

ENTER AND VIEW POLICY

1. Background

1.1 Introduction to Enter and View

Healthwatch Brighton and Hove is an organisation which ensures people who use health and social care services get their opinions heard by local decision makers. One of the statutory powers of the organisation is to visit health and social care services at the point of delivery, via authorised representatives. Enter and View is a statutory power for all local Healthwatch organisations, which was written into law by the Health and Social Care Act 2012. During these visits Healthwatch can observe how care is provided first hand, and ask service users, and their carers and relatives, for their thoughts and experiences of the service. These findings can then be written up, and recommendations produced which detail ways that providers could improve their service. This policy sets standards which explain how Enter and View is planned, supported and carried out within Healthwatch Brighton and Hove.

1.2 Authorised Representatives

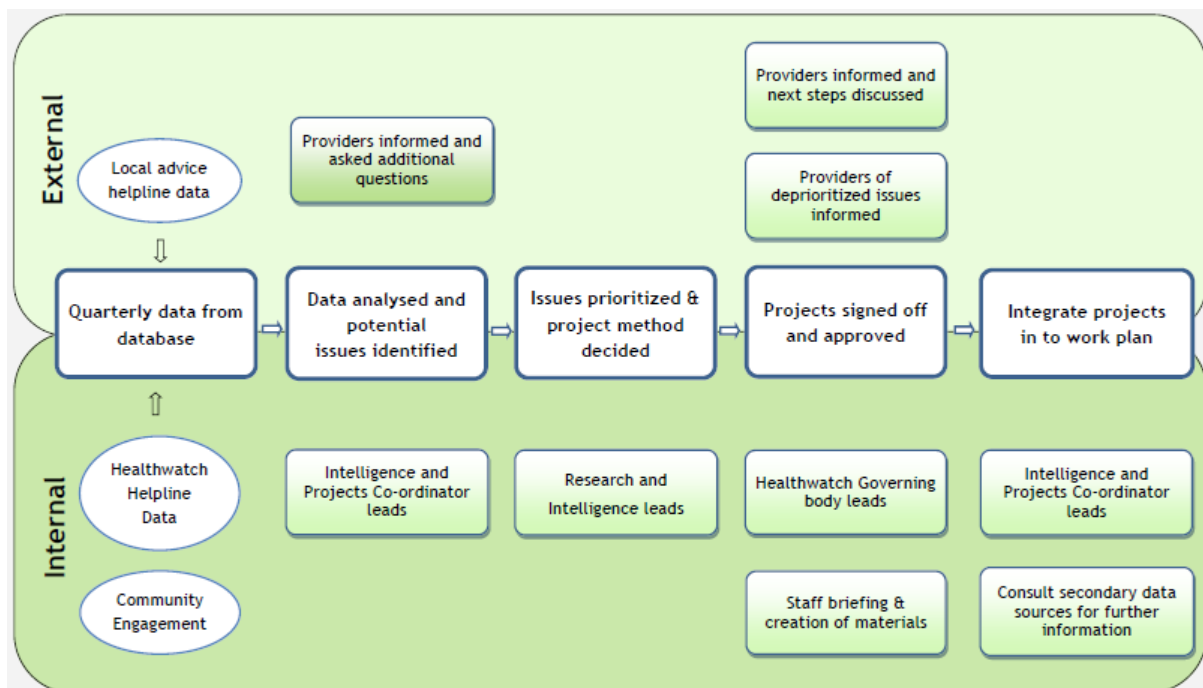
Under the legislation, certain individuals can be authorised to enter premises to observe health and social care activities being carried out - these individuals are referred to as authorised representatives. Authorised representatives can be staff or volunteers at Healthwatch Brighton and Hove. There will be no more than 10 Authorised representative volunteers at any one time. Representatives will include those with wide ranging experience, and will be as representative of the local population as possible.

2. Visiting Criteria

2.1 How we decide to do a visit

Visits can take place to contribute to a wider programme of work, to look at a single issue across a number of premises, or to respond to local intelligence at a single premises. If Healthwatch’s intelligence suggests that one of these routes could potentially be pursued with one or more local services, the issue will be taken to the Research and Intelligence Committee. If the issue is prioritized¹ it then needs to be approved by the Healthwatch Brighton and Hove Governing Body before any visits can occur.

