



**Hivewatch
Enter and View report
New Beginnings
8 December 2017**

Authorised representatives

Alison Head supported by Joanna Parker

Chris Butler supported by Dominic Box

Healthwatch South Gloucestershire

T: 01454 543 402

E: info@healthwatchsouthglos.co.uk

W: www.healthwatchsouthglos.co.uk

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1 Introduction

1.1 Details of visit

Details of visit:	
Service Address	New Beginnings Activity Centre Staple Hill Methodist Church Hall Staple Hill South Gloucestershire BS16 5HX
Service Provider	New Beginnings Office number 1 Upper Floor 2 Nelson Road Staple Hill South Gloucestershire BS16 5HX
Date and Time	8 December 2017 1.00pm - 2.30pm
Authorised Representatives	Alison Head supported by Joanna Parker Chris Butler supported by Dominic Box
Healthwatch Contact details	01454 543 402 info@healthwatchsouthglos.co.uk www.healthwatchsouthglos.co.uk

1.2 Acknowledgements

Healthwatch South Gloucestershire and The Hive authorised enter and view representatives wish to express their gratitude to the staff and participants who participated in conversations with us during the visit.



1.3 Purpose of the visit

Healthwatch South Gloucestershire and The Hive undertook a two hour afternoon enter and view visit to the New Beginnings Activity Centre, delivered from Staple Hill Methodist Church Hall.

New Beginnings Bristol Ltd is described as a friendly, community run activity centre that offers a range of support services and events to adults with learning disabilities. Their aim is to help people be as independent as possible, offering support, practical activities and social events to build confidence and achieve goals. New Beginnings has a dedicated activities room and a full timetable of events giving people the chance to make something to take home, to meet their friends and enjoy a cup of tea and a biscuit in a welcoming environment.

The purpose of the visit was to find out and understand how a person with a learning disability could access the services they need and identify the experience of care and support for people with a learning disability.

The enter and view visit to New Beginnings Activity Centre is part of an ongoing programme of work being implemented by Healthwatch South Gloucestershire and The Hive to understand the quality of the care experience for people with learning disabilities within local services. This programme of work has been called 'Hivewatch'.

1.4 How this links with Healthwatch South Gloucestershire's work plan for 2017-18

A key priority laid out in the Healthwatch South Gloucestershire work plan for 2017-18 is to engage with people with learning disabilities, and in partnership with The Hive, to undertake enter and view visits to health and care services across the district. Enter and view provides an ideal tool to identify the experiences and views of service provision by people with learning disabilities.

2 Methodology

2.1 Planning

A planning meeting was held by The Hive and Healthwatch South Gloucestershire. Training has been given to The Hive members to enable them to become authorised enter and view representatives. All enter and view volunteers have a DBS check and are given an identification badge to wear during the visit. Healthwatch volunteer enter and view representatives have been 'buddied up' with the trained



Hivewatch volunteers to assist them to observe health and care services in action, and to agree questions to use during enter and view visits.

2.2 How was practice observed?

On Friday 8 December 2017, four Healthwatch and Hivewatch authorised enter and view representatives visited the New Beginnings Activity Centre. Information was gathered from the Healthwatch and Hivewatch representatives' observations of staff interactions with the participants.

Observations were gathered by the Healthwatch and Hivewatch authorised representatives working in pairs. Conversations with staff and participants were semi-structured and underpinned by the use of a checklist template and list of prompt questions developed collaboratively by Healthwatch and Hivewatch volunteers.

The checklist covered areas to consider such as:

- Outside the building
- The entrance to the New Beginnings Activity Centre; outside and inside the building
- Inside the building
- About the service
- Activities
- Service user questions
- Implementation of the Accessible Information Standard

Observations and conversations were recorded during the enter and view visit.

2.3 How were findings recorded?

Notes were made by the Healthwatch authorised representative, who worked closely with each Hivewatch representative during the visit. Using these notes, the Healthwatch South Gloucestershire Volunteer Support Officer compiled the report. This report was then shared in draft form for all representatives to discuss and agree before the report was shared with service providers to agree any factual changes required.

