



Enter and View Policy

Reviewed: 25/11/2013

Next Review:

## CONTENTS

---

	Page
1. Definition of Enter and View	3
2. Application of Enter and View	3
2.1. Where Enter and View Applies	3
2.2. Exclusions	3
3. Purpose of Policy	4
4. Enter and View at Healthwatch Shropshire	4
5. Principles	5
6. Committee	5
6.1. Overview	5
6.2. Volunteer Committee Members	5
6.3. Election Regulations	5
7. Volunteers	7
7.1. Who They Are	7
7.2. Recruitment and Training	7
7.2.1. Role Description	7
7.2.2. Application Form	7
7.2.3. Interview	8
7.2.4. References	8
7.2.5. Criminal Records Checks	8
7.2.6. Basic Training Programme	8
7.3. E&V Quarterly Workshops	9
7.4. Individual Support	10
7.5. Lead Enter and View Authorised Representatives	10
8. Announced and Unannounced Visits	10
8.1. The Approach	10
8.2. Announced	11
8.3. Unannounced	11
9. Process	11
9.1. Decision to Visit	11
9.2. Composition of Visiting Team	12
9.3. Planning Meeting	12
9.4. Informing the Provider	13
9.5. Conducting the Visit	13
9.6. Reporting	14
9.6.1. Visit Reports	14
9.6.2. Programme Reports	15
9.6.3. Sharing Reports	15
9.6.4. Learning Tool	16
9.7. Follow Up	16
9.8. Measuring Impact	16
10. Joint Working with Other Local Healthwatch	17
10.1. Overview	17
10.2. Exceptions	17
10.3. Information Sharing	17
10.4. Healthwatch Telford and Wrekin	17
11. Health and Safety	18
12. Insurance	18

**Appendices:**

1. Enter and View Committee Terms of Reference
2. Enter and View Authorised Representative Role Description
3. Lead Enter and View Authorised Representative Role Description
4. Contents of Visit Folder
5. Letter Informing Service Provider of Announced Visit
6. Procedure for Conducting an Enter and View Visit
7. Procedure for Refused Entry
8. Enter and View Report Template
9. Letter Accompanying Report
10. Service Provider Feedback Form on 'Enter and View' Visit
11. Service Provider Feedback Form on 'Enter and View' Process

DRAFT

## **1. Definition of Enter and View**

An Enter and View visit is where a team of trained individuals, known as Enter and View Authorised Representatives (hereafter referred to as ‘authorised representatives’), access a service, make observations, collect views and produce a report.

Service refers to a place delivering publically funded health or social care services, specifically those outlined in 2. Where Enter and View Applies.

By law a service provider must allow authorised representatives to enter and view<sup>1</sup>.

## **2. Application of Enter and View**

### **2.1. Where Enter and View Applies**

Enter and view activity can 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 (e.g. dentists)
- A person providing primary ophthalmic services (e.g. 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).

### **2.2. Exclusions**

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;
- Where the premises are non-communal parts of a care home (authorised representatives can enter upon invitation, however there is no right of entry);
- If the premises where the care is being provided is a person’s own home (authorised representatives can enter upon invitation, however there is no right of entry);
- Where the premises or parts of the premises are used solely as accommodation for employees of service-providers;

---

<sup>1</sup> 2008 No. 915 “National Health Service, England”

- 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 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.

### **3. Purpose of Policy**

This document sets out the approach of Healthwatch Shropshire to Enter and View. The policy is a 'live' document which is reviewed regularly to ensure it stays up-to-date.

