



# Enter and View visit to Aspire Respite Services

August 2025

Your  
**healthwatch**  
Leeds



## If you need this report in another format, please contact Healthwatch Leeds.

Examples of other formats are large print, plain text documents, easy-read, audio, and other languages such as British Sign Language.

# Contents

<b>Summary</b>	<b>4</b>	<b>Our recommendations</b>	<b>28</b>
Introduction	<b>4</b>	Good practice to maintain:	<b>28</b>
Key findings	<b>5</b>	Areas for improvement:	<b>28</b>
Key recommendations	<b>7</b>	<b>Service provider response</b>	<b>30</b>
<b>Background</b>	<b>8</b>	<b>Next steps</b>	<b>30</b>
<b>Why we did it</b>	<b>9</b>	<b>Thank you</b>	<b>31</b>
<b>What we did</b>	<b>9</b>	<b>References</b>	<b>31</b>
<b>What we found</b>	<b>11</b>	<b>Appendices</b>	<b>32</b>
1. Observations	<b>11</b>	Appendix 1 – What is Enter and View?	<b>32</b>
2. People’s views of how the service has changed over the last 12 months.	<b>12</b>	Appendix 2 – Accessible Information Standard	<b>34</b>
3. Accessible Information Standard	<b>13</b>		
4. Safety	<b>15</b>		
5. Care and support	<b>17</b>		
6. Food and nutrition	<b>21</b>		
7. Activities	<b>23</b>		
8. Involvement and feedback	<b>25</b>		



# Summary

## Introduction

Healthwatch Leeds carried out announced Enter and View visits to Aspire Respite Care services. This was part of a planned series of visits to Aspire's services, prompted by feedback we received from Leeds City Council.

Aspire provides respite care services for people with learning disabilities and refers to the people they provide care for as customers. These services provide short-term residential care, giving family members and carers temporary relief, while ensuring customers receive appropriate support. Both emergency and planned respite care options are available.

Between 15 July 2025 and 12 August 2025, we visited:

- Scott Hall Emergency and Planned Care.
- Raynel.
- Farfield.
- Crossheath Planned Respite Services.

During the visits, we spoke to customers and staff. We sent out paper surveys to relatives and carers and online surveys to staff who were not working on the visit day.

## Key findings

These are the key findings from both the Enter and View visits and online survey responses:

1. All the accommodations we visited were mostly very clean. Clear pictorial signage was displayed on the doors of the kitchen, bathrooms and the customers' bedrooms. Customers looked well cared for and said the best part of respite care was the staff and activities. Relatives, carers and staff said that the best thing was seeing the customers develop more independence.
2. In the last year, most relatives and customers have said that the service has remained consistently good. Half of the staff who responded feel the service has worsened due to overreliance on agency workers, a decline in the quality of training, and high staff turnover.
3. Aspire respite care services adhere to the Accessible Information Standard (Appendix 2).

## Safety

4. Overall, customers, relatives and carers, and staff agreed that respite care provides a safe environment. Staff said they are trained to respond to safeguarding concerns. However, a few relatives raised safety concerns, particularly regarding medication management and the supervision of customers outside the accommodation. Several staff members also highlighted the challenges in maintaining a safe environment, discussing insufficient training and staffing shortages as key barriers.



## Care and Support

5. Customers and their relatives agreed that the staff are kind, respectful, and help customers understand things. Most staff felt confident that they could meet customers' needs and ensure they felt respected. However, some customers and staff raised concerns that agency staff were not familiar with individual customers and their specific needs, resulting in inappropriate or insufficient support.

## Food and Nutrition

6. Customers, relatives, and staff agreed that customers have a choice of meals. Those with specific dietary requirements are appropriately catered for.

## Activities

7. Many customers reported enjoying the activities provided. However, as many customers also attend day centres, they often feel too tired to participate in additional activities upon returning to respite care. Staff make an effort to accommodate those who still wish to participate in activities or go out. Both staff and family members have told us that a wider range of activities could be made available if staffing levels were increased.

## Involvement and Feedback

8. Most customers and relatives said they are involved in care decisions and the development of care plans. Staff said that care plans are reviewed every six months or annually with relatives and customers.

