

‘Enter and View’ Protocol and Procedures

Introduction

Healthwatch Lambeth is the independent health and social care champion for local people. By obtaining residents’ views about their experiences of local health and care services, it aims to influence service commissioners, providers and scrutiny bodies, in order to address inequalities and ensure everyone gets the services they need.

There are a variety of ways that Healthwatch Lambeth collects feedback from service users, carers and organisations representing user groups. This includes ‘Enter and View’ visits by authorised Healthwatch Lambeth representatives to a service or a group of services to make observations and seek the views of those receiving and providing the service. After each visit, a report is published and made publically available.

Background to Enter and View

The Health and Social Care Act 2012 and associated regulations made provision for ‘Enter and View’ visits, allowing authorised representatives of local Healthwatch to enter premises to observe the nature and quality of services. It was recognised that it was appropriate for local Healthwatch to see and hear for themselves how services are provided, and to collect the views of users at the point of service delivery.

The government stated that local Healthwatch should make active use of their power of entry, allowing them to visit any publicly funded adult health or social care services in their local area, including those they have received concerns about, and to talk to the people using them and make recommendations back to the providers and commissioners. This was a continuation of the Enter and View power originally given to Local Involvement Networks (LINKs), which preceded Healthwatch.

It is important to note that the Enter and View process is a visit not an inspection, and that Healthwatch Lambeth is not a regulatory body such as the Care Quality Commission.

Local Healthwatch can also make reports and recommendations to the Overview and Scrutiny Committee, the Care Quality Commission or Healthwatch England if they have concerns about services.

Local Healthwatch are also required to report annually to Healthwatch England, giving an outline of the rationale behind their Enter and View programme, how they have involve volunteers and lay people; the number and type of places visited, and findings and recommendations.

1. Healthwatch Lambeth Visiting Programme

There is a responsibility on Healthwatch Lambeth to make clear to the public, and providers of services how it decides to undertake its Enter and View visits. This is explained in the information below.

1.1 Healthwatch Lambeth shall determine a Visiting Programme related to its terms of reference and current priorities in order to carry out its statutory duties in relation to National Health and Adult Social Care Services commissioned, provided for and used by the residents of Lambeth.

1.2 Legislation allows 'Enter and View' activity to be undertaken with regard to the following organisations or persons:

- ~ NHS Trusts
- ~ NHS Foundation Trusts
- ~ Local Authorities
- ~ a person providing primary medical services (e.g. GPs)
- ~ a person providing primary dental services (i.e. dentists)
- ~ a person providing primary ophthalmic services (i.e. opticians)
- ~ a person providing pharmaceutical services (e.g. community pharmacists)
- ~ a person who owns or controls premises where ophthalmic and pharmaceutical services are provided
- ~ Bodies or institutions which are contracted by Local Authorities or the NHS to provide health or care services (e.g. adult social care homes and day-care centres).

1.3 The frequency and range of such visits will be determined by Healthwatch Lambeth. There is a reasonable expectation that as wide as possible a range of sites and services will be visited over an agreed period of time.

1.4 The legislation requires Healthwatch Lambeth to make publically available the agreed criteria it uses for undertaking Enter and View visits. These are listed below.

- Work undertaken with service user groups and providers in order to identify and promote good practice
- Experiences of local service users, patients, their carers and families which suggests there are common concerns about the quality of a service a reduction or absence of a service
- The necessity to monitor issues arising from consultation proposals for Social Care and Health service developments or variations, or to assess the impacts of service reforms and reductions

- The necessity to monitor issues identified through the Lambeth Clinical Commissioning Group, Lambeth Council Commissioning and Contract Compliance services and local and regional Quality Surveillance Groups
- The need to monitor service delivery issues raised through direct or third party complaints, Consumer complaints services or other agencies, eg the Patient Advice and Liaison Service (PALS)
- Following up on issues raised through the Care Quality Commission's statutory report processes
- Other information received from the public via individuals or special interest groups
- To contribute to a wider Healthwatch programme of work
- To look at single issues across a number of premises or provider.

2. Authorised Representatives

2.1 The legislation states that only 'authorised representatives' can conduct a visit and then only for the purpose of carrying out the activities of the local Healthwatch they represent.