2.4 About the service activities

There are music / bingo sessions held every Monday and Friday from 1.00pm to 3.30pm at a cost of £4.50 per session. Each Tuesday and Thursday from 10.00am to 12 noon, and on a Wednesday from 11.00am to 1.00pm there are sessions for Arts and Crafts, also held in the church hall as a cost of £4.50 per session. Every Tuesday and Thursday from 1.00pm - 3.00pm there are skittles and a drink session at the Red Lion pub at a cost of £3.00. Every Wednesday from 1.00pm - 3.00pm there is a game of darts in the King William pub at a cost of £3.00. There are also



discos held every month from 7.00pm - 9.30pm in The Chase Inn in Kingswood at a cost of £5.00 which includes a free raffle ticket.

3 Findings

Executive summary

Hivewatch volunteers felt there could be more involvement by service users in the activities that are provided.

Outside the building

The activity centre is run from Staple Hill Methodist Church, located on Staple Hill high street. There is only limited parking for the centre at the rear although there is on-street parking, which is time limited and therefore may be difficult for those with mobility issues to park near enough. There are several public car parks nearby which offer two hours limited parking and these are usually busy with shoppers. There are lots of bus stops in the area so it would be convenient for people who travel by bus. One man we spoke to said he had travelled from Redland on the bus for the session.

Although on a busy road, with parking on both sides of the road, there is a zebra crossing near to the church hall. There are no signs from the road or on the outside of the building saying where the centre is situated although the church is easy to identify among the buildings along the High Street. The paths were in good condition and there is a slope from the high street to the side of the church where the activity centre is. The doors into the centre may be a challenge as there are no easy access doors to the building for people that use a wheelchair or have other mobility issues.

Recommendation: to consider having a sign at the front of the building showing where the activity centre is and how to access it.

3.1 Inside the building

Inside the building

When inside the building there were no signs showing which room was being used for the activity centre that day and there are lots of other users of the building, for example there was a pre-school running on the same day. There were a number of notice boards showing information about other groups and activities at the church but there was nothing on display about the New Beginnings groups that meet there

on different days of the week and no information about opening times, the activities on offer or the cost of the session. There was one notice board put up by New Beginnings in the hall just for the session and it had a couple of notices on it, but these were in small print and difficult to read.

The activity centre was held in one large room on the ground floor at the rear of the church. The hall was clean and tidy and had no unpleasant smells. It was all on one level and there were no lifts or stairs to navigate so it was fully accessible. The hall was a big space with tables laid out in a horseshoe shape. The area was easily accessible.

The activity centre takes place in a shared space and there were lots of notice boards on the wall showing information and notices which were not relevant to the New Beginnings activity centre.

The condition of the building was good, it was clean and tidy.

The room was big enough to deal with the number of people attending and the activity.

There were no signs showing where the toilets were. There were three ladies toilets, including one for use by disabled people. These toilets were obviously also used by the pre-school as there were stools to enable children to access the wash basins. There did not appear to be paper towels, or a hand drier available and an ordinary terry towel was draped across the radiator.

The four fire exits were clearly display and were not obstructed. The evacuation procedure was explained to us on arrival and as visitors we were asked to sign in. There was a notice in the hall with the name of the Fire Marshall and First Aider for the day and a first aid box was visible.

There was no information about the activity session on display including opening times, activities on offer or the cost of the session.

Recommendations: to consider having

- a sign inside the main entrance showing where the activity centre is
- a notice about the opening times, activities on offer and cost
- a sign showing where the toilets are

3.2 About the service

We saw people arriving at the activity centre; they were greeted by friendly staff, some of whom had festive elf hats on, who then showed them to a table where most people sat eating their lunch. Service users brought their own lunch as there was nowhere to buy and food or drinks in the centre. We were informed by those attending that half-way through the session there would be a break when everyone was able to have a hot drink and a biscuit. Some people were sat on their own, others were sat together talking. We joined a table where most attendees



appeared to be enjoying themselves and had obviously attended before as they appeared to know the 'routine' and each other.