9. Most customers said they would speak to staff if something were wrong; these concerns are often resolved well. However, some relatives of Crossheath, Farfield, and Scott Hall Respite Care said there is limited communication after raising concerns.
10. The key factors that hinder staff from providing good care are varying levels of agency staff ability, staff shortages, and feeling undervalued.

## Key recommendations

### Good practices to maintain

1. Ensuring cleanliness, displaying pictorial signage in accommodation, and adhering to the Accessible Information Standard.
2. Offering a variety of meal options and accommodating customers' dietary requirements.
3. Reviewing and updating care plans regularly with customers and relatives.

### Areas for improvement

4. To review and develop a more effective induction programme for agency staff.
5. Consider increasing staffing levels during shifts.
6. Review and improve staff training programmes
7. Strengthen medication management
8. Improve communication with relatives and carers.
9. Consider organising team building and wellbeing activities.

Detailed findings are presented in the rest of the report, and the complete list of recommendations can be found on page 28.





## Background

Healthwatch Leeds is an independent organisation, committed to listening to people's experiences of health and care services and using their views to help services improve.

Aspire Respite Service provides respite care for people with learning disabilities. It provides temporary relief for carers by giving short-term care to the person with learning disabilities.

Planned care gives family carers a prearranged break from their caring role and gives service users a new experience.

The emergency respite service provides a place for people to stay and access support when their needs change unexpectedly or there is an emergency need for care.

Scott Hall provides both planned and emergency care. Raynel, Farfield and Crossheath all provide planned care.

## Why we did it

As part of Healthwatch’s role, we have a statutory right to Enter and View publicly funded NHS and adult social care services, in order to get the views of people using their services and their relatives or carers. The visit to this service was part of a planned series of visits to Aspire services and had been prompted by the feedback we had received from Leeds City Council. This includes their respite care services.



## What we did

These visits were announced Enter and View visits. We specified a two-week period during which the service was informed one day in advance of the visit.

The visits took place at:

- Scott Hall Emergency Care Service on 15 July 2025 from 2:30 pm to 4:00 pm.
- Scott Hall Planned Service on 15 July 2025 from 4:00 pm to 5:30 pm.
- Raynel on 30 July 2025 from 3:30 pm to 5:30 pm.
- Farfield on 5 August 2025 from 3:30 pm to 5:30 pm.
- Crossheath on 12 August 2025 from 3:30 pm to 5:30 pm.



A survey was sent out to relatives, friends and staff. The staff received the survey by an online survey link or spoke to us on the day. Relatives and friends received a pack by post, prepared by Healthwatch Leeds and sent out by Aspire. Relatives, friends and staff were given until 20 August 2025 to respond to the survey.

Both surveys were publicised on posters with Quick Response (QR) codes and links, which were sent to the service before the visit.

A team of between three and five volunteers and at least one Healthwatch Leeds member of staff carried out the visits, all of whom are authorised Enter and View representatives. On the day of the visits, we spoke to customers, members of staff, the service manager, and the area manager.

The survey and observations focused on the following areas:

- Safety
- Care and support
- Food and nutrition
- Activities
- Involvement and feedback

We received a total of 73 survey responses:

- 14 from customers
- 47 from relatives or friends
- 13 from staff

# What we found

## 1. Observations

All customers of Aspire Respite Care looked happy, well cared for, clean and dressed. The services we visited were clean, tidy, and neutral-smelling.

Some had a very homely feel; others were purpose-built buildings. Crossheath and Raynel had well-maintained gardens. Most of the services we visited had disabled facilities, such as a toilet, shower and bath, some with a chair lift and hoist for customers with complex needs, such as a mobility impairment.



All services had pictures and dementia-friendly signage throughout, for example, on bedroom doors and kitchen cupboards.

## Customers

We asked customers what the best thing about respite care was. The most popular answers from customers were about the staff, the activities, and their happiness in respite care. Other things included the food, friends and the garden. However, some customers commented that they missed home and wanted to go home.