This policy does a number of things:

- Explains to staff, volunteers, Board members, service users, service providers and the public how and why Healthwatch Shropshire carries out Enter and View visits;
- Outlines the key principles underpinning Enter and View at Healthwatch Shropshire;
- Ensures fairness and consistency in Healthwatch Shropshire's approach to Enter and View;
- Helps service users and service providers to know what they can expect from Healthwatch Shropshire in relation to Enter and View;
- Explains how Healthwatch Shropshire works with other Local Healthwatch around joint services

### **4. Enter and View at Healthwatch Shropshire**

Enter and View at Healthwatch Shropshire aims to:

- Gather data on people's experiences of the NHS and publicly funded social care services from the lay perspective;
- Increase Healthwatch Shropshire's contact with the local communities it serves;
- Increase Healthwatch Shropshire's contact with local service providers, Shropshire commissioners and the Care Quality Commission (CQC);
- Ensure visits are tailored to meet the needs of the people of Shropshire.

## **5. Principles**

This policy is underpinned by the following principles:

- Healthwatch Shropshire will ensure that Enter and View is properly integrated into the organisational structure and the processes are in place to ensure that the data gathered is effectively used to improve health and social care in Shropshire;
- All data is demonstrably evidence based;
- All reports are available in the public domain;
- Enter and View visits are carried out with a clear Purpose and all data gathering activities are designed to reflect that Purpose;
- Enter and View is carried out by authorised representatives who are selected through a robust recruitment system, and receive appropriate training and support to ensure they carry out their duties to the highest standards;
- Concerns about a service are escalated through the appropriate channels
- Enter and View undertaken only where it can have an impact on the service users.

## **6. Enter and View Committee**

### **6.1. Overview**

The Enter and View Committee is a committee of the Board and oversees all Enter and View activities of Healthwatch Shropshire. The composition of the committee and its purpose are outlined in the Terms of Reference (see [appendix 1](#)).

The Terms of Reference and the composition of the committee is published on the Healthwatch Shropshire website.

### **6.2. Volunteer Committee Members**

The voluntary authorised representatives who sit on the committee are recruited by election for a one year term. They stand as representatives for all voluntary Enter and View authorised representatives with Healthwatch Shropshire: during discussions and decision-making undertaken by the committee they are expected to act in the interests of the whole, not on individual interests or motivations.

### **6.3. Election Regulations**

- The annual election is held at an E&V quarterly workshop around June. The upcoming election must be advertised to all volunteers at the immediately previous E&V quarterly workshop.
- Any authorised representative can nominate themselves for election. Nomination must come for the individual standing; one cannot be nominated by another individual.

- There are no restrictions on the number of terms an individual can stand for a seat on the committee. The terms can run consecutively but are not obliged to do so.
- Each voluntary authorised representative has one vote per vacancy on the committee, for example where there are two seats available on the committee each voluntary authorised representative has two votes: the votes must be used on two separate candidates. Except candidates standing for election who have one vote per vacancy on the committee minus one, for example where there are two seats available on the committee each standing candidate has one vote.
- In all elections voters have the opportunity to cast one of their votes on Reopen Nominations (RoN).
- The format of the election consists of:
  - Explanation of committee
  - Explanation of process
  - Ask for nominees to make themselves known
  - Introductions from the candidates
  - Opportunity for counter argument
  - Ballot
  - Announcement of results
  - Closing remarks from chair
- The ballot is conducted using a show of hands from all voluntary authorised representatives present. During each show of hands the candidate must be absent from the room. The votes are counted by the Volunteer and Involvement Officer chairing the workshop and confirmed by another board or staff member of Healthwatch Shropshire. All candidates return to the room and the results are announced.
- Where a voluntary authorised representative wishes to step down for the committee before completing the full term they are asked to give a notice period of four weeks. An extraordinary election will be held at the E&V quarterly workshop following the announcement of their withdrawal following the principles outlined above.

## **7. Enter and View Authorised Representatives**

### **7.1. Who They Are**

Although the majority of authorised representatives will be volunteers, some will be staff members from Healthwatch Shropshire and other organisations. Healthwatch Shropshire's commitment to volunteers is outlined in more depth in the Volunteering Policy. The following principles and procedures are applied to all individuals who act as authorised representatives regardless of their employment status. The exceptions are that Healthwatch Shropshire staff members do not have to complete a volunteer application form and interview, and that attendance at relevant Enter and View meetings is at the discretion of their line manager.

