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## **Promoting the Consumer Voice in Care Homes - Understanding the Role of Healthwatch Salford and its Enter and View Programme**

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### **Introduction**

The care home sector in the UK is a vital component of the provision of health and social care to older people with complex care needs. As with all areas of health and social care, care home providers need to evaluate the quality of the experience of care and support that it provides. This requires attention to the consumer voice in care homes. Consumers include patients, residents, clients, carer's, families and communities. The vital role of care homes will continue to be a key area in health and social care provision due to the increasing number of older people in the UK population.

A mark of the success of the health and social care provision in the UK over the last 50 years is the increased longevity of many people. Between 1976 and 2016 there was a 3.8 percentage point increase in the proportion of people aged 65 and over (Office of National Statistics (ONS) 2017). The prediction for the next 50 years is of an ongoing increase in the size of the UK population of people aged 65 years and over, with an estimated additional 8.6 million older people (ONS 2018).

It is imperative that people living in care homes receive quality care that is delivered by the range of appropriately trained health and social care workers. The Nursing and Midwifery Council Future Nurse: Standards of proficiency for registered nurses (NMC, 2018a, 2018b) through the creation of new practice supervision and assessor roles is providing the opportunity to think differently about clinical placements for future NMC registrants (nurses, Trainee Nurse Associates) and this can include increasing the opportunity for placements from within the care home setting. Thinking creatively about practice placements offers opportunities for interprofessional supervision, with students learning about the roles of other disciplines and how to collaborate in a team (Leigh and Roberts, 2017, 2018). This in turn can support their clinical leadership development.

There are UK regulators that register health and adult social care service providers in England (including care homes) and inspect whether standards are being met. The Care Quality Commission (CQC) as an independent regulator clearly set out their expectations of the good care home and when they inspect homes their inspectors ask 5 key questions:

1. Is it safe?
2. Is it effective?
3. Is it caring?
4. Is it responsive to people's needs?
5. Is it well-led?

The public often search the CQC website to find out information about specific care homes and use this information when making the important decision about choosing the best care home for them self, relative, or friend. The Nursing and Midwifery Council (NMC) also clearly state in its Code (NMC 2018c) that NMC registrants: prioritise people, practise effectively, preserve safety and promote professionalism and trust.

An important point to make is not to wait for the CQC to visit a care home in order to ask the 5 key questions. Registered nurses, unqualified staff, student nurses and Trainee Nurse Associates who undertake a placement in a care home can develop a culture of scrutiny and challenge through asking the inquisitive, curious and far reaching questions about the care being delivered. This in turn can promote a culture of openness and transparency and indeed promote quality care through consistently listening to the consumer voice.

NHS England and Healthwatch England both working in partnership as the independent consumer champion for health and social care, sharing the common goal of making sure that the interests of consumers are at the heart of everything they do. There are local Healthwatch across England that represent specific populations, an example being Healthwatch Salford. One of the roles that Healthwatch across the country perform is visiting health and adult social care services to see how they are run and is achieved through undertaking an Enter and View visit.

This article provides information about how Healthwatch Salford is generating constructive feedback using the consumer voice in care homes through implementing its Enter and View programme. For this article the term care home is used to collectively refer to residential and nursing homes. Considered is what nurses can expect if Healthwatch Salford do visit the care home; the benefits of such a visit, what types of questions will be asked and how is this information shared both within the home and nationally. Ultimately what is the nurse's role to implement the findings of the visit to enhance the consumer experience.

### **Key words**

Healthwatch Salford; Enter and View visit, care homes; person-centred care

### **Salford and Healthwatch Salford**

Salford is a city in the north west of England with a population of 233900. Currently in Salford there are more than 35,000 people aged 65 or older and this number is expected to rise. The Salford Together partnership includes health and social care organisations; Salford City Council, NHS Salford Clinical Commissioning Group, Northern Care Alliance Group- Salford Royal NHS Foundation Trust and Greater Manchester Mental Health NHS Foundation Trust along with older people and voluntary, community organisations identify that whilst many people live active lives and bring a valuable resource to the city, others have complex health and well-being needs requiring people to live in care homes.

