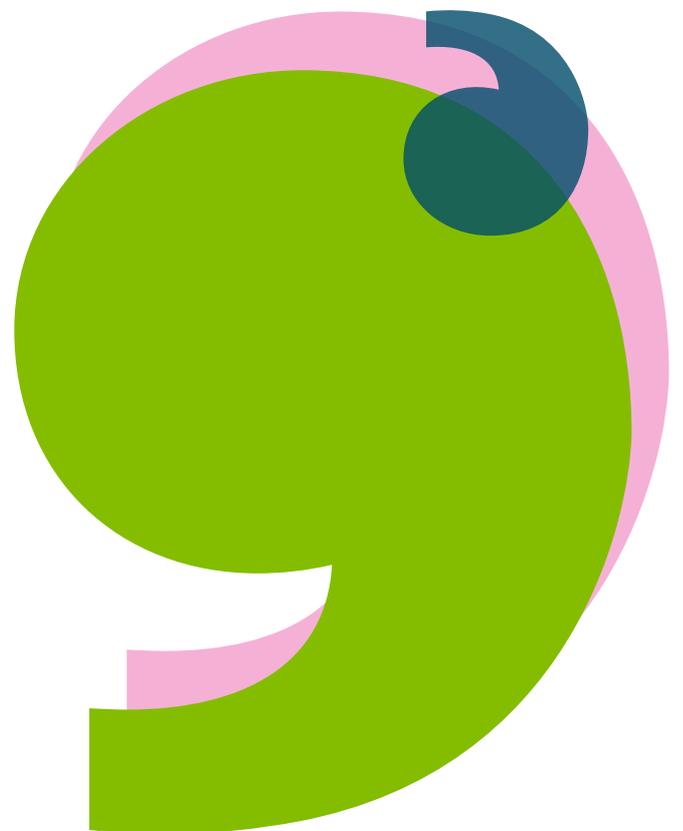




Healthwatch South Tees

Enter and View Policy and Procedure Document

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1 Introduction

Purpose of this document

There are a number of requirements in legislation that apply to Enter and View. This document ensures Healthwatch South Tees can state publicly how we meet these requirements, so everyone is clear when, where and how Enter and View is carried out. This document also covers recommended areas of Enter and View practice.



2 Enter and View Policy

2.1 Role of local Healthwatch

There is a local Healthwatch in every area of England. We are the independent champion for people using local health and social care services. We listen to what people like about services and what could be improved and share their views with those with the power to make change happen. We also share them with Healthwatch England, the national body, to help improve the quality of services across the country. People can also speak to us to find information about health and social care services available locally. Our sole purpose is to help make care better for people.

2.2 What is Enter and View?

An Enter and View visit is an opportunity for Healthwatch to see how services could be improved by listening to the views of the people that use them, within criteria set out in legislation.

There are two pieces of legislation which place a duty on health and social care providers to allow a representative of Healthwatch to carry out Enter and View;

- The Local Government and Public Involvement in Health Act 2007
- The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013.

In 2014 the Department of Health Review carried out a review of the organisations that have powers of entry (including Healthwatch). This review states that there remains a duty on providers of health and social care to allow a representative of local Healthwatch to enter certain premises and observe activities. There are criteria that Healthwatch must meet in order to exercise the power of entry, which include the consent of the provider.

Enter and View is an activity Healthwatch can carry out, but not a statutory function, which means Healthwatch can choose if, when, how and where it is used, depending on their local priorities.



Healthwatch may carry out Enter and View to contribute to activities in their statutory functions. Enter and View allows Healthwatch to:

- To go into health and social care premises to hear and see how people experience the service.
- To collect the views of people using the service at the point of service delivery.
- To collect the views of carers and relatives of people using the service.
- To observe the nature and quality of services.
- To collate evidence-based feedback, based on what people have told them on the day.
- To report to providers, regulators, Local Authority, NHS commissioners, quality assurers, the public, Healthwatch England and any other relevant partners.
- To develop insights and recommendations across multiple visits to inform strategic decision making at local and national levels.

2.3 Where can Enter and View be carried out?

The legislation allows Enter and View activity to be undertaken on premises where health and social care is publicly funded and delivered, which covers:

- 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 that are contracted by Local Authorities or the NHS to provide health or care services, such as adult social care homes and day-care centres

Health and Social care providers do not have a duty to allow entry if:

- The visit compromises either the effective provision of a service or the privacy or dignity of any person.



- Where premises are used solely as accommodation for employees where health and social care services are not provided, such as offices, or where services are not being provided at the time of the visit, such as when facilities and premises are closed.
- If, in the opinion of the provider of the service being visited, the Authorised Representative seeking to 'Enter and View' its premises, is not acting reasonably and proportionately.
- If the Authorised Representative does not provide evidence that he or she is authorised.
- If the premises where the care is being provided is a person's own home, e.g. privately funded assisted living facilities. This does not mean that an Authorised Representative cannot enter when invited by residents - it just means that there is no duty to allow local 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, the Authorised Representative will decide whether to agree to this, they need to feel comfortable they are operating within their own safeguarding policies and procedures, and the situation has been risk assessed.
- If there are no people receiving publicly funded services being provided on the premises.
- The duty does not apply to the observing of any activities which relate to the provision of social care services to children.



