

## Enter & View Review

### Purpose

1. This report informs the Board of the Enter and View programme undertaken by Healthwatch Cambridgeshire during the past six months and examines the learning from that programme. The report also sets out a new approach to Enter and View and how these powers can be used to greatest effect as part of a wider intelligence-gathering system.

### Key issues

2. Local Healthwatch have statutory powers to enter and view health and social care settings to observe patient and public experiences. These are not to be confused with inspections by regulators.
3. The Healthwatch Cambridgeshire Enter and View Policy (Appendix 1) was approved by this Board in January 2015. Volunteers were recruited as Authorised Representatives, a training programme developed and visits commenced in May 2015.
4. 13 visits were undertaken between April and September 2015. A review was held with the Healthwatch Cambridgeshire Authorised Representatives in September to gather feedback, identify skills and areas for development.

### Action required by the Board

5. The Board is asked to:
  - Consider the benefits of the intelligence-led Enter and View visits, see paragraphs 14-21
  - Approve a consultation with stakeholders
  - Delay review of the existing Enter and View policy (due January 2016) until new plans are tested during the first half of 2016.

### Author

Sandie Smith, CEO

### Non-Executive Director lead

Karen Begg, Non-Executive Director

Date 18<sup>th</sup> November 2015

## The Enter & View Programme

6. Following the approval of the Healthwatch Cambridgeshire Enter and View Policy by this Board in January 2015 volunteers were recruitment and a major training programme developed and delivered. 20 volunteers completed this training and became Authorised Representatives. All of these volunteers attended Cambridgeshire County Council Safeguarding Adults training.
7. Working closely with the CQC and the County Council Contracts Team a number of care homes were identified as suitable for an Enter and View visit. Care was taken not to visit homes that were under close supervision by either the CQC or the Contracts Team so that the home did not feel overloaded and that our visits could not cause confusion with any regulatory or contractual action being taken.
8. 13 visits were undertaken between April and September 2015. Each visit team comprised at least one staff member and two volunteers. The visits had a focus on respect and dignity; in all visits the Enter and View Team spoke to residents, carers and families about and how they felt about living in the home. Healthwatch Cambridgeshire staff ensured good and full liaison with the home managers and every effort was made to maintain positive relationships. An emphasis was placed upon providing good information and personal discussions before, during and after the visits.
9. The majority of the care homes visited have given positive feedback. For example 'the constructive comments are very much appreciated thank you'. Several homes took immediate action on the points that were raised, for example making a dedicated disabled car parking space. Many longer term actions are happening.
10. Currently eight reports are published and available on the Healthwatch Cambridgeshire website. The final four are being checked with the Authorised Representatives that undertook the visit and the care home. One other report is under review.

## Enter & View Review

11. An Enter and Review session was held with the volunteers in September 2015. The feedback was very positive. Several themes emerged from this session:
  - The training and information provided by staff regarding the visits was thought to be helpful and comprehensive
  - Working as part of a team was very reassuring and good for confidence building
  - The visits were well-prepared and the pre-meet very useful
  - Everyone said they had a chance to talk to residents and meaningfully contribute
  - Recognition of the complexity and challenge of Enter and View in a care home setting
  - Need for more experience rather than training
  - Talking to people with high care needs could be quite upsetting
  - The post visit debrief was helpful and thorough.
  
12. Some comments were received suggesting it would be helpful for there to be a strategy for each visit and that the reports need to be written immediately after each visit so that the visit is still clearly in participants' minds when under review.
  
13. Delivery of this Enter and View Programme has provided an opportunity for considerable learning across the organisation. During the course of the programme Healthwatch Cambridgeshire has:
  - Developed and delivered its own bespoke Enter and View training
  - Recruited 20 extra volunteers some of whom are now also doing outreach work
  - Developed a new report sign off process.

## The Way Forward

14. Delivery of this Enter and View programme has been a significant investment for the organisation and has realised benefits. However, the limitations of the organisation, in terms of capacity, to maintain such a large pool of volunteers, needs to be recognised. As the volunteers observe, the ongoing experience is critical to ensure the highest possible standard and usefulness of visits.

15. There are many areas of the health and care system that could benefit from an Enter and View visit. The volunteers have suggested A&E and Minor Injuries Units; last winter some Healthwatch across the country carried out visits to these services. The two hospitals currently in Special Measures have also indicated that they would find an Enter and View visit helpful to assess improvement from an independent patient perspective. A similar approach would be helpful for the care home sector.
16. Learning from the experiences of staff, volunteers and other Healthwatch, and taking into account views of providers, it is recommended that future Enter and View visits will be intelligence-led and focused on one distinct area with a clear strategy for each.
17. The visits will be identified:
  - By intelligence received by Healthwatch
  - In partnership with the CQC and the County Council Contracts Team
  - In partnership with providers of health and care services.
18. There will be a target of one visit per quarter and the whole process will be completed before the next one is started.
19. To ensure that a suitable team can be assembled a record will be kept of the volunteers' skills and availability.
20. Healthwatch Cambridgeshire will consult on this approach with a range of stakeholders including the volunteers and providers, to gather views on this approach, how it can be most effective and to raise awareness of our work and plans.
21. An update of the Enter and View policy (see the Appendix) will follow testing of the adapted approach in the first half of 2016.