Healthwatch Salford is a registered charity and exist to encourage and empower local people, especially those who are most marginalised or vulnerable, to have more control in their lives and to influence the organisations that affect them.

In everything they do Healthwatch Salford adhere to their core values; which are: integrity; responsiveness; passionate; empowering; and diversity. Healthwatch Salford consists of a chief operating officer, three engagement officers and one knowledge and information officer. Governance of Healthwatch Salford is conducted through the Board, made up of seven Non-Executive Directors who live, work or volunteer in Salford. Table 1 provides the overview of what Healthwatch Salford do.

### **Table 1 Overview of what Healthwatch Salford do**

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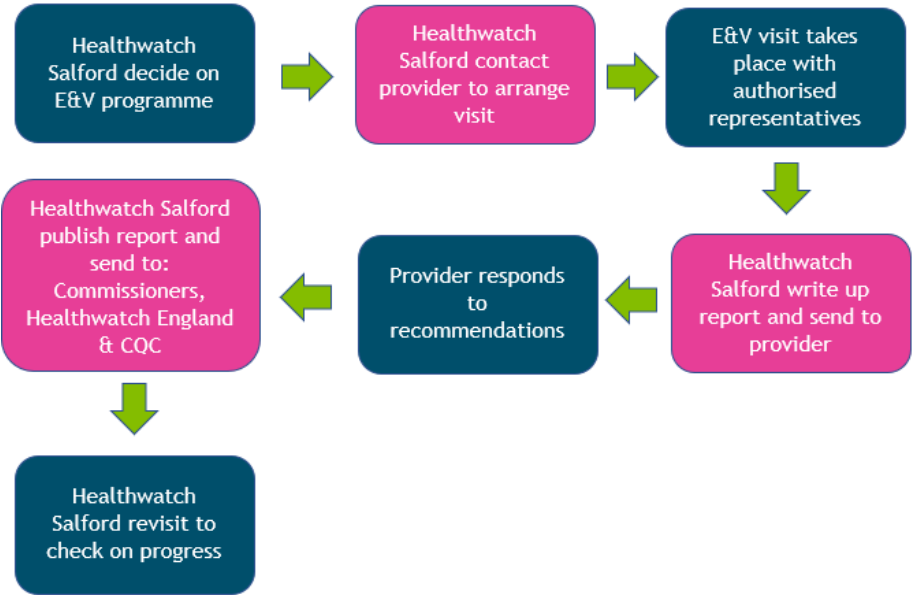
<b>Healthwatch Salford:</b>	
Provides people with information and support about local health and social care services	Influences how services are set up and commissioned by having a seat on the local Health and Wellbeing Board
Listens to the views and experiences of local people about the way health and social care services are commissioned and delivered	Passes information and recommendations to Healthwatch England and CQC
Uses views and experiences to improve the way services are designed and delivered	

**Enter and view from Healthwatch Salford Perspective**

Healthwatch Salford have statutory powers as set out under the Health and Social Care Act 2012 with part of these powers allowing them to enter and view any publicly funded health or care premises on an unannounced or announced basis, although most visits are pre-arranged.

Enter and View is one of the ways in which Healthwatch Salford gathers information about health and care services by gaining access to areas where health and social care services are being provided to collect the views of service users, their families, visitors and staff. The quick overview of the Enter and View process is provided in figure 1.

**Quick overview of the enter and view (E&V) process**



**Overview of Enter and View as a concept for helping care homes improve and meet the needs of the consumer**

Enter and View allows laypeople (trained and experienced engagement volunteers from the local community that are termed Authorised Representatives) to understand first-hand how services are delivered and experienced by the people that use them. Through entering health or social care premises and gaining the views of those using services a picture is drawn of what a good service looks like and more importantly feels like to the end user and how things might be done differently from a personal approach, rather than a clinical or service standpoint.