### **7.2. Recruitment and Training**

Healthwatch England guidance<sup>2</sup> stipulates that Enter and View programmes must include a robust recruitment system to ensure that only people with the appropriate attitudes and behaviours act as authorised representatives. Healthwatch England also states that it is crucial that authorised representatives do not carry personal agendas.

In support of this, and in line with its Volunteering Policy, Healthwatch Shropshire has a number of mechanisms around the recruitment of authorised representatives:

- Role Description
- Application Form
- Interview
- References
- Basic Training Programme

Healthwatch Shropshire (HWS) is committed to the fair treatment of its staff, potential staff, volunteers, potential volunteers, users of its service and users of health and social care services Healthwatch Shropshire representatives come into contact with, regardless of race, gender, religion, sexual orientation, responsibilities for dependents, age, physical/mental disability or offending background.

#### *7.2.1. Role Description*

The role description includes the person specification against which applicants are considered during the recruitment process. The role description is reviewed on a regular basis by the Enter and View Committee; the Business Committee is responsible for approving it for ratification by the Board. See **appendix 2**.

#### *7.2.2. Application Form*

Applicants must complete the standard Healthwatch Shropshire Volunteer Application Form.

---

<sup>2</sup> Healthwatch, March 2013, 'Enter and View' Study: Final Report: Version: 1.0

### *7.2.3. Interview*

All applicants are invited to an interview to establish whether the applicant is suitable for Healthwatch Shropshire and Enter and View, and whether Healthwatch Shropshire is suitable for the volunteer.

Healthwatch Shropshire recognises that acting as an authorised representative is a sizeable commitment for an individual and seeks to ensure that applicants are aware of, and comfortable with, the commitment that is asked of them; the interview is one method through which that Healthwatch Shropshire seeks to achieve this.

### *7.2.4. References*

The applicant must provide the details of two referees who can supply Healthwatch Shropshire with character references. Each referee must have known the applicant at least 2 years. These can be either from employment, education, personal friends or neighbours but should not be family members. Healthwatch Shropshire will discuss the suitability of referees with the volunteer if they are concerned who they should contact.

On successful completion of an interview, receipt of satisfactory references and attendance at the induction training session the applicant is confirmed as a volunteer with Healthwatch Shropshire by the Board, via the business committee; they must, however, complete additional training to qualify as an authorised representative.

### *7.2.5. Criminal Records Check*

Authorised representatives need to undergo a criminal record check by the Disclosure and Barring Service (DBS) as part of the application process. Authorised representatives require a standard disclosure. Healthwatch Shropshire staff will facilitate the application; ensure the correct policies and procedures are in place; and absorb any associated costs. See Healthwatch Shropshire's DBS Policy and the Policy for DBS Secure Storage, Handling, Use, Retention & disposal of Disclosures and Disclosure Information for additional information.

### *7.2.6. Basic Training Programme*

As pre-requisite training all authorised representatives will receive:

- Welcome to Healthwatch Shropshire
- Equality and Diversity
- Confidentiality
- Safeguarding
- Enter and View

Healthwatch Shropshire will use the recommended training resources developed by Healthwatch England to ensure they are in line with good practice; however Healthwatch Shropshire will include additional exercises as appropriate to support individual learning.

The Enter and View training programme will also include as a minimum the full process of two visits. Where identified as appropriate or necessary the period will extend to more visits.

The purpose of these visits is:

- To provide practical instruction in carrying out an Enter and View visit;
- To develop the volunteers confidence in carrying out Enter and View visits;
- To familiarise the volunteer with the environment(s) that Enter and View is carried out in;
- To familiarise the volunteer with examples of good/bad/mediocre practice in the environment(s) as are witnessed on the visits;
- To assess the volunteers ability to respond to feedback;
- To identify possible areas where assistance is required;
- To assess the volunteers demonstrable understanding of the Enter and View process and its required attitudes and behaviours.