2.2 An authorised representative must undergo a 'Disclosure and Barring Service' check and hold a certificate to show this prior to conducting visits.

2.3 Healthwatch Lambeth members and participants who wish to become Enter and View authorised representatives must make an application to Healthwatch Lambeth and be appointed following a selection process. An interview panel (approved by the board of trustees) will meet with the applicants and appoint according to an agreed person specification. The appointment as an authorised representative will expire one year after it is granted, but may be revoked earlier in certain circumstances. A panel agreed by the Board will meet and review all authorised representatives prior to the expiry date of their authorisation in order to review and confirm their continued approval.

2.4 Authorised Visitors

There are occasions where the nature of an individual's disability or their specific use of a service qualifies them to be considered experts by experience. These essential criteria in certain circumstances can allow them to be deemed an 'authorised visitor', following the completion of a suitable training programme but without the necessary DBS check or application processes. Support workers accompanying authorised visitors may also be deemed an authorised visitor if required.

These circumstances may include:-

- a) where a visit is being undertaken in a setting which is generally open to public access e.g. community pharmacy
- b) where the authorised visitor is being accompanied or supported at all times by a person who has undertaken a DBS check
- c) where a support worker has completed the same training and takes an active part in the visit.

2.5 Healthwatch Lambeth will make publicly available an up-to-date list of all Authorised Representatives including those Authorised Visitors undertaking visiting activities identified in (a) (b) and (c) above.

3. Arrangements for Visits

3.1 After the decision has been made on the services to be visited, arrangements for visits shall be made by Healthwatch Lambeth with the appropriate Health or Adult Care Service Manager. The relevant Head of Service will also be notified as follows:

- NHS and Foundation Trusts and NHS services, the Chief Executive's Office
- Adult Care Services, Executive Director of Adult and Community Services.
- NHS Community Health Services, the Head of CHS Office
- NHS Private and voluntary sector contracted out services, the office of the Chief Executive or regional Director of the company or organisation providing the services.
- Adult Social Care Homes, private and voluntary sector contracted out services, the Office of the Chief Executive of the company or organisation providing the service.

3.2 The Healthwatch Lambeth visiting team will negotiate with each service to be visited in order to agree:

- The date and time of the visit and how long it will last.
- The purpose of the visit and any particular issues it wishes to discuss
- The types of activities and service areas authorised representatives would like to access and observe.
- The names of the authorised representatives visiting the service.

3.3 Prior to the visit, Healthwatch Lambeth will make available to the service manager information for distribution and/or for display in the premises being visited so that patients, service users, residents and staff are aware of the role of Healthwatch Lambeth and the purpose of the visit. The information will explain that the Enter and View visit is not an inspection but an opportunity for better understanding the experiences of service users.

3.4 Visits will take place at mutually agreed times which could include evenings and weekends where appropriate.

3.5 Once the date, time and location of the visit has been confirmed, Healthwatch Lambeth authorised representatives identified for the visit will be notified and given any relevant information held by Healthwatch Lambeth.

- 3.6 Reasonable time will be allowed for the service to make arrangement for the visit, bearing in mind the type of visit requested. Ideally visits should not clash with, or duplicate others visits or inspections by statutory regulators, hinder medical programmes, or impede customer care. Healthwatch Lambeth will liaise with the statutory regulators in advance of planning Enter and View visits.
- 3.7 Generally no visit shall be made without prior arrangement. There may be exceptional circumstances where unannounced visits may be made without any prior notice.
- 3.8 Visits, whenever possible, should last up to four hours and with a minimum of two people. Where the premises to be visited are quite large, and the number of people to be engaged with substantial, the visiting team may be increased in order to complete the task.

