

Enter & View Policy

Introduction

Healthwatch have a legal power under the Local Government and Public Involvement in Health Act 2007¹ and Part 4 of the Local Authorities Regulations 2013² to visit health and social care services and see them in action.

This power to *Enter and View* services offers a way for Healthwatch to meet some of their statutory functions and allows them to identify what is working well with services and where they could be improved. The purpose of this policy is to provide good practice guidance on Enter and View visits/activities and the determination of when they should be used. This will ensure that all visits conducted by Healthwatch Isle of Wight Authorised Representatives are carried out in an effective, accountable and transparent manner.

Authorised Representatives

Only Authorised Representatives may enter and view premises for the purpose of carrying out the activities of the Healthwatch Isle of Wight.

An Authorised Representative

- is an individual whom Healthwatch Isle of Wight has appointed as an authorised person
- has undertaken relevant training provided by Healthwatch Isle of Wight to become an Enter and View Authorised Representative
- has undergone a standard DBS check, recorded with Healthwatch Isle of Wight and provided references.

Recruitment and Training for Authorised Representatives

All Authorised Representatives will be recruited in line with our volunteer recruitment protocol. This will include volunteers completing an initial application form and providing two references. An interview will then be held with a Healthwatch staff team member to ensure the volunteer has the right attributes and values needed for the role. Any conflicts of interest will be explored at this time and recorded on the conflict of interest register.

A standard Disclosure and barring service check will need to be completed.

All Authorised Representatives will be expected to complete approved Enter and View training including mandatory training in Safeguarding, Equality and Diversity and other areas relevant to the work.

Once the Authorised Representative has completed the relevant training, undergone a DBS check and provided appropriate references, they will be provided with written evidence of their authorisation. The written evidence will take the form of a picture ID badge. Healthwatch Isle of Wight will make public on their website (www.healthwatchisleofwight.co.uk) an up-to-date and comprehensive list of all Authorised Representatives. We reserve the right to not appoint a person as an Authorised Representative if they are not successful in the recruitment process.

What is Enter and View?

An Enter and View visit is where a team of trained individuals, known as Enter and View Authorised Representatives, enter a service, make observations, collect the views of service users/patients and produce a report. The purpose of enter and view visits is to:

- Observe how people experience the service through watching and listening
- Observe and assess the nature and quality of services and to consider how they may be improved
- Obtain views of the people using these services, their family friends and carers
- Report findings to providers, regulators, the local authority, and NHS commissioners and quality assurers, the public, Healthwatch England and any other relevant partners based on what was found during the visit

Where can Enter and View take place?

Legislation places a duty on health and social care providers to allow Authorised Representatives of Healthwatch to carry out an Enter and View visit on premises where health and social care is publicly funded and delivered.

This includes:

- NHS Trusts
- NHS Foundation Trusts
- Local authorities
- Primary medical services, such as GPs
- Primary dental services, such as dentists
- Primary Ophthalmic services, such as opticians

- Pharmaceutical services, such as community pharmacists
- Premises which are contracted by local authorities or the NHS to provide health or care services, such as adult social care homes and day-care centres.

Where can Enter and View not take place?

- If the visit compromises either the effective provision of a service or the privacy or dignity of any person.
- Where the part(s) of premises are used solely as accommodation for employees where health and social care services are not provided at the premises (such as offices) or where they are not being provided at the time of the visit (for example, when facilities and premises are closed).
- If, in the opinion of the provider of the service being visited, the authorised representative, in seeking to 'Enter and View' its premises, is not acting reasonably and proportionately
- If the Authorised Representative does not provide evidence that they are authorised to carry out the visit.
- Where the care is being provided is a person's own home. This does not mean that an Authorised Representative cannot enter when invited by residents – it just means that there is no duty to allow Healthwatch to enter.
- Where the premises are non-communal parts of care homes, e.g. a resident's bedroom. If a resident asks an Authorised Representative to come into their bedroom and the Healthwatch agrees to this, it is important that the Authorised Representative is operating within their Healthwatch's own safeguarding policies and procedures, and the situation has been risk assessed.
- If there are no people in receipt of publicly-funded services on the premises.
- In all premises which relate to the provision of social care services to children.

Deciding on Visits

When planning an Enter and View visit, Healthwatch Isle of Wight will consider the following:

- How an Enter and View visit/s will contribute to our wider programme of work as set out in our workplan.

- If it is the best tactic to achieve the desired outcome or whether another means of gathering information would be more appropriate.
- Situations where it would not be appropriate for Healthwatch Isle of Wight to carry out a visit.
- If we are responding to local intelligence at a single premises or multiple premises

The Healthwatch Enter and View team will sign off Enter and View activity and decide whether the visit/s will be announced or unannounced.

The reason for an enter and view visit will be recorded and may include:

- complaints by users or carers which raise issues affecting more than the individuals involved;
- reports from patient complaints; independent complaints advocacy services; user or carer surveys indicating areas of concern;
- adverse media reports;
- concerns arising from an ombudsman's report, coroner's and/or judge's findings
- a request by the provider itself, a commissioner or an Isle of Wight Council Policy and Scrutiny Committee for Health and Social Care;
- a follow-up visit to check whether action has been taken on recommendations made following an earlier visit.

Preparing for visits

An enter and view planning meeting will be held to agree a project plan for the individual piece of work. This will include a description of where, when and how the visits will be conducted. A proforma will be co-produced with Authorised Representatives, detailing the purpose of the visit and the main focus areas. Sample questions may be shared on the proforma to ensure consistency during visits.

A training needs analysis will be conducted to identify whether Authorised Representatives require further, bespoke training (i.e. dementia, autism training).