On completion of these visits authorised representatives will be provided with feedback from the authorised representative(s) leading the visits. This feedback is an opportunity for the individual to learn and develop their understanding and method of conducting visits. The feedback will be constructive. The Lead Enter and View authorised representative (hereafter referred to as the 'Lead') and the authorised representative will make a joint decision on whether to extend the training period to additional visits.

### **7.3. E&V Quarterly Workshop**

Held once a quarter E&V quarterly workshops are designed to provide an opportunity for the following:

- For volunteers to share and learn from their experiences in Enter and View;
- To enable changes and important messages about Enter and View to be communicated;
- Identify knowledge and best practice;
- To provide an opportunity for volunteers to ask questions on Enter and View to other volunteers and Healthwatch Shropshire staff;
- To deliver additional training to enhance the skills and knowledge of volunteers in relation to Enter and View;
- For Healthwatch Shropshire to thank Enter and View authorised representatives;
- To communicate the findings and outcomes of Enter and View visits;
- To identify areas where volunteers feel they require additional support and/or training;
- For Enter and View volunteers to network with each other;
- To elect volunteers to sit on the Enter and View Committee;

- For Healthwatch Shropshire staff and volunteers to communicate upcoming events and activities that may be of interest to others.

All Enter and View volunteers will be invited to attend an E&V quarterly workshop and there is an expectation that volunteers will attend at least two in a twelve month period to ensure they can deliver the same quality of volunteering as the other Enter and View volunteers.

#### **7.4. Individual Support**

The Volunteer and Involvement Officer is the key contact for authorised representatives and 'Lead' authorised representatives and acts to oversee volunteers in this roles.

Healthwatch Shropshire aims to provide each authorised representative with a review at least annually to support the individual's personal development within the role.

#### **7.5. Lead Enter and View Authorised Representatives**

The opportunity to be a 'Lead' is one that the volunteer must choose to undertake. Volunteers who wish to become the 'Lead' must first speak with the Volunteer and Involvement Officer about their suitability for this task (see appendix 3 for Lead Enter and View Authorised Representative role description). Suitable individuals will attend additional training designed to equip them with the skills and knowledge to lead other volunteers in Enter and View visits.

Training will include:

- Outline of responsibilities of a Lead Enter and View Authorised Representative
- Guidance on how to appropriately frame questions
- Leading a planning meeting
- Scenario training for difficult situations
- Report writing
- Supporting and developing new authorised representatives
- Providing feedback to new authorised representatives.

## **8. Announced and Unannounced Visits**

### **8.1. The Approach**

During the time when an Enter and View visit is taking place a Healthwatch Shropshire staff member will be on duty.

The decision to undertake a visit as announced or unannounced must be directly related to the Purpose of the visit and is decided by 'Lead' for that visit. The decision must take into consideration the most effective way of gathering the data that is sought through the Enter and View visit.

## **8.2. Announced**

An announced visit is defined as an Enter and View visit where the provider has been advised at least one week in advance of the day and time of a visit.

On an announced visit the provider will have been give the names of the authorised representatives who will make up the visit team.

The decision to inform the provider of the purpose of the visit in advance must reflect the Purpose of the visit and the objective for carrying out the visit.

## **8.3. Unannounced**

An unannounced visit is defined as an Enter and View visit where the provider is unaware that a visit will take place in advance of the authorised representative's arrival.

A Healthwatch Shropshire staff member will make up a member of the visit team during all unannounced visits.

## **9. Process**

### **9.1. Decision to Visit**

The decision to carry out an Enter and View visit is made by the Enter and View Committee.

With all visits, whether reactionary or part of a planned programme of work, the decision to visit must be informed by intelligence gathered, or presented, to Healthwatch Shropshire's Intelligence, Assessment and Action Committee, or its representatives.

At the time of deciding to schedule a visit the following must also be decided:

- Whether the visit is a stand-alone visit or whether it forms part of a series of visits in a planned programme;
- The Purpose of the visit;
- Any relevant parameters for the visits.