## 2. People's views of how the service has changed over the last 12 months.

### Customers

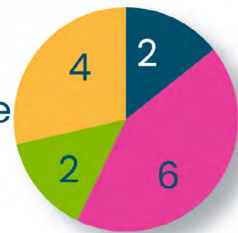
**In the last year, has the service improved, stayed the same, or got worse?**

■ Improved

■ Stayed the same

■ Got worse

■ Not sure



In the last year, 43% of customers felt the service had stayed the same, 14% said it had improved, and similarly 14% said it had worsened.

### Relatives and carers

Relatives and carers said the biggest benefit is that it gives customers a chance to socialise with other customers and staff. A lot of families said the respite care provides them with a much-needed break and helps improve the customer's independence.

### Staff

The staff really value their contribution to customers' independence and giving families a break. Staff highly regarded their person-centred care approach. They gave good feedback about effective training programmes and new management.



## Relatives and carers

**In the last year, has the service improved, stayed the same, or got worse?**



70% said it improved or stayed the same. Most relatives felt the service had stayed consistently good.

## Staff

**In the last year, has the service improved, stayed the same, or got worse?**



A third of staff felt the service worsened. They said this is due to a reliance on agency staff, a decreased quality of training programmes, and a lack of continuity. For example, changes in management and high staff turnover. However, staff said new management is helping to improve the service.

## 3. Accessible Information Standard

The Accessible Information Standard (AIS) is a set of legal requirements (since 2016) that all NHS and publicly funded social care services in England must follow to make sure that people with a disability, impairment or sensory loss can get information in a way that they can understand, and they receive the communication support they need.



During our visits, we found that Aspire Respite Care Services adhered to the AIS (see Appendix 2) and met the needs of the customers present at the time of our visit. They ask if an individual has communication or information support needs and record these in their support plan, both on paper and electronically. These support plans are created with the customer and their family to ensure the customer's needs are met.

The manager showed us an example during our visit. A risk assessment was written in easy-read with a customer. This helped the customer to understand what would happen if they self-harm and how they would like staff to respond.

Support plans are shared during staff induction and talked through at handover times to help staff understand how to support customers in a way that works for them.

Aspire Respite Care Services shares communication needs with other health professionals when needed. The Care Learning Disability Team is involved in reviewing the support plan to keep it up to date and focused on the person's needs. Customers have health passports they can take to appointments, so other professionals can understand their needs and provide appropriate support.

Another example is that pictorial signage was used in all respite care services to help customers to find their way around the service and locate items.

## Customers

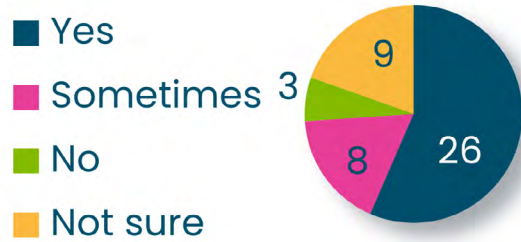
**Do staff help support in understanding things?**



Staff were praised for using visual aids to communicate with non-verbal customers and for helping them understand daily tasks such as cooking, budgeting, and providing support with reading.