3 Who can carry out Enter and View? Authorised Representatives

- Only Authorised Representatives can conduct a visit and then only for the purpose of carrying out the activities of the Healthwatch they represent.
- Healthwatch Authorised Representatives will be provided with identification badges.
- Healthwatch are required under legislation to ensure Authorised Representatives hold a valid DBS (Disclosure and Barring Service.) Authorised Representatives are eligible for a standard check currently.
- Healthwatch will make publicly available a list of all its Authorised Representatives.



4 Carrying out Enter and View

4.1 Deciding to make a visit

- Ensure Enter and View activity links to the statutory functions stated in section 221 of the Local Government and Public Involvement in Health Act 2007.
- To contribute to a wider Healthwatch South Tees programme of work, as identified by the South Tees Leadership and Delivery Group in partnership with the Healthwatch South Tees Partnership Board.
- To look at a single issue across a number of premises.
- To respond to local intelligence at a single premises.

4.2 Planning

- Every Enter and View, once approved by the Healthwatch South Tees Leadership and Delivery Group, will have a dedicated lead assigned for the visit, where possible the lead representative will be a member of the Healthwatch South Tees Partnership Board.
- A planning group will be formulated to determine the process to carry out the Enter and View. This process will change dependent on the nature of the service and the purpose of the visit.
- A detailed account of the process and rationale will be included in the final report. The report will be shared with the provider for a 20-working day response and then made publicly available.
- Planning will consider other planned visits to the service such as, CQC inspections, avoiding duplication.
- The timings and duration of each visit will vary depending on the size and nature of the service.
- The number of people on the visit will vary depending on the size and nature of the service.
- Identification of any additional training and resources will be made, such as interpreters that may be required.



4.3 Arranging the visit

- Should Healthwatch South Tees carry out a planned Enter and View, Healthwatch will inform the provider of the visit along with relevant details, including the purpose, date, time, estimations of how long it will take, how many people will be carrying out the visit and the name of the lead person.
- It is at the discretion of Healthwatch South Tees to determine the length of notice given for an Enter and View. Healthwatch may feel it necessary to carry out an unannounced Enter and View.

4.4 Conducting the visit

- During an Enter and View visit the nominated lead Authorised Representative will ensure that all representatives carrying out the visit are well enough to conduct the visit being mindful of colds and the spread of virus/infection, and are compliant with any specified dress code, such as not wearing excessive jewellery or ties.
- On arrival at the premises the lead Authorised Representative will make themselves known to a specified person of authority, ensuring plans for the Enter and View are clear and consent to be on the site is confirmed. ID will also be shown for all Authorised Representatives attending.
- The specified person of authority will need to be contactable throughout the visit, if unavailable a nominated person must be able to act on their behalf.

4.5 Speaking to people who use services

- The Enter and View team will respect the privacy and dignity of service users at all times.
- An Authorised Representative will never carry out an Enter and View on their own.
- The Enter and View Team will gain consent before speaking to service users; ensuring service users are clear about who the Enter and View team are; the purpose of the visit; that they have a choice if they want to engage with the visit; what will happen with any of the information they share with Healthwatch, and how to get in contact with Healthwatch after the visit.



- That the Enter and View team will leave the premises calmly and without protest if instructed to do so by the provider, and follow up as required.
- During the visit if any of the Enter and View Team see, hear or are aware of something they feel is concerning will follow the agreed MVDA Safeguarding procedure, issues will be escalated as appropriate.
- At the end of the visit, any notes taken will be dealt with in accordance with MVDA Data Protection Policy.

4.6 Reporting

- Following the visit the Enter and View Team will meet to discuss information collected, analyse any themes and consider any recommendations. If appropriate the team lead will discuss the findings initially with the service provider and share feedback.
- The Healthwatch South Tees staff team will work with the Enter and View team to coordinate the production of the report, this will be circulated to the HWST Partnership Board for feedback.
- HWST will ensure that the report does not identify any individuals, and that no individual's identity could be inferred through collective information.
- HWST will check that any drafted recommendations are clear, proportionate, offer achievable service improvements and reflect the views of the people met during the visit.
- HWST will send a copy of the draft report to the provider requesting comments on factual accuracy & responses to any recommendations within 20 working days of receipt.
- The final report will be signed off by the Healthwatch South Tees Leadership and Delivery Group before being made public and circulated as appropriate.

4.7 Follow-up activity

- The Enter and View Team may follow up visits to see if any of the changes local Healthwatch recommended have been implemented.

