients agree to:
  - Be present in home for the scheduled home visit time or call to reschedule if a conflict arises
  - Be seen on a regular basis, at least yearly, by their primary care physician
  - Be compliant with medication regimen, and health monitoring needs, such as daily weights, Fasting blood sugars, lab tests, medical appointments, and follow up
  - Sign a release of Information to allow the health district to communicate with health care providers and family members/emergency contacts of the client

Revised 01/07 Reviewed; 6/1/2009 Revised 8/1/2009 Reviewed 2/19/2010 Reviewed 1/6/2011;2/7/2012;1/25/2013



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- 7. Client may be discharged from home visit services:
  - a. Due to a lack of funding sources
  - b. Inappropriate behavior including non-compliance with not meeting criteria
  - c. Death
  - d. Client no longer warrants visit. (i.e. Condition improves, no longer living in home setting, moved to nursing home).
  - e. More services needed/required then nurse is capable of providing.
- 8. Complete client record and appropriate documentation per policies.
- 9. Clients are encouraged to use office services or Health Maintenance Clinics in place of home visits if client is able to participate in community functions.
- 10. In the event of a public health emergency, home visit services may be interrupted and an alternative means to meet the client's needs developed.

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