Each visit will have a clear and defined purpose, which will be based on the evidence and intelligence Healthwatch Brighton and Hove gathers. In some situations Healthwatch may accept ‘commissioned’ visits, where local organisations fund Healthwatch to visit and report on local services.



2.2 Announced and unannounced Visits

¹ see the Issue Prioritization document for more information about the factors which are considered

Healthwatch Brighton and Hove takes a collaborative approach to working with services. For this reason it is standard practice that plans for visits will be shared with service providers before the visit.

However, in exceptional situations it may be necessary to conduct unannounced visits. If such a course of action is chosen, the justification for this will be documented in both the Research and Intelligence Committee and the Governing Body meeting minutes.

2.3 Where Enter and View applies

Enter and View visits will follow the guidance laid out by Healthwatch England on where Enter and View applies and does not apply².

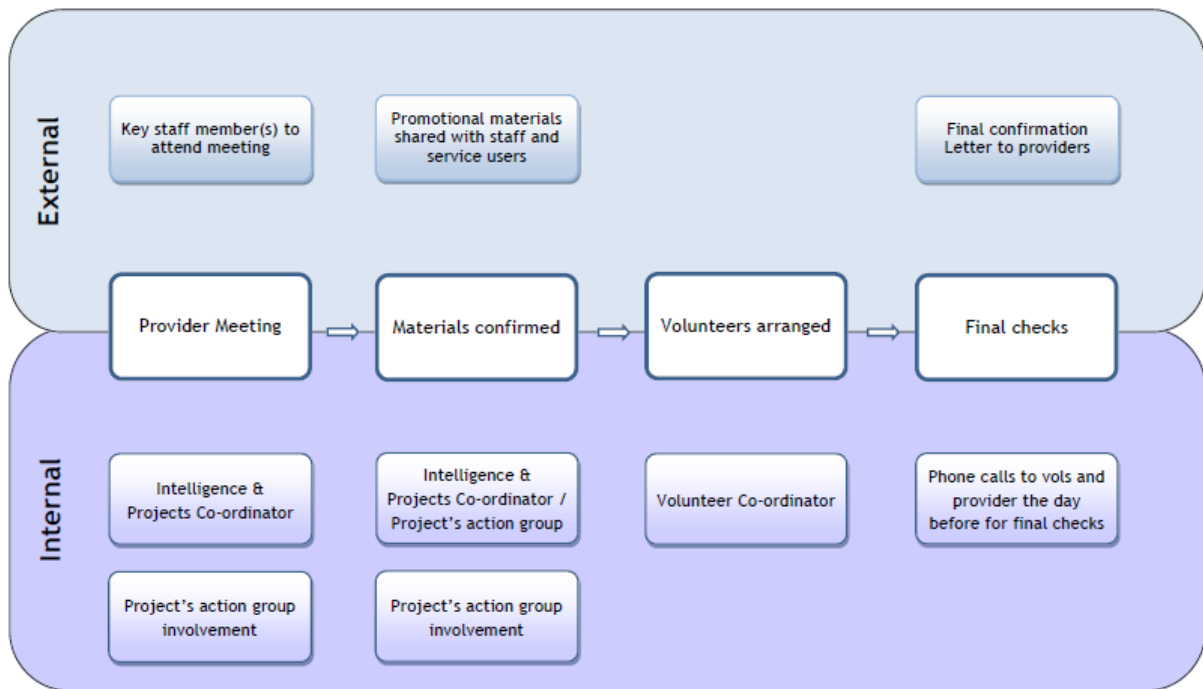
3. Arranging Visits

3.1 What service providers can expect

Once a visit has been approved by the Healthwatch Governing Body, the Intelligence and Projects Co-ordinator will begin the practical organisation of the visit. Service Providers will receive an explanation of what Healthwatch Brighton and Hove do, and why their premises have been selected for an Enter and View visit. They will also receive copies of the Enter and View Policy, Volunteer Code of Conduct and the names and details of the Authorised Representatives due to visit the premises. Healthwatch will provide the service with information on the purpose of the visit for staff and service users, including how they can engage in the process.

