|  |  |
| --- | --- |
| **DOCUMENT TITLE:** | **Outreach Protocol – Communities** |
| **CATEGORY:** | Governance and quality |
| **LAST REVISED:** | September 2023 |
| **VERSION:** | V1.2 |
| **DUE FOR REVISION:** | September 2024 |
| **OWNED BY:** | Area Operations Manager – Central  |
| **RELATED DOCUMENTS:** | On call, positive reengagement  |

|  |  |
| --- | --- |
| **OUR PRINCIPLES:** | With passion and excellence, Delphi makes a difference to people’s lives by providing innovative and specialist addiction services that lead the way from dependence to freedom.  |
| **OUR VALUES:** | We all commit to and care about: going one step further with our clients; our wellbeing as individuals and as teams; and improving and strengthening ourselves and our organisation.  |

**Outreach**

|  |
| --- |
| The conditions that need to be in place, or the things that need to be done BEFORE the process can run effectively |
| Staff are qualified to perform their roles | Staff members will complete full Delphi induction and have access to policies and procedures.Staff members have access to the Calico group loan worker policy |
| Staff are provided with the relevant equipment to enable them to fulfil the role safely and effectively  | Staff will have access to resources to offer outreach safely:-Loan worker devices.-Mobile phone.-Access to vehicles and driving, vehicle checks.-Rotas for outreach if required.-Group offer for outreach planned and advertised.- Home visit checklists  |
| Staff are empowered to work through outreach and understand how to raise concerns | Delphi operate within a “Culture of Outreach”, encouraging services to “meet people where they are at” and to do so “wherever possible”. We will utilise “satellite” and safe spaces as well as expertise from within locally trusted organisations to engage with people in a way that is safe, confidential, and effective to improve ease of access and reduce barriers. We will assertively outreach where required including for those not accessing service, those with physical and psychological health needs, and where service users have parental responsibilities or those with clinical priority.Outreach will be approved by line managers to support staff pressures and understanding staff whereabouts. Outreach will be carried out with consent, outreach may occur when a client isnt engaging and we are concerned for their welfareEach service will have a clear criteria of 2 staff and loan worker devices including a client risk assessment of who qualifies for outreach under each circumstance. Client requiring outreach will be reviewed regularly through their care plans, risk assessments and case notes.  |
| Staff have information relevant to risk | Staff must ensure they review nebula records before conducting outreach. Outlining rationale and specific plans for where outreach will take place prior to session taking place. In the event of an emergency and lone worker device not being available, a 'code word' will be put in place to be communicated to a colleague to trigger an emergency response. This code word should be agreed in service |
| Partnership working in place | Staff must attend outreach with a colleague, volunteer or partner agency. |
| Review  | The protocol will be reviewed through an annual operational review to assess the development of the service. |

|  |
| --- |
| The things that need to be done DURING the process so that the outreach sessions are delivered without friction  |
| Areas and approaches are assessed as suitable for outreach. | Outreach may vary in each service taking into consideration client Local demographics as well as contracted service specifications.Outreach services will support service delivery, client engagement, clinical service, personal safety and recovery.  Technology and vehicles will be used where possible to enhance the outreach offer.Home visit checklists (see appendix 1 and 2 must be completed and local safeguarding protocols followed in the event of any safeguarding concerns raised.Vehicles will form a vital component in reaching rural and hard to reach communities. Providing targeted harm reduction and advice, targeted interventions, client transport, access to groups including Mutual Aid and advocacysupport to people wherever they are required. Outreach will where possible be planned in advance. 1-1 and emergency outreach will be completed by staff inline with the loan worker policy and or where possible with a colleague. |
| Out of hours outreach | Where out of hours outreach takes place the staff member concerned must report any concerns to the on-call service or service manager.  |
|  | If working in risk assessed places alone staff will work with managers to ensure safety measures are in place: including phoning in and out of each appointment and completing task specific risk assessments. |
| Cases of best practice are shared and discussed.  | Best practice examples are collated through feedback and the company report, they will be discussed at the monthly Managers Meeting and cascaded to all staff via the team meetings. |
| The Senior Leadership Team is advised of issues/ concerns.  | All members of the Senior Leadership Team are advised immediately by the incident reporting process.Additionally, at the monthly Managers Meeting, the managers must prepare any items to escalate to the monthly Senior Leadership Team meeting.  |
| Protocol review | This protocol is to be reviewed in line with the governance schedule. |

|  |
| --- |
| The conditions that must apply AFTER the process is finished, for us to deliver the required outcomes |
| Delphi clients have improved access to services.  |
| Outreach is scheduled and includes a range of outreach approaches meeting the clients need |
| Case studies are shared the impact of outreach internally, with partners and the wider community.  |

**Example Outreach Folder Log**

****

****