Service users and residents are often experts in their needs and care and involving them in this care is a principle of person-centred care. Knowing what is going well and what might be done better helps to improve care and make it easier for the care home staff meet needs and increase satisfaction levels of its residents. From Healthwatch Salford speaking to the people who use the services and the people who deliver the services a better picture is drawn of what good care looks and more importantly feels like. Feedback helps evidence that the practices of the home are meeting their residents needs and that the home is open to scrutiny and challenge.

### **Expectations if Healthwatch Salford undertake an Enter and View visit**

On arrival to the home there is an expectation that Healthwatch Salford is greeted by a senior staff member of whom is provided with a tour of the premises and granted free access to the communal areas. It is expected that the senior manager is on-hand throughout the duration of the visit and that all staff are aware of and cooperative with the process and are available for any questions that the Enter and View team might ask them.

Healthwatch Salford Enter and View team utilise an observational checklist to note environmental factors such as hygiene, accessibility and interactions between staff and residents. This checklist has been developed by Independent Age and Healthwatch Camden (2016).

Observations include:

- Interactions between staff and residents, including eye contact, tone of voice, referring to residents by name and consideration of choice and independence (dignity in care)
- Hygiene and cleanliness, including stains, odours and appearance
- Accessibility, layout and physical access, assistive technology, pictorial signage
- Communication and feedback, comments box, noticeboards, resident meetings, large print and signage

The typical questions that might be asked by the Enter and View team are based around the 8 'care home quality indicators developed by Independent Age and Healthwatch Camden (2016), a good care home will:

1. Have strong, visible management
2. Have staff with the time and skills to do their jobs
3. Have good knowledge of each individual resident and how their needs may be changing
4. Offer a varied programme of activities
5. Offer quality, choice and flexibility around food and mealtimes
6. Ensure residents can regularly see health professionals such as GPs, dentists, opticians...

7. Accommodate residents personal, cultural and lifestyle needs
8. Be an open environment where feedback is actively sought and used

Based around the 8 indicators Independent Age and Healthwatch Camden (2016) provide four surveys that can be used by Healthwatch Salford: residents survey, staff survey; family and friends survey; and management survey

### **Healthwatch Salford insight into their Enter and View programme for care homes**

Between August 2017 and March 2018 Healthwatch Salford conducted 16 Enter and View visits in care homes in Salford and in table 2 members of the Enter and View team provide their insight as to what impacts on the positive resident or consumer experience.

***Table 2 Enter and View team insight as to what impacts on the positive resident or consumer experience***

Effective, caring and responsive managers made all the difference, setting standards and demonstrating what good looks and feels like	Staffing levels needed to be managed and dignity in care actively demonstrated by senior carers to ensure that staff understood the difference between 'ask' and 'do' to its residents
Practices that actively valued and developed staff and fostered healthy teamworking and increased the chances of care homes retaining good, caring and experienced staff	Pictorial signage and accessible information should be used throughout the home and reviewed against the communication needs of residents and regular visitors to the care home such as family
Continuity of care and staff was important to residents	To promote engagement, satisfaction and independence, involve residents in the activities of the care home. Examples include meal times and decorating the home
The companionship of staff was valued by residents just as much as the care that was provided	

### **Recording the results of the Enter and View visit, feeding forward into the organization and nationally**

Healthwatch Salford analyse the data generated through conducting the Enter and View visit, collating the responses into a report with recommendations identified. Before publishing nationally through commissioning groups, Healthwatch England and CQC, the draft report is circulated via email to the care home senior management team/provider for comment and for a response to the recommendations made.

The feedback provided by Healthwatch Salford can be used by all care home employees including registered nurses, student nurses and Trainee Nurse Associates to critically examine the culture and care provided, prompting a review of areas previously ignored or underreported on. Through experience of conducting the reviews Healthwatch Salford have found that many care homes focus on areas of care and

safety, sometimes neglecting the softer and less noticeable areas of home life that are important to residents and staff. These areas are highlighted in table 3.

