

Appendix 7

Appendix 7: Best Practice Guidelines – Home Based Assessments

For some mental health services, home-based assessments form an important part of the provision of care for mental health patients within the community. There are several benefits associated with home-based assessments including:

- Provision of care in a setting that reduces barriers preventing access and therefore reducing health inequities
- Provision of care in a setting that is patient/whanau centered and more familiar for the patient
- Preventing unnecessary visits to the hospital setting

It is however acknowledged that there can be a number of risks associated for trainees/registrars who are providing home-based assessments for mental health patients. The risk is increased when the visits are made after-hours.

For services that include home-based assessments as part of the broader service model of care, the following best practice guidelines have been developed. Services are encouraged to utilise these guidelines to support development of documents that are relevant for use at a local level. It is acknowledged that documents may vary based on a range of factors including service model of care, skill mix of mental health team, geography, population demographics and number of FTE rostered at various points of the day.

- 1. As part of the Health and Safety at Work Act 2015, risks to health and safety must be eliminated so far as is reasonably practicable. If a risk can't be eliminated, it must be minimised so far as is reasonably practicable. Mental health services are therefore required to ensure policies are in place for workers in the community including those who undertake home assessments/home visits. Services are encouraged to develop a document outlining where to find policies and procedures and key points regarding application to ensure these are readily available for Registrars. The policy and/or procedure documents will at a minimum include the following elements:
 - Roles and responsibilities of different members within the team
 - Risk assessment before attending home-based assessments including consideration of acute (immediate), chronic or catastrophic risks.
 - Safety considerations to be taken into account when completing a risk assessment including:
 - Any chemical or environmental risks
 - Any physical risks including violent/potentially violent situations, residences with any known firearms, or residences with threatening dogs/animals
 - Any ergonomic risks including fatigue with particular emphasis on driving at night and at the end of a long day
 - Any psychosocial risks including stress factors
 - Control measures put in place by the mental health services to eliminate risk (where reasonably and practicably possible), or to minimise risk to support workers' safety. This may include a single control measure or a combination of different controls such as substitution with a lower risk or safer alternative, isolation of hazards, or use of engineered control measured such as duress alarms.
 - Administrative control measures put in place to further minimise risk including:
 - Training required prior to undertaking home-based assessments
 - Process to ensure others are aware of movements and any requirements on check-ins before and after the home-based assessment
 - o Process for reporting of incidents and/or near misses to the mental health service
 - Provision of organisational structure, roles and responsibilities with information on communication links/support in place to help lone workers if they need assistance

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- Courses to take in an emergent situation including escalation processes where an RMO may not feel safe undertaking a home-based assessment or needs to remove themselves from an unsafe situation
- o Any additional precautions for first assessments of patients not known to the service
- Any additional precautions for completion of assessments after hours
- Any requirements for use of personal protective equipment (PPE)
- 2. Mental Health services should ensure there is an escalation process in place that Registrars can follow if there is an instance where an RMO may feel unsafe in attending a home-based assessment. Service should ensure all Registrars are familiar with the escalation process in place.
- 3. Mental health services should provide clear criteria relevant at a local level that outlines when an outof-hours home-based assessment should be undertaken. Decisions should be based on a number of factors including staff safety, acuity, and patient need.
- 4. For home-based assessments after-hours, it is recommended that Registrars will always be accompanied by at least one other appropriately qualified and experienced mental health clinician or other support worker with appropriate skills. Where there are concerns about potential risk to staff these should be conducted only with police present.
- 5. As part of the orientation process for new staff, services will ensure Registrars are:
 - Provided with appropriate training and induction to any safety processes and procedures
 - Aware of the resources available (including policies, procedures, and escalation pathways) and where these can be accessed
 - Aware of the designated escalation pathways if the Registrar has reason to believe that there is a safety risk due to immediate or imminent exposure to a hazard.

Frequently Asked Questions (FAQs)

- 1. How should mental health services ensure RMOs are aware of the various processes, policies and procedures surrounding home based assessments?
 - Mental health services are required to ensure policies are in place for workers in the community including those who undertake home assessments/home visits. It is recommended that mental health services develop a document or website that outlines where to find policies, procedures and key points regarding application. At a minimum the items included within this document are outlined in point 1 of the guidelines. Mental Health services should ensure Registrars are provided with a copy of this document as part of service orientation. In addition, key aspects of home -based assessments should be discussed with the Registrars during an in-person or virtual orientation session.
- 2. What should the mental health service do if there is currently no escalation process in place for an RMO to follow if they do not feel physically or emotionally safe undertaking a home-based assessment?
 - Where no identified escalation processes are in place it is recommended that Mental Health Services develop and implement a process for Registrars to follow should they have concern regarding safety of a home-based assessment and visit. As part of orientation. MH services should ensure Registrars are familiar with this process.
- 3. What should the mental health service do if there is currently no criteria for confirming when a homebased assessment should or should not be undertaken?
 - Mental health services should develop criteria to confirm when it is appropriate for a homebased assessment to take place to guide the Registrar. This would be based on a number of factors including staff safety, acuity, and patient need. Mental Health services should ensure Registrars are aware of this criteria.



Comparison STONZ and NZRDA MECAs

There is no corresponding Appendix / Schedule in the NZRDA MECA.