The decision, the basis for the decision, the Purpose and any relevant parameters for the visits must be documented in the minutes of the meeting.

All decisions to carry out Enter and View visits are ultimately reported to the Board to ensure accountability.

Where Board confirmation for a visit is required at short notice Healthwatch Shropshire will gain permission from the Chair of the Enter and View committee.

## 9.2. Composition of Enter and View Visiting Team

Each individual Enter and View visit will be composed of a minimum of two authorised representatives, one of whom must be a 'Lead'.

Where the visit forms part of a planned programme the decision will be made about whether the visits should be undertaken by the same, or different volunteers. This decision will take into account: the Purpose of the series of visits; the composition of any previous visit teams to the service providers/locations involved; and the availability of authorised representatives.

## 9.3. Planning Meeting

The objective of the planning meeting is to establish the details of how the visit, or series of visits, will be carried out in order to meet the aim of the visit. The Purpose of the visit must be reflected in all the details of the visit.

During the planning meeting the following must be done:

- Set a date and time for the visit(s) fitting around other planned visits by other organisations to the provider as known (the Volunteer and Involvement Officer is to check with other planned visits following the planning meeting to confirm there are no clashes or inappropriate visit timeframes) and ensuring a Healthwatch Shropshire staff member is available to be on duty;
- Assess accumulated reports and evidence about the service to be visited in order to, including:
  - Recent Enter and View reports
  - The last Care Quality Commission (CQC) inspection reports
  - Any other recent visit reports e.g. Clinical Commissioning Group (CCG) visit; Patient Led Assessments of the Care Environment (PLACE) visit reports
- Identify any requirements for special support needs necessary to facilitate the visit;
- A decision made on the numbers of service users, carers and staff who it is planned to interact with (including a minimum to make the sample representative) and/or observe;
- Set the questions that will be asked of service users, carers and/or staff as applicable;
- Define the key areas of observation for the visit;
- Agree how discussion responses and observation outcomes will be recorded, and so prepare discussion and observation capture forms as appropriate;
- Allocate tasks to each authorised representative based on their skills and experience;
- Agree an approach for collating and writing up notes, and for producing draft findings from the visit;
- Collate materials required for the visit and prepare the 'Visit Folder' (see [appendix 4](#));

- Check the location of the service and directions on how to get there;
- Arrange when and where to meet, and how to travel to the site.

The Purpose of the visit must be reflected in each of these decisions in order to meet the required outcomes of the visit.

The authorised representatives who will be carrying out the visit must attend and actively participate in the planning meeting.

#### **9.4. Informing the Provider**

After the planning meeting has confirmed the date of an announced visit the service provider must be rung. This action is performed either by the visit 'Lead' or the Volunteer and Involvement Officer. The service provider will be informed:

- Date of visit;
- Time of visit;
- Likely duration of visit;
- Names of the representatives and the identification they will be wearing;
- The Purpose, where applicable.

This is to ensure that all relevant persons at the location of the service are informed that a visit will be taking place in advance of the visit, as well as conveying details of what they can expect. Details of the date of the phone call and the person spoken to are then recorded on Healthwatch Shropshire's database.

Where the timeframe allows, the phone call will be followed up with a written letter using the template (see appendix 5). As well as with the letter the provider will be sent leaflets explaining Enter and View and, where applicable, posters to put up informing service users, carers and staff of the visit. The date the letter is sent will be recorded on the Healthwatch Shropshire database.

Where there is insufficient time to post a letter to the service an email will be dispatched to ensure the service has details of the visit in writing.

The notification period must reflect the Purpose of the visit and where possible will happen at least 20 days in advance.

#### **9.5. Conducting the Visit**

Healthwatch Shropshire is committed to ensuring that the health and safety of service users, staff members, visitors and members of the public that the visit team comes into contact with during the course of an Enter and View visit is not compromised by the actions or presence of any authorised representatives. This includes ensuring that:

- There is no spread of infection through an unwell authorised representative taking part in visit;
- Authorised representatives comply with the health and safety regulations of a location.