As we attended on a Friday the activity taking place was a sing along / move to the music session and while people were waiting for the session to begin, or whilst eating, music was being played in the background and staff/volunteers were giving out musical instruments. This was followed by picture bingo with prizes. The people attending looked happy and relaxed.

Most service users had brought their own food and drinks as there was nowhere to buy any food or drinks in the centre. We were informed by those attending that they could have a tea or coffee and a biscuit but only at break time.

There was one noticeboard being used by the activity centre and it had a couple of notices one of which was about the New Beginnings disco; this sign was in small print and difficult to read. Another poster was displayed on the wall it looked like this was something to do with an elf activity, which was a theme for the day, but it was not clear what this was for.

Recommendations to consider:

- allowing service users the choice of when they can have a drink whether included in the price or at an extra cost; although it is accepted that this may come down to staffing levels and/or limitations of facilities.
- producing notices in Easy Read format so they can be clearly read and easily understood. This means using larger font, black writing on yellow or white paper, clear language with the use of pictures to illustrate the meaning of the text.

3.3 Activities

During our visit when the music activity started some of the service users joined in immediately, others joined in after they had finished eating, most of the others were encouraged by staff to get up and dance to the music, to shake musical instruments and to sing.

Everyone taking part appeared to be having fun and enjoying themselves. There were a few people who did not take part but they seemed to be happy watching.

After about 45minutes of dancing the music was stopped and one by one everyone was asked if they wanted a drink and biscuit the staff brought drinks to the service users who took their seats. Biscuits were offered to everyone including gluten free options.

After the break staff went around the room collecting money from service users followed shortly after by a game of picture bingo. It was noted that the pictures used in this game were very small and difficult to see by service users. It was pointed out that this bingo set was an Elf themed set which was not the usual size used for picture bingo sessions.



There were three members of staff and one other helper (who just helped at the music session) and there can be between 12 and 25 people attending each session.

3.4 Talking to service users

We asked the same questions of six different service users. The questions together with the answers are listed as follows:

1) Can you decide when you come here?

Service user 1 - I come every Tuesday and Friday

Service user 2 - I'm told when I can come

Service user 3 - Tuesdays, I've been doing it for so long

Service user 4 - No. We need to ask the staff if we want to go somewhere different

Service user 5 - Yes different days

Service user 6 - Yes two times a week

Recommendation:

Without further explanation it is unclear exactly why two service users feel like they could not decide when to attend the activity centre or how this can be changed.

2) Can you come and go when you want?

Service user 1 - Yes

Service user 2 - Yes - but I need to say when I want to leave

Service user 3 - Not really, we are here to do Bingo and singing so we need to stay and not go out

Service user 4 - Yes, I just need to tell staff when I leave

Service user 5 - I need to tell people if I leave so they know if there is a fire

Service user 6 - Tell staff when we leave

3) How do you get here?

Service user 1 - Walk here

Service user 2 - Walk

Service user 3 - Walk or bus

Service user 4 - Walk

Service user 5 - Walk

Service user 6 - Walk

4) What do you like to do when you are here?

Service user 1 - Singing

Service user 2 - Dancing

Service user 3 - Singing

Service user 4 - Singing

Service user 5 - Dancing and singing

Service user 6 - Bingo

5) Do you get on with other people when you are here?

Service user 1 - Yes

Service user 2 - Yes

Service user 3 - Yes

Service user 4 - Yes

Service user 5 - Yes

Service user 6 - Yes

6) Can you decide what to do when you are here?

Service user 1 - We can only sing and play bingo today

Service user 2 - Yes, music

Service user 3 - The staff say what we can and can't do

Service user 4 - Yes

Service user 5 - Yes

Service user 6 - I come here on Tuesdays, I don't decide; they say what I can do

Recommendation:

Consideration should be given to allow service users the choice of what they want to do when they attend the activity centre.