Appendix 1**Healthwatch Cambridgeshire Enter and View Policy****What is Enter & View?**

‘Enter and View’ is the opportunity for Authorised Representatives of Healthwatch Cambridgeshire, including all specifically trained Staff / Employees:

- To go into health and social care premises to see and hear for themselves how services are provided
- To collect the views of service users (patients and residents) at the point of service delivery
- To collect the views of carers, family members and friends of service users
- To observe the nature and quality of services - observation involving all the senses
- To collate evidence-based findings
- To publish a report of any findings and recommendations, including observed good practice where noted, as well as points for improvement. This will be shared with the relevant providers, the Care Quality Commission, the relevant Local Authority or NHS commissioner and quality assurers, Healthwatch England and any other relevant partners. A copy will also be published on Healthwatch Cambridgeshire’s website and be available in hardcopy from the office on request
- To develop insights and recommendations across multiple visits to inform strategic decision making at local and national levels.

**Where does Enter & View Apply?**

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).

### **Exclusions - Where 'Enter and View' does not apply**

The duty to allow entry does not apply in the following circumstances:

- if the visit compromises either the effective provision of a service or the privacy or dignity of any person
- if the premises 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 them to enter)
- where the premises or parts of premises are used solely as accommodation for employees
- non-communal parts of the premises
- 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, is not acting reasonably and proportionately in seeking to 'Enter and View' its premises
- if the Authorised Representative does not provide evidence that he or she is authorised.

The duty does not apply to the observing of any activities which relate to the provision of social care services to children.

### **Who can carry out Enter & View?**

Only Authorised Representatives of Healthwatch Cambridgeshire will undertake 'Enter and View' for the purpose of carrying out Healthwatch Cambridgeshire activities. Enter and View visits to be undertaken by a minimum of two Authorised Representatives.

Healthwatch Cambridgeshire will recruit volunteers as Enter and View Authorised Representatives (in-line with the Healthwatch Cambridgeshire Volunteer Involvement Policy). The specific role description sets out the qualities and abilities required for the Authorised Representatives, including a criminal record check by the Disclosure and Barring Service.

Healthwatch Cambridgeshire will make publicly on its website [www.healthwatchcambridgeshire.co.uk](http://www.healthwatchcambridgeshire.co.uk) a comprehensive and up to date list of all of its Authorised Representatives.

This part describes the arrangements for members of Healthwatch Cambridgeshire's Enter and View Team to enter and view premises providing health and social care services within the County of Cambridgeshire for the purpose of observing services and service delivery.

In conjunction with the purpose of the visit and its aims the team will:

- observe and assess the nature and quality of services
- obtain the views of people using those services
- validate evidence already collected
- gather information from staff, services users, family, friends and carers
- liaise with statutory organisations for example Care Quality Commission to ensure non-duplication of visits within the same time period

#### **Announced visits as part of the Healthwatch Cambridgeshire Work Plan**

Prior to a visit, Healthwatch Cambridgeshire will supply the provider of the service with the following information in writing:

1. Introduction and information about Healthwatch Cambridgeshire followed by communications to arrange a date and time for the visit, along with an approximate duration
2. The purpose of the visit
3. The overall structure of the visit:
  - a) Identifying staff and service users that the authorised representatives would like to meet
  - b) The number and nature of any discussions along with the identification of any special communication or access needs
  - c) The activities that the authorised representatives wish to observe
  - d) Whether the authorised representatives will be distributing leaflets or other information about Healthwatch Cambridgeshire
  - e) Whether or not it would be beneficial for staff or service users to accompany the authorised representatives throughout the visit and any support staff
  - f) The names of the Authorised Representatives conducting the visit
  - g) The identification that Healthwatch Cambridgeshire Authorised Representatives will provide

- h) Re-assurance that the draft findings will be shared with the provider of the service prior to being finalised and distributed more widely
- i) Where appropriate, draft findings will also be shared with relevant parties whose information may have prompted the visit

### **Unannounced visits**

Unannounced visits should not take place if any other approach could produce the information Healthwatch Cambridgeshire is seeking. Unannounced visits must be in response to a concern highlighted by the community, such as reports of dirty premises, statistics showing high infection rates or spot checks to review aspects of service delivery such as waiting times for clinic attendances.

The rationale for undertaking such a visit must be documented by Healthwatch Cambridgeshire, along with the reason for not addressing the situation in another way.

Where Healthwatch Cambridgeshire decides it is necessary to conduct an unannounced visit, they agree to provide the information above upon arrival.

**Approved by Healthwatch Cambridgeshire Board of Directors**

Date: 14<sup>th</sup> January 2015

**For Review**

Date: January 2016

**Responsible Officer**

Chief Executive Officer of Healthwatch Cambridgeshire