We will consider whether we will need to book an interpreter or advocate for the visit, or consider any other accessibility requirements? We will also look at any special requirements that we need to meet to facilitate the visit, such as access or security.

We will find out whether any other visits are being planned around the same time by care regulators (e.g. the Care Quality Commission) or IOW Council Quality team or Contract Monitoring teams and explore the possibility that the visits could be coordinated.

We will consider information about the service which is already available, including feedback we have already received about the service.

Each Authorised Representative will be given a name badge which will contain details of the duration they are authorised to carry out this role.

If the visit is announced, the service provider will be sent an email or letter detailing the reasons for the visit, who will be visiting and the themes of the visit. The provider will be given a weeks notice of the visit as a minimum.

The time, duration and number of people needed to carry out the visit will depend on the size and type of service. We will ensure the number of volunteers will be enough to undertake the visit without appearing excessive.

Undertaking visits

Each authorised representative will ensure that they do not conduct a visit if they are unwell or showing any sign of infection. They will wear clothing appropriate to the setting (i.e bare as below the elbows in some hospital settings).

All Enter and View visits will be conducted by at least two authorised representatives.

The lead will introduce themselves to the person in charge of the premises. The lead and all other Authorised Representatives should show their ID and will provide a letter of authorisation for the visit.. The lead should also agree with the person in charge of the premises who can be approached and anything else they need to be aware of on the day as well as what will happen next.

During the visit, consent will be gained from people using the service before talking to them. Authorised Representatives will clearly state who they are and what they are doing on behalf of Healthwatch.

They will explain what they would like to hear about and will offer people the option not to participate if they wish. They will be given an explanation of what will happen with any information they share with Healthwatch Isle of Wight, how it will be used and stored, including how any notes taken will comply with our data protection policy.

An information sheet will be provided if required, detailing the same information and providing details of how people can get in touch with Healthwatch Isle of Wight.

It is important that Authorised Representatives behave respectfully to people and to staff at all times. This includes not being over-familiar or causing disruption.

Authorised Representatives will be required to cooperate with the provider's health and safety procedures. They will take care of any items they bring with them on the visit and will not place them anywhere they may pose a risk.

They will promote respect for the privacy and dignity of individuals and will respect the differences and diversity of the people they meet.

Authorised Representatives will not impede the work of staff and will be discrete during their visit. They will not go into a non-communal area of a care home or a person's own home unless invited by the person.

At the end of the visit, the Authorised Representatives will agree the main themes/findings of the visit and the lead Authorised Representative will feed back to the manager and/or provider, ensuring that any concerns are relayed without delay.

All Authorised Representatives will be expected to follow the Healthwatch Isle of Wight safeguarding policy and report any concerns immediately to the Healthwatch Isle of Wight manager.

Reporting the findings

Directly after the visit, the Authorised Representatives will write up their notes and agree any themes and recommendations.

The Healthwatch Isle of Wight manager will sign off the final report and ensure that no individuals can be identified by the information included in the report.

The report will be simple, easy to understand and without jargon. It will be factual and evidence based.

The recommendations will be clear, proportionate, offer achievable service improvements and reflect the views of the people met during the visit

The provider or manager will be informed that they will receive a draft report of findings and recommendations within three weeks of the visit and they will be required to complete a factual accuracy check of the report within 20 working days. With **Multiple independent providers** – the providers must respond within 30 days. This includes cases where Healthwatch sends a report to one provider, but that provider considers that other providers should be involved.

A final version of the report will then be sent to the manager/provider and they will be asked for a formal response to the recommendations which will be published alongside the report.

The report will be published on the Healthwatch Isle of Wight website and shared with service commissioners and regulators.

In all cases, providers must:

- Acknowledge receipt of the request to respond to the Healthwatch
- Provide a response to the Healthwatch, outlining any action it intends to take, or why they will not be taking any action in relation to the report and its recommendations
- Provide the relevant body (the commissioner) with copies of the report or recommendation and accompanying explanation.

What we will do if a provider doesn't respond:

Although providers are required to respond within specific timescales, they may not always do so.

As the first stage, we will send a formal reminder of the requirement to respond, mentioning the legislation.

Where the provider is part of a larger organisation – for example, a care home that is part of a group – this reminder will also be copied to the head office. At this stage, although the

deadline has passed, we will include a date for response after which the issue will be escalated.

If a response is not received, we will then notify:

- - The commissioner(s) of the service
- - The appropriate regulator(s).

A copy of the notification will be sent to the service provider (and the head office, if appropriate) so that they are aware of the situation and also to Healthwatch England.

Measuring Impact

Making a difference and creating positive change depends in part, upon effective relationships with commissioners (including the Local Authority and Integrated Care systems), with regulators (especially the Care Quality Commission), with local politicians (typically via the Health & Wellbeing Board and Health Overview and Scrutiny Committees) and with Healthwatch England. Healthwatch Isle of Wight will develop and maintain these vital relationships to ensure that positive changes are sustained.

The outputs from Enter and View have the ability to bring about sizable changes, when they supply evidence into programmes progressed through collaboration with the community of health and social care organisations. Healthwatch Isle of Wight is committed to developing and maintaining these relationships. It is through these same relationships that Healthwatch Isle of Wight will gather the information necessary to demonstrate the impact of its wider activities, including Enter and View. This will be used, in addition to the initial response, and where applicable follow up response, from providers, to demonstrate the impact of the Enter and View visit, or series of visits, in the publicly available Healthwatch Isle of Wight monthly Intelligence Reports.

¹ Section 225 of the Local Government and Public Involvement in Health Act 2007

² Part 4 of The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013