7) Can you decide what to eat and drink and when?

Service user 1 - I bring my own stuff

Service user 2 - They will make us a drink later

Service user 3 - I bring my own



Service user 4 - No, we all have to wait until break time

Service user 5 - You have to wait until break time to have a cup of tea

Service user 6 - I have a cup of tea at break

Recommendation:

As stated previously consideration should be given to allow service users the option of having a drink when they want rather than just at break time; although this may come down to staffing levels and limitations of facilities.

8) Who decides what activities take place?

Service user 1 - Not sure

Service user 2 - We all do the same thing

Service user 3 - The staff do

Service user 4 - The staff decide what we can do

Service user 5 - The staff say what things we can do

Service user 6 - I don't know

Recommendation:

Consideration to be given to regularly encouraging service users to make suggestions regarding what activities are available either by way of a suggestion box, Easy Read survey or other similar method.

9) What do you like most about this place?

Service user 1 - Meeting my friends

Service user 2 - Bingo

Service user 3 - I love bingo

Service user 4 - I like everything

Service user 5 - I like making new friends

Service user 6 - I've been coming here a long time

10) Is there anything you don't like about this place?

Service user 1 - No

Service user 2 - No

Service user 3 - No

Service user 4 - No

Service user 5 - I like everything

Service user 6 - No

3.5 Staff questions

We asked session leader Donna some questions as follows:

1) Do staff get trained how to support with people with learning disabilities?

Yes, all staff get training through New Beginnings

2) Are your leaflets and forms in Easy Read?

We don't really do forms as such and we don't have a lot of leaflets, but if we are asked we will put them in Easy Read.

Recommendation:

Consideration should be given to ensuring notices, letters, forms and leaflets are in Easy Read without service users having to ask. This means using larger font, black font on yellow or white paper, clear language with the use of pictures to illustrate the meaning of the text.

3) Can service users make suggestions for improvements?

Yes, if they have some changes they want us to make they can tell us.

Recommendation:

As previously stated, rather than waiting for service users to say what improvements they want (which can sometimes be difficult) consideration should be given to regularly asking service users what activities they want or improvements could be made.

4) How can service users complain?

We have a complaints form; they need to tell us what's wrong and then we will write it down on our form.

Recommendation:

Making a complaint about a service can be difficult for most people even more so for people with a learning disability. Consideration should be given to informing service users how they are able to complain without having to approach a member of staff, how the complaint will be dealt with etc.



5) What happens if service users don't want to do the planned activity?

People can always do what they want; we always have plenty of other things they can do.

Recommendation:

It did not appear from some of the conversations that Hivewatch had that service users were aware that this was the case. Therefore Staff to clarify to service users that other activities are available if they would prefer, particularly those people that do not take part.

4 Conclusion

Hivewatch and Healthwatch enter and view volunteers observed an activity enjoyed by those attending the session. It was obvious that many participants had been before and knew the routine of the session and the majority of participants we spoke to had enjoyed the singing session.

5 Recommendations

It is suggested that the New Beginnings Activity Centre considers:

- Having a sign at the front of the building showing where the activity centre is and how to access it.
- Having a sign inside the main entrance showing where the activity centre is.
- Having a notice about the opening times, activities on offer and cost.
- Having a sign showing where the toilets are.
- Allowing service users the choice of when they can have a drink whether included in the price or at an extra cost; although it is accepted that this may come down to staffing levels and/or limitations of facilities.
- Producing notices in Easy Read format so they can be clearly read and easily understood. This means using larger font, black writing on yellow or white paper, clear language with the use of pictures to illustrate the meaning of the text.



