

Policy and Procedure Area	Housing Visitors
Date Created	Dec 2018
Policy Holder	Lee Buss
Date Approved by ET	12/2018
Date Approved by the Board (if required)	Dec 2018
Date of next review	12/ 2023
Target Group	YMCA SPG and group companies staff and residents/ tenants including YMCA West London
Training/Dissemination	Corporate training plan Via resident/ tenant webpage
Location of policy/procedure	Insight / Intranet/ shared Drive
Related external documents	n/a
Related Internal Policies	<ul style="list-style-type: none"> • Tenure management • ASB Policy and Procedure • Visitor Application Form • Banned Visitor Authorisation Form • Consent Form for 16 and 17 year olds

1 Objective

- 1.1 YMCA St. Paul's Group will ensure that the security and integrity of their services is maintained through the control of access for resident visitors.

2 Policy statement

- 2.1 YMCA St. Paul's Group has an obligation to ensure that our residents live in an environment that is as safe as it is possible for us to make it.
- 2.2 While removing all risk is not possible, we are in a position to ensure that we are able to control who accesses our services, and to whom we do not allow access.
- 2.3 Our primary method of achieving this is through the application of stringent resident visitor controls.

3 Equality impact assessment

- 3.1 We are committed to ensuring our services deliver fair access to all elements of our services including residents having the ability to have a social life. Many of our Residents have experienced exclusion and disadvantage in accessing services. This policy is designed to ensure that a fair and consistent approach to visitors is used with all Residents.

4 Definitions

- 4.1 New Visitor – any individual with a relationship to a resident who wishes to visit that resident on our premises for the first time.
- 4.2 Resident Visitor – any individual with a relationship to a resident who wishes to visit that resident on our premises.
- 4.3 Banned Visitor – any visitor whose behaviour has led to the decision being made that we do not want them to have access to our premises.
- 4.4 Photo ID – includes driving licences, passports, student ID.
- 4.5 Reasonable probability – where staff feel, using the information available, that an act is likely to have occurred. Definitive proof is not required where there is reasonable probability.

5 Guidance

- 5.1 New resident visitors should present at reception with the resident they wish to visit and complete a 'Visitor Application' form, providing:
 - 5.1.1 Their name.
 - 5.1.2 Their date of birth.
 - 5.1.3 Their address.
 - 5.1.4 Photo ID
 - 5.1.5 The name of the resident they are a visitor of.
 - 5.1.6 Their relationship to that resident.
- 5.2 Staff will complete this application form with the new visitor.
- 5.3 As part of this process, new visitors are asked to give us their permission to take their photo and to store their details electronically. New visitors must sign the declaration confirming this, as well as confirming that they understand that they agree to abide by the rules of the service.

- 5.4 Permission to access the premises will only be granted if all the required information and photo are provided, and the visitor signs the 'Visitor Application' declaration.
- 5.5 Staff must then create a visitor profile using the information provided by the visitor.
- 5.6 Once this is completed, staff must complete the section on the 'Visitor Application' confirming its completion, and sign it.

6 New visitor procedure for 16 and 17 year olds

- 6.1 In some services, 16 and 17 year olds are allowed to stay overnight. In these cases, there are additional safeguarding measures in place.
- 6.2 16 and 17 year old visitors wishing to stay overnight must ensure that a named parent or guardian signs the 'Permission for overnight stay' form.
- 6.3 Once this form has been completed, staff must contact the named parent or guardian to verify identity. A 16 or 17-year-old visitor is unable to stay overnight until this has been done.
- 6.4 The parent or guardian should be informed that once the form has been signed consent is assumed. If they wish to withdraw consent then they can do so by contacting the service

7 Visitor Procedure

- 7.1 On subsequent visits to the service, the resident visitor must present at reception with the resident and inform staff of their name.
- 7.2 Staff will then confirm their identity using the image stored on the visitors profile.
- 7.3 If their identity is confirmed to the satisfaction of the staff member, access may be granted.
- 7.4 Residents are responsible for the actions of their visitors, and must remain with them at all times.
- 7.5 Resident visitors can be asked to leave at any point if the staff have any concerns as to their behaviour. Visitors who fail to leave when requested should be considered intruders, and suitable police support sought.
- 7.6 If the visitor profile indicates that the person is banned, access to the premises must not be granted.
- 7.7 If staff can not confirm their identity, they should deny access until all of the actions in the 'New Visitor Procedure' have been completed.

8 Banned Visitor Procedure

- 8.1 Where staff feel that there is any reasonable probability that a visitor poses a threat to the safety of any resident, staff member or other visitor should be banned from entering the service.
- 8.2 Managers should authorise requests to ban a visitor.
- 8.3 Banned visitors should be informed, in writing, of the reason for their ban.
- 8.4 The visitor profile should be updated using a visitor action identifying that they are banned, and the details as to the cause of the ban.
- 8.5 This information should then be communicated via e-mail to the staff team and other YMCA SPG services or employees as appropriate.

9 Risk Assessment

Financial Implications	None
Reputational Risk Implications	None
Staffing Implications	None