Healthwatch Shropshire is equally committed to ensuring that the dignity of service users is not compromised by our actions.

Behaviour that impinges on: the dignity of service users; the health and safety of service users, staff (including Healthwatch Shropshire staff), other volunteers, visitors to a service, and members of the public; affects the confidentiality of service users; or breaches the code of conduct (see the Volunteering Policy) for authorised representatives will not be tolerated. Concerns will be raised with the authorised representative and may result in the individual being asked to cease participating in Enter and View visits, and potentially being asked to cease association with Healthwatch Shropshire.

Where authorised representatives witness, are informed of, or suspect there is a safeguarding issue they are obliged, by law, to pass that information on to the appropriate bodies as soon as possible. Where there is a concern about safeguarding the Enter and View visit must be terminated immediately: Healthwatch Shropshire refuses to be complicit with safeguarding breaches. Details and procedures relating to safeguarding are contained in the Healthwatch Shropshire Safeguarding Policy.

Authorised representatives are obliged to report any appropriate matters to the Care Quality Commission (CQC).

## **9.6. Reporting**

### **9.6.1. Visit Reports**

Visit reports are written by the visits' 'Lead', using Healthwatch Shropshire's Enter and View Report Template ([appendix 8](#)). The first draft is shared with the other authorised representatives present on the visit to input their opinions. The draft report is then sent to the Volunteer and Involvement Officer for proof-reading and support with editing, and then shared with the Enter and View committee for approval: the committee has three working days to respond.

It is Healthwatch Shropshire's aim to share every draft report with the service provider within ten working days of the visit. Where this is not possible due to exceptional circumstances the draft report must be shared with the service within thirty working days. Draft reports will be sent with the standardised Letter Accompanying Report to ensure consistency ([appendix 9](#)).

The report is based only on the data gathered during the Enter and View visit and should be written in an objective and factual style, with all statements grounded in data and free from subjectivity. In accordance with Healthwatch Shropshire's Data Protection and Confidentiality policies, no individual service user or family member will be personally identifiable in the report. Staff members will not be named in the report however they may be personally identifiable due to their role. Where applicable, a service may request details of a staff member referred to in the report in order to implement positive change, or provide praise. Healthwatch Shropshire requires that on these occasions the service must provide follow up information on their actions as a result of this change.

Should a provider have concerns about a report they are included to meet with Healthwatch Shropshire and members of the visit team to discuss its content and their concerns.

The service visited is encouraged to respond to the draft report within ten working days of receiving it: where this is not possible due to exceptional circumstances the service must respond within thirty working days. Where applicable the service is also encouraged to enclose a six month action plan outlining how they will respond appropriately to the recommendations outlined in the draft report.

Within ten working days of receiving their response the draft report will be edited where appropriate and published in the public domain. No report will be published until the final version has been approved by the Enter and View committee and ratified by a quorum of the board has approved it: to save time this will be done electronically.

The service visited will receive a copy of the final report directly.

All services who receive an Enter and View visit are asked to complete an evaluation form of the visit itself (see appendix 10) and to provide feedback on their experience of the Enter and View process as a whole (appendix 11).

#### *9.6.2. Programme Reports*

Where the visit forms part of a programme of visits the individual visit report will form an appendix of the overall programme report. The Programme Report will be ultimately approved by the Board and a copy will automatically be sent to all services who received a visit as part of the Programme.

#### *9.6.3. Sharing Reports*

All reports will be shared directly with Healthwatch England through the Hub and the Care Quality Commission (CQC). Where applicable a report will also be shared directly with:

- Clinical Commissioning Group (CCG)
- NHS England
- Local Authority
- Other Local Healthwatch
- Shropshire Partners In Care (SPIC)
- Health and Wellbeing Board
- Quality Surveillance Group (QSG)
- Health Overview and Scrutiny Committee (HOSC)
- Partners in the Third Sector

#### 9.6.4. Learning Tool

As a minimum, during the period of practical training the report an authorised representative is involved in producing will always receive feedback to support their development. Similarly the first few reports (as a minimum) produced by a 'Lead'.

