HOME VISITING POLICY FOR PATIENTS.

Most patients who need to consult a GP will be seen at the surgery but we continue to make a limited number of home visits when this is appropriate. Home visits are reserved for the following groups of patients:

o Terminally ill

o Housebound patients (any patient who is able to leave home for any reason is not considered to be housebound)

o Severely ill patients who cannot be mobilised.

In order to optimise quality of care, effectively use finite resources, and to benefit the greatest number of patients; home visits are to be offered exceptionally, not routinely. The introduction of the current GP Contract in 2004 re-affirmed that it is the doctor's decision whether or not the patient can reasonably be expected to attend surgery.

We want to offer the shortest waiting times for patients to see a doctor so please bear in mind that four to six patients can typically be seen by a doctor at the surgery in the time it takes to complete a single home visit. Throughout the development of this policy, the quality of medical care offered by the GPs to our patients has been of paramount importance. The emphasis is that clinical effectiveness must take precedence over patient convenience.

Requesting a Home Visit

Requests for visits must normally be made before 10:00am. Visiting will normally take place after morning surgery. Please only request home visits if you are incapable of attending the surgery. Whenever possible, we expect patients to come into the surgery as the facilities are far better for examination and treatment. When you call to request a visit, please give the reception team information about your symptoms as it helps us to judge the urgency of your condition. Receptionists are trained to do this and all information is treated confidentially. Please also provide a contact number as your visit request will be triaged by a doctor who may wish to call you to gather more information in order to get you the care that you need. The doctor will make an assessment and might then arrange a visit, direct your care to a more appropriate care provider, arranges a surgery appointment or conduct a telephone consultation. Visits requested later in the day that are for the housebound, but are not urgent, will not be seen that day but instead triaged to a more appropriate time. As long as the GP has made this assessment and offered an appropriate alternative, then the partners of Buckden and Little Paxton Surgeries will support any such decision made by a doctor working at the practice.

Medical emergencies

In the case of serious medical emergencies, '999' should be called. The following list is not exhaustive, but conditions which are considered to be a medical emergency are:

- loss of consciousness
- an acute confused state
- fits that are not stopping

- persistent, severe chest pain
- breathing difficulties
- <u>severe bleeding</u> that cannot be stopped
- severe <u>allergic reactions</u>
- severe <u>burns or scalds</u>

General practice has never been, and can never be, an emergency service along the lines of the police or ambulance services. There is neither the human resource for this, nor the infrastructure to work in this way, as it would inevitably harm other aspects of the Practice's work. It is not appropriate for a doctor to feel compelled to leave a busy pre-booked surgery to attend to a patient at home, who it would seem, may be suffering from a serious medical emergency. It is highly likely that the doctor will contribute little to the patient's care above and beyond that offered by paramedics. Waiting for the doctor to attend may well cause ultimate delay in hospital treatment and in addition to all of this, major disruption to many patient's timetables caused by the doctor leaving his/her surgery patients.

In summary

- Our policy is in accordance with National and local recommendations.
- You cannot insist that a GP visits you at home.
- A GP will only visit you at home if they think that your medical condition requires it.
- A GP can also decide how urgently a visit is needed and may direct you or your request to another appropriate care provider.
- Due to increasing demand, GPs can no longer automatically visit any patient who requests a home visit. All visits will now be triaged and dealt with according to clinical need.
- GPs are better able to assess patients in the surgery where they have access to specialist equipment, good lighting and examination facilities. Therefore, it is always the preferable site for any face to face consultation.
- GPs having to visit inappropriate house call patients are delayed from visiting those patients who are in genuine need of a visit and therefore this poses an unacceptable clinical risk.
- Lack of transport, finance, weather conditions and other situational reasons cannot be considered grounds for a home visit.

Transport issues for the patient

• It is not the GP practices responsibility to arrange transport, or to perform home visits because the patient has difficulty arranging transport. In these circumstances, patients should seek transport help from relatives, friends, car care schemes or taxi firms.

Childcare issues for a patient

• If a patient has difficulty arranging for someone to care for their children whilst attending appointments, the patients are welcome to bring their children to the surgery.

Poor mobility

• Whilst it is understood that having poor mobility is inconvenient and unpleasant, GP surgeries are designed to cater for patients with restricted mobility. If patients are able to attend appointments at other healthcare settings, then they should also be expected to attend appointments in GP surgeries.

The unwell child

- We will always aim to see sick children as soon as possible if brought into the surgery. It is not appropriate to wait for a visit. We rarely visit children at home as a responsible adult should be available to bring them to surgery.
- Children with a fever will not be made worse by transporting a child to a place of care. It is in the best interest of the child to attend the surgery where they can be properly assessed and treated.

Residents of care home

• Care home residents are no different to patients in their own homes. The need to visit should be based upon clinical need, not the availability of transport or staff to attend the surgery. It is the responsibility of care facilities to make transport available for residents so that they can get to medical and non-medical appointments.

Family Pets

To ensure the safety of our staff we kindly ask that any family pets are not present in the room in which the patient is to receive the visit.

We understand that most family pets pose no risk in normal circumstances. When an owner is unwell it can be a stressful environment and pets can react unexpectedly to new visitors or in some situations such as when a patient is examined or where emergency care is required.

In these circumstances a pet can pose a risk to our staff and it is our policy that all visiting healthcare professionals will not enter a patients' premises where a pet is not secured. This would involve simply putting the pet in a separate room from that in which the patient is being seen for the duration of the visit.