

# Home Visit: A SWOT Analysis in COVID-19 Pandemic Situation

**Indrakshi Basu**

Clinical Instructor, University College of Nursing, JNMH, Kalyani (WBUHS), West Bengal

## ABSTRACT

Home visit is a fundamental community Health Nursing procedure to foster primary health care process. In COVID-19 pandemic situation, primary prevention has faced numbers of facilitative and challenging dimensions. In this paper, strength, weakness, opportunity and threats of Home visit are discussed in practical scenario.

**Key words:** Home visit, SOWT Analysis, COVID-19

## INTRODUCTION

Home visit is a basic to survey in public health. A home visit is contact between family and community health nurse which allows the health worker to assess the home and family situation in order to provide the necessary nursing care and health-related activities. It is having numbers of advantages and disadvantages approached to target population with needs. SWOT analysis refers to the assessment and evaluation of strength, weakness, opportunities, threats and other factors that influence a specific issue. The current paper intends to analyze the favorable and unfavorable scenario happening in home visit due to pandemic situation. Since December, 2019 the world is emerged in COVID-19 pandemic situation.

## AIM

COVID-19 is a crisis in multilevel public health affecting individual, family and community. Not only health, all determinants of health is also striving through difficulty and enormous unexpected changes i.e. education, economy, finance,

future prospects, safety and security. So the aims are-

- i) To identify the positive and negative features inside and outside the crisis
- ii) To chalk out recommendations for health care professionals.
- iii) To help in strategic planning and decision making.

## SOWT ANALYSIS

A SWOT analysis related to home visit in pandemic situation helps to understand the external and internal conditions which health care professionals face during community health care process starting from planning till implementation.

### Strength

By home visit following events are happening to some extent:

- i) Compulsory thermal screening of all family members.
- ii) Providing all information regarding dos and don'ts during pandemic through health education.
- iii) Health workers demonstrate scientific hand washing technique along with all hygienic measures.
- iv) Clearing out misconceptions and doubt in each contact to prevent institution of myth.
- v) Provide psychological support and crisis management.
- vi) Circulate proper technique and stock of personal protective equipment (face mask, gloves etc.) among the people who are in most need of it and collect it for themselves.

vii) Through home visit, it is easy to identify the high risk group and refer them for early diagnosis and secondary and tertiary prevention.

### **Weakness**

The weaknesses are following-

- i) The cases of COVID-19 are developed within a short period of time.
- ii) India has a huge population with high population density.
- iii) Lack of infrastructure, supply of PPE, ventilators, medical equipment etc.
- iv) Lack of awareness among specific section of society
- v) High susceptibility to disease and poor immunity due to potential malnutrition, impure air, unhealthy behaviors like smoking, alcoholism, less physical activity etc. , other comorbidities.
- vi) Inadequate trained human resource for conducting home visit.
- vii) Absence of organized health check up during screening, just verbal response of individual is noted for identifying sign and symptoms of COVID-19.
- viii) Incomplete data collection
- ix) Inadequate self-awareness and NGO engagement.
- x) Limited use of local community networks and influencers for case identification, motivation for investigation.
- xi) Improper maintenance of physical distancing during home visit and unnecessary group gathering out of curiosity.
- xii) Inadequate PPE kits for health care professionals.

### **Opportunities**

Opportunities due to and by home visit are as follows-

- i) Possibility of expanding range of health care services.
- ii) Greater possibility to assess health practices adopted by community people.
- iii) Shielding of elderly and persons with severe comorbidities will reduce rate of severe morbidity and mortality.

iv) Home care of mildly affected and asymptomatic persons with infection is well accepted modality of care and will reduce the load on tertiary health settings.

v) Primary health care resource persons are enabled to have opportunity for advanced training on prevention of communicable diseases.

### **Threats**

i) Failure in contact tracing is leading to worsening the situation and increase in the probability of being hit by further severe waves of COVID-19.

ii) Breach of social distancing protocols.

iii) Increased chances and vulnerability of spread of infection of frontline workers contracting the disease.

iv) Age, immunity, specific disease conditions or other risk factors are always threat for community health workers.

### **Suggestions for Home Visitors**

Home visiting is basically performed by trained and novice health care personnel in best interest of individual, family and community at COVID-19 scenario.

All home visitors should follow the precautions like:

- Maintaining a distance of at least 6 feet between the home visitor and family members during a visit, and if possible, the home visit can take place outside or if possible by online medias and video calls (screening purpose where physical examination is not included).
- Using minimum three layered cloth face coverings and/or masks to prevent asymptomatic spread of the disease and provide protection when social distancing measures are difficult to maintain.
- Perform daily measurements of temperature for fever and an assessment of symptoms of infection prior to entering the home.
- Exit the home immediately and notify the home visiting program coordinating

offices if any person is found to be ill within the home

- Minimizing contacting frequently-touched surfaces at the home.
- Hand washing with soap and water for at least 20 seconds before entering the home and after exiting. Minimum 60% Alcohol based hand rub sanitising solution should be used where hand washing facility is not available or lack of time is there.
- Avoid touching eyes, nose, and mouth.
- Home visit bags should be equipped with emergency medicines, health education leaflets, PPE in adequate quantity.
- When visiting a family, in person screening is required and should be paid special attention rather than asking to a single representative of the family. It will increase the effectiveness of home visit.

## CONCLUSION

Based on the SWOT Analysis of home visit, it can be suggested that special

training, protocol awareness, follow up and personal safety measures in the part of health care professionals need continuous evaluation, monitoring and modification. Home visit is need based. Comorbidities of people are always threat to individual to contract COVID-19 or any communicable disease. Such SWOT analysis should be carried out in each home visit to ensure quality care for the community.

**Conflict of interest:** There is no conflict of interest.

## REFERENCES

1. "SWOT Analysis: Discover New Opportunities, Manage and Eliminate Threats". [www.mindtools.com](http://www.mindtools.com). 2016. Retrieved 24 February 2018.
2. <https://nurseslabs.com/nursing-home-visit/>

How to cite this article: Basu I. Home visit: a SWOT analysis in COVID-19 pandemic situation. *International Journal of Science & Healthcare Research*. 2020; 5(4): 355-357.

\*\*\*\*\*