Enter and View reports may also be shared with other authorised representatives in the Quarterly Workshops in order to support all authorised representatives' development. This will only be done with the authorised representative's permission.

#### 9.7. Follow Up

Depending on the visit Healthwatch Shropshire may decide to follow on from the visit with one or more of the following actions:

- Arrange future Enter and View visits to the same service premises;
- Send a letter 3-9 months after the visit requesting further information about the service's actions in relation to the recommendations outlined in the visit report: the service is required to respond;
- Request a six month action plan.

Healthwatch Shropshire will take all reasonable steps based on the circumstances of each visit to be assured that the service has responded to the recommendations of a report where applicable.

#### 9.8. Measuring Impact

Influential Enter and View depends upon effective relationships with commissioners (including the Local Authority and Clinical Commissioning Groups), with regulators (especially CQC), with local politicians (typically via the Health & Wellbeing Board and Overview and Scrutiny Committees) and with Healthwatch England. Effort needs to be applied to developing and maintaining these vital relationships. Enter and View can only have limited impact on its own, chiefly where recommendations are very low cost. However, 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 Shropshire is committed to developing and maintaining these relationships, thereby striving to enable Enter and View will have the maximum impact.

It is through these same relationships that Healthwatch Shropshire 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 annual publically available 'You Said: We Did' report.

Healthwatch Shropshire is committed to undertaking Enter and View only where it will have an impact on the service users.

## **10. Joint Working with Other Local Healthwatch**

### **10.1. Overview**

Where the service provider is shared with another area, Healthwatch Shropshire will contact that Local Healthwatch and/or Welsh Community Health Council to arrange a shared Enter and View visit consisting of a minimum of one Enter and View Authorised Representative from each Local Healthwatch involved. The Lead Enter and View Authorised Representative will be provided by the Local Healthwatch where the provider is based, for example Healthwatch Telford and Wrekin will lead on visits to Princes Royal Hospital.

### **10.2. Exceptions**

On rare occasions it may be deemed appropriate for another Local Healthwatch to carry out Enter and View visits in Shropshire due to exceptional circumstances. For example, where Healthwatch Shropshire or its volunteers could be seen to have a conflict of interest, or where Healthwatch Shropshire is potentially too involved in the circumstances to be impartial.

### **10.3. Information Sharing**

Where it is appropriate Healthwatch Shropshire will share information with other Local Healthwatch in accordance with its information sharing protocols.

### **10.4. Healthwatch Telford and Wrekin**

Due to sharing the Shrewsbury and Telford Hospital Trust (SaTH) Healthwatch Shropshire recognises the need to ensure that it works closely with Healthwatch Telford and Wrekin to ensure that:

- Enter and View Authorised Representatives are of the same calibre;
- Enter and View Authorised Representatives receive the same standard of training and development;
- Escalation triggers are compatible;

Healthwatch Shropshire will meet these requirements by:

- Holding regular meetings with Healthwatch Telford and Wrekin;
- Sharing information on policies and procedures relating to Enter and View;
- Inviting Healthwatch Telford and Wrekin to attend E&V quarterly workshops, and attending Healthwatch Telford and Wrekin's equivalent events at least twice in twelve months;
- Planning E&V quarterly workshops in conjunction with each other to ensure consistency;
- Inviting Healthwatch Telford and Wrekin to workshop element of developing programmes of work.

## **11. Health and Safety**

Healthwatch Shropshire will ensure that an appropriate risk assessment is produced for all Enter and View activities and that the relevant persons receive the outlined training.

## **12. Insurance**

Healthwatch Shropshire will ensure the correct insurance provisions are in place to cover all activities involved in Enter and View.

DRAFT