- Without further explanation it is unclear exactly why two service users feel like they could not decide when to attend the activity centre or how this can be changed.
- Consideration should be given to allow service users the choice of what they want to do when they attend the activity centre. It did not appear from some of the conversations that Hivewatch had, that service users were aware that this was the case. Therefore staff should clarify to service users that other activities are available if they would prefer, particularly for those people that do not take part.
- Consideration should be given to allow service users the option of having a drink when they want rather than just at break time; although this may come down to staffing levels and limitations of facilities.
- Consideration to be given to regularly encouraging service users to make suggestions regarding what activities are available either by way of a suggestion box, Easy Read survey or other similar method.
- Consideration should be given to ensuring notices, letters, forms and leaflets are in Easy Read without service users having to ask. This means using larger font, black font on yellow or white paper, clear language with the use of pictures to illustrate the meaning of the text.
- Consideration should be given to ask service users regularly what improvements could be made.
- Making a complaint about a service can be difficult for most people even more so for people with a learning disability. Consideration should be given to informing service users how they are able to complain without having to approach a member of staff, how the complaint will be dealt with etc.

Disclaimer

- This report relates only to a specific visit on 8 December 2017.
- This report is not representative of all staff and patients (only those who contributed within the restricted time available.)



6 Appendices

6.1 What is enter and view?

Local Healthwatch are corporate bodies and within the contractual arrangements made with their local authority must carry out particular activities. A lot of the legislative requirements are based on these activities which include¹:

- promoting and supporting the involvement of local people in the commissioning, the provision and scrutiny of local care services;
- enabling local people to monitor the standard of provision of local care services and whether and how local care services could and ought to be improved;
- obtaining the views of local people regarding their needs for, and experiences of, local care services and importantly to make these views known to providers;
- making reports and recommendations about how local care services could or ought to be improved. These should be directed to commissioners and providers of care services, and people responsible for managing or scrutinising local care services and shared with Healthwatch England;
- providing advice and information about access to local care services so choices can be made about local care services;
- formulating views on the standard of provision and whether and how the local care services could and ought to be improved; and sharing these views with Healthwatch England;
- making recommendations to Healthwatch England to advise the Care Quality Commission to conduct special reviews or investigations (or, where the circumstances justify doing so, making such recommendations direct to the CQC); and to make recommendations to Healthwatch England to publish reports about particular issues;
- providing Healthwatch England with the intelligence and insight it needs to enable it to perform effectively.

¹ Section 221(2) of The Local Government and Public Involvement in Health Act 2007



Each Local Healthwatch has an additional power to enter and view providers² so matters relating to health and social care services can be observed. These powers do not extend to enter and view of services relating to local authorities' social services functions for people under the age of 18.

In order to enable a local Healthwatch to gather the information it needs about services, there are times when it is appropriate for Healthwatch staff and volunteers to see and hear for themselves how those services are provided.

That is why there are duties on certain commissioners and providers of health and social care services (with some exceptions) to allow authorised Healthwatch representatives to enter premises that service providers own or control to observe the nature and quality of those services. Healthwatch enter and view visits are not part of a formal inspection process neither are they any form of audit. Rather, they are a way for local Healthwatch to gain a better understanding of local health and social care services by seeing them in operation.

Organisations must allow an authorised representative to enter and view and observe activities on premises controlled by the provider as long as this does not affect the provision of care or the privacy and dignity of people using services.^{4 5} Providers do not have to allow entry to parts of a care home which are not communal areas or allow entry to premises if their work on the premises relates to children's social services.

Each local Healthwatch will publish a list of individuals who are authorised representatives; and provided each authorised representative with written evidence of their authorisation.

Healthwatch enter and view representatives are not required to have any prior in-depth knowledge about a service before they enter and view it. Their role is to observe the service, talk to service users, visitors and staff (if appropriate), and make comments and recommendations based on their subjective observations and impressions in the form of a report. The enter and view report aims to outline what volunteers saw and make suitable suggestions for improvement to the service

² The Local Authorities (Public Health Functions and entry to Premises by Local Healthwatch Representatives) Regulations 2013. (18 February 2013).

³ The arrangements to be made by Relevant Bodies in Respect of Local Healthwatch Regulations 2013." (28 March 2013).