Service providers will be asked to provide a suitable date (within a stated timeframe) for announced visits. They will also be asked to provide a key staff liaison for the representatives, as well as directions and other practical information for the day of the visit. The service provider will have a range of opportunities to comment and feedback on all parts of the Enter and View process.

² See 4.3.1 and 4.3.3 of http://www.healthwatch.co.uk/sites/default/files/enter_view_study_final_report.pdf



3.2 What Authorised Representatives can expect

If selected for a visit, a representative will be informed and accepted on a first come first served basis. To ensure impartiality, representatives are disqualified from attending a visit if they have any connection with the service. This includes being a previous patient, knowing a current patient, or having any professional connection (past or present) to the service.

Authorised Representatives will be provided with a pack of background information. This will include Healthwatch leaflets, survey materials, information about the visit and any other relevant documents. They can expect support via telephone on the day of the visit if they request it, and the opportunity to reflect on the visit afterwards with Healthwatch staff. Authorised Representatives must bring their identification badges on the day of the visit.

3.3 If we need to cancel a visit

Once an agreed date has been set for a visit, Healthwatch will do its best to ensure that the visit goes ahead. However, in some circumstances this may not be possible. If a visit needs to be cancelled, Healthwatch will contact all relevant parties as soon as possible and inform them. Authorised Representatives will be asked to shred any sensitive paperwork, and retain any documents that can be used again for other visits. Healthwatch will endeavour to reschedule any cancelled visits as soon as is practical.

4. Recruiting and Training Authorised Representatives

4.1 Recruiting and Training

When new Authorised Representatives are required, they will be recruited using the Healthwatch Brighton and Hove volunteer recruitment procedure. Newly recruited Enter and View Authorised Representatives will also be required to attend role specific training, and will attend a session about adult safeguarding. Additional non-mandatory training will be offered as appropriate and relevant.

4.2 Once someone has been accepted

Once training and a satisfactory DBS check are complete, the volunteer can officially become an Enter and View Authorised Representative. To complete the process they will be asked to sign and abide by the Volunteer Code of Conduct and they will be given the Enter and View policy and any supporting reference documents. Finally they will be given their identification badge, and their photograph and name will be uploaded to the Healthwatch Brighton and Hove website.

4.3 Maintaining quality

All Authorised Representatives will also have access to 1:1 supervision according to the HWBH Volunteer Supervision Guidelines. This is a chance to reflect on positive

practice, as well as things to improve on, and any feedback about visits will be shared with representatives in these sessions.

4.4 Conduct of Authorised Representatives

Every Enter and View visit will have a minimum of two Authorized Representatives in attendance. Both will have the opportunity to feed back confidentially on the other representative's conduct during the visit, as will the service provider. Notwithstanding this, if any breach of the Code of Conduct is observed, it is the duty of the observer to report the incident in full to the relevant Healthwatch staff member, as soon as is appropriate.

Authorised Representatives must adhere to the Code of Conduct at all times. If the Code of Conduct is breached at any time, the Healthwatch Brighton and Hove procedure for the management of volunteer conduct and capability will be followed. If a service provider feels a representative is not acting in line with the Code of Conduct, a visit can be terminated by them on site.

4.5 Writing up what we've found

After the visit, a representative or staff member will draft a report and recommendations on the basis of what was spoken about and observed. The draft will first go to the representatives themselves (if they did not write the report) to check that it is an accurate reflection of their experiences. The service provider will then have the opportunity to check the report for factual accuracy.

The service provider will be given 20 working days to respond to the recommendations of the report. These responses will be included in the final report, to ensure that the views and commitments to future action of the provider are fully represented. At this stage the report will be put before Healthwatch's Governing Body for approval.

If approved, Healthwatch will make the details of the report available to the public and to key health and social care colleagues. The service provider will be

encouraged to circulate the report amongst service users and other relevant people.