4. Preparations for the Visit

- 4.1 Information and documentation profiling the service to be visited, its size and purpose and any current policy statements/protocols/other information that would be useful for the Enter and View visit will be requested before the visit by Healthwatch Lambeth staff. It may also be useful for an initial meeting to be arranged with the relevant Service Manager to plan the visits, but it is not expected that this will always be necessary.
- 4.2 Healthwatch Lambeth will indicate to the service any visitor disabilities or access issues. In particular, if a visitor has special parking needs or has to be accompanied on the visit.
- 4.3 Where possible prior to a visit the authorised representatives will meet for a briefing to:
 - Re-confirm the purpose of the visit and any special circumstances.
 - Discuss what issues will be particularly important during the visit.
 - Discuss the particular questions they want concentrate on to gain the information they need.
 - Identify the number of staff, residents, service users and patients to be approached and how that should be done
 - Confirm who will write the report.
 - Consider any last minute information and its potential impact on the visit.

5. During the Visit

- 5.1 Healthwatch Lambeth's authorised Enter and View representatives, where possible, will report to the person in charge of the service on arrival.
- 5.2 Authorised Enter and View representatives will be provided with ID badges by Healthwatch Lambeth which must be worn during the whole of the visit.

- 5.3 Patient/service user/resident/carer sensitivity, privacy, dignity and confidentiality will be respected at all times. Enter and View representatives should be careful not to interfere with a patient's/resident's/service user's treatment in any way.
- 5.4 On most visits Healthwatch Lambeth's authorised Enter and View representatives will wish to see not only the facilities used by the residents, patients and service users, but to speak to them. Wherever possible this will be done with their consent and should not interfere with their treatment or cause personal embarrassment.
- 5.5 Healthwatch Lambeth's authorised Enter and View representatives will usually prefer visits to be of an informal nature rather than a 'guided tour'. They would not wish to take senior staff away from other duties merely to be in attendance. However an opportunity to discuss issues arising from the visit with senior staff or service managers would be desirable at some point during the visit.
- 5.6 Healthwatch Lambeth's authorised Enter and View representatives would welcome the opportunity of speaking with any members of staff about the functioning of the service.

6. At the end of the Visit

- 6.1 It is very important that the Enter and View team meet somewhere with privacy at the end of the visit in order to allow them to discuss and agree on their observations.
- 6.2 Healthwatch Lambeth Enter and View representatives at the end of the visit should brief the service manager on any key issues positive and negative. Following the visit Healthwatch Lambeth will send a letter outlining the issues discussed and identifying any issues that are in need clarification.

7. Visit Reports

- 7.1 The agreed report writer should write up the report whilst the information is fresh in their memory. The report should clearly state and reflect the reasons for the visit being undertaken and how any evidence or information obtained meets the objectives of the visit.
- 7.2 Enter and View representatives should also make clear where their information was provided, taking care, of course, always to respect confidentiality. Such sources could include:
 - authorised representatives' observations;
 - discussions with staff;
 - discussions with residents, service users and patients;
 - comments from carers and/or relatives;
 - Structured interviews; and/or documentation provided by the staff/the proprietor.

- 7.3 Findings should offer a balanced assessment of the service and, where appropriate make recommendations for improvement. As with their own documentation of the visit the findings should be drawn from a range of sources and those sources should be made clear.
- 7.4 No report will identify individual residents, patients or members of staff by name in the body of the report. Staff will be identified by their job title.
- 7.5 The Enter and View representative that agreed to write the report will input observations and comments from the other representatives and seek to send a draft report to the Healthwatch Lambeth within seven days of the visit.
- 7.6 Healthwatch Lambeth will circulate the draft to other members of the Enter and View Team for factual accuracy. Once any changes requested have been incorporated, the draft report will be quality assured and sent to the service manager or another identified responsible person.
- 7.7 From the date the report is received, 20 days is allowed for an acknowledgment of the report and any actions the service intends to take in respect of the report or recommendations made. A written response is also expected explaining why the service does not intend to take any action in respect of that report or recommendation.
- 7.8 In the event that there are a number of senior officers or a board that needs to respond to the report, 30 days is allowed for an acknowledgement and a response.
- 7.9 After response from service manages and any necessary agreed amendments, the draft report will be presented to a meeting of the Healthwatch Lambeth Board for their approval. The Board will also examine issues arising from the report which they agree should be referred to any other organisation, statutory body or regulator. The Board will also decide at this stage whether to publish the report on its website.
- 7.10 Healthwatch Lambeth will monitor cost of its Enter and View activities and publish a record of these in its annual report.

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