**Table 3 Areas of homelife that are important to residents in care homes in Salford**

How much residents are involved in the home and enabled to do things for themselves	Staff having enough time and the space to provide companionship to residents and just sit down and talk with them
Providing a varied programme of activities and social opportunities, especially around the involvement of volunteers to enhance a programme of activities and provide 1-2-1 social contact	Quiet spaces and soothing and comfy areas for residents to meet and sit, separate from and without the background noise of TVs
Accessibility, including dementia friendly environments, use of colour and pictorial signage	Management being visible and proactive within the home for staff and being known by name to residents
Religious and cultural needs of residents, including different foods, special holidays and things familiar to a resident with a different background or spoken language to English	

## Conclusion

The Enter and View process can support and evidence good practice, not just identify and recommend areas for improvement. Healthwatch Salford have found that the cooperative care home seems to get more out of the Enter and View process and are able to demonstrate to commissioners, residents and other consumers that they are open to scrutiny and challenge. Enter and View visits are not only prompted by patient feedback or CQC ratings, indeed, any provider can invite Healthwatch Salford into their care home and request an announced Enter and View visit. Care homes that have worked with Healthwatch Salford in the past with a CQC rating of ‘requires improvement’ or ‘inadequate’ have welcomed the Enter and View visit, seeing it as an opportunity to show the work they are doing to improve their rating and through resident and staff feedback that care is still being delivered to a good or improving standard.

Importantly, Healthwatch Salford report that many of the insights and ideas required small adjustments or changes but when implemented had great impact on residents and their wellbeing. This in turn increased the satisfaction levels of staff providing the care, making a happier and more caring home for everyone.

## Key Points

- The role of the nurse is crucial to delivering quality patient care in care homes in Salford
- The Healthwatch Salford Enter and View process can support and evidence good practice, not just identify and recommend areas for improvement
- The cooperative care homes get more out of the Enter and View process, demonstrating to commissioners, residents and families that they are open to scrutiny and challenge
- Do not wait for the CQC to visit before asking the curious questions around the expectations of a good care home: is it safe; effective; caring; responsive to people’s needs; and well led?

- Consistently engage with consumers of care homes including patients, carer's, families and communities, making it every day business to find out what matters to them

### CPD Reflective Questions

1. What is your definition of quality nursing care?
2. Share with your colleagues your vision for nursing in care homes considering the NMC Code
3. Reflect on the systems required to discuss the feedback provided by the Enter and View team and to implement any recommendations made
4. Provide examples of how you will involve residents in the day to day activities of the care home such as meal times

### References

Leigh J, Roberts D. Implications for operationalising the new education standards for nursing. Br J Nurs. 2017; 26(21):1197–1199. <https://doi.org/10.12968/bjon.2017.26.21.1197>

Leigh J, Roberts D. (2018) Critical exploration of the new NMC standards of proficiency for registered nurses, British Journal of Nursing, 27 (18): 1068-1072

Office for National Statistics (ONS 2018) Living longer - how our population is changing and why it matters: Overview of population ageing in the UK and some of the implications for the economy, public services, society and the individual

<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/ageing/articles/livinglongerhowourpopulationischangingandwhyitmatters/2018-08-13#introduction> (Accessed 12<sup>th</sup> December 2018)

Office for National Statistics (ONS 2017)

<https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/articles/overviewoftheukpopulation/july2017>

(Accessed 14th December 2018)

Nursing and Midwifery Council. Future nurse: standards of proficiency for registered nurses, London: NMC; 2018a. <https://tinyurl.com/yaln93xh> (accessed 15th December 2018)

Nursing and Midwifery Council. Realising professionalism: standards for education and training. Part 2: standards for student supervision and assessment. 2018b <https://tinyurl.com/y7kfynub> (accessed 15<sup>th</sup> December 2018)

Nursing and Midwifery Council (2018c) NMC Code, London, NMC

Salford Together: Support to Stay Health and Well (2018)

<https://extranet.who.int/agefriendlyworld/network/salford/> (Accessed 12th December 2018)