⁴ The Local Authorities (Public Health Functions and entry to Premises by Local Healthwatch Representatives) Regulations 2013. (18 February 2013).

⁵ The arrangements to be made by Relevant Bodies in Respect of Local Healthwatch Regulations 2013." (28 March 2013).



concerned. The report may also make recommendations for commissioners, regulators or for Healthwatch to explore particular issues in more detail.

Unless stated otherwise, the visits are not designed to pursue the rectification of issues previously identified by other regulatory agencies. Any serious issues that are identified during a Healthwatch enter and view visit are referred to the service provider and appropriate regulatory agencies for their rectification.

The enter and view visits are triggered exclusively by feedback from the public unless stated otherwise.

In the context of the duty to allow entry, the organisations or persons concerned are:

- NHS Trusts, NHS Foundation Trusts
- Primary Care providers
- 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 Clinical Commissioning Groups to provide care services.

6.2 Enter and view aim and objectives

The aim and objectives of enter and view visits:

Aim

To find out about and understand how a person with a learning disability could easily access activities.

Objectives

- To undertake an announced enter and view visits with Healthwatch authorised representatives buddying a Hive trained volunteer.
- To visit for a minimum of two hours.
- To have a minimum of three pairs of authorised representatives visiting, to ensure that as many staff and patients who wish to speak to Healthwatch South Gloucestershire have the opportunity to do so.



- To observe the overall service provided for service users.
- To produce a report of the findings from the observations and conversations and a report in easy read for people with learning disabilities.
- To make comments on the findings and make recommendations for change if appropriate.
- To share the final report with the New Beginnings Activity Centre and appropriate organisations and agencies such as South Gloucestershire Local Authority and the Care Quality Commission.

6.3 Enter and View Methodology

A.1 The Healthwatch South Gloucestershire (HWSG) enter and view (E and V) planning group, comprising all HWSG E and V authorised representative volunteers, have discussed, agreed, and tested an approach to collect relevant information. The process was developed to enable a structured approach to gathering information but without being so prescriptive that it inhibits the E and V authorised representatives from responding to what they see and hear and thus pursue further information if necessary.

A.2 An aide-memoire observation record sheet has been drawn up and piloted and refined, as has a list of prompt questions.

A.3 Some of the prompt questions, which were found to be helpful if there was a hiatus in the flow of a conversation with a patient, included open questions.

A.4 The New Beginnings Activity Centre was informed in advance by telephone and letter of the E and V visits, and dates and times are agreed. Posters about HWSG were sent to the services in advance so that these can be displayed on notice boards and used to inform patients and members of staff about the role of HWSG, the E and V visits, and to encourage staff to be present during the visits.

A.5 Each visit takes the form of a series of informal conversations with service users and staff. Enter and view authorised representatives also spend time observing the service provided and the environment, and considering what impact these would have on service users with a learning disability. The views of some of the members of staff are also sought.

A.6 All the authorised E and V volunteers including the Hivewatch volunteers have received the initial Healthwatch England approved E and V training and some subsequent training sessions in areas such Equality and Diversity and Safeguarding. Working in pairs, they are able to structure their questioning to ensure depth, and



to converse within the specific abilities and needs of those to whom they were speaking. Each pair of E and V volunteers introduce themselves to patients and explain the purpose of their visit. Some patients are also given leaflets about HWSG which includes information about 'how to tell your story' in case any of them wish to send HWSG further information, or send it anonymously.

A.7 The data collected are the E and V representative volunteers' subjective observations and notes from conversations with patients and members of staff. Observations are gathered by all the E and V representatives, are recorded contemporaneously and then collated afterwards and used to inform the report. The conversations are semi-structured, using the template and prompt questions. The notes taken during these conversations were collated and also used to inform the report. A quick debrief session for the E and V volunteers is held on site after each E and V visit and any learning, issues, or concerns taken forward to inform the next visit, and a final 'wash-up' session is held separately.