## Relatives and carers

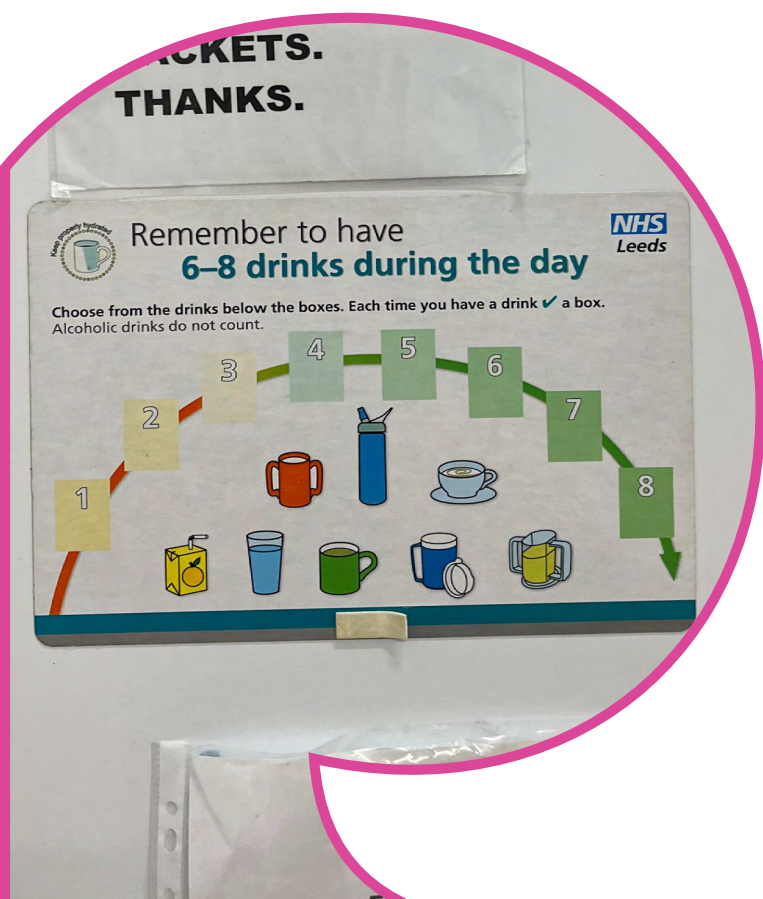
**Do staff help support in understanding things?**



Just over half of the friends and family said that the staff help customers understand things well.

Relatives described staff as patient, friendly and sensitive in their approach.

Relatives also emphasised the importance of using visual aids as a standard method of communication, particularly for non-verbal customers. They recommend that this practice be consistently applied across the service.

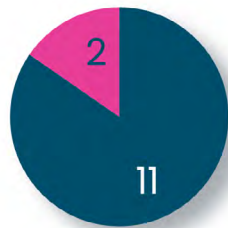


# 4.Safety

## Customers

**Do you feel this service is a safe environment?**

- Yes
- Sometimes
- No
- Not sure



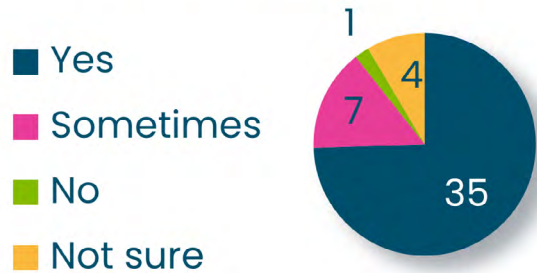
79% of customers said they felt the service is safe. Most customers said they felt safe due to the staff.

One customer in Scott Hall Respite Care said they feel safe as they have a key to lock their bedroom door. Another customer said that they have been bullied in a group chat, but it was being dealt with, and they are waiting to know the outcome.

During the visit to Raynel Respite Care, one customer was having an epileptic seizure. Staff were tending to them, keeping them in a room to respect their dignity.

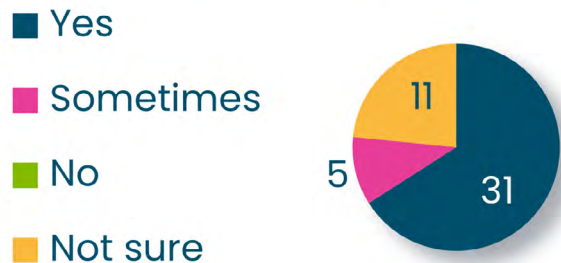
## Relatives and carers

**Do you feel this service is a safe environment?**



74% of relatives and carers agreed that the service does provide a safe and secure environment. There were many positive comments, such as the staff are caring and good at dealing with problems.

**Do you feel staff are trained to respond to safeguarding concerns effectively?**



Two thirds of relatives and carers said they believe the staff are well-trained to handle safeguarding concerns.

### Have you felt concerned for your friend or relative’s safety?



59% also shared that they haven’t had any worries about serious incidents affecting the customers’ safety.

However, 16 people said they have had some concerns. These concerns included issues with medication, such as overdoses, missed medication, medication being given at the wrong time, the wrong type of medication being administered and staff not being properly trained to administer medication safely.

Several relatives and carers also reported that customers have been left alone in places such as A&E and in a sports centre reception.

Others were worried about frequent staffing changes and the use of agency staff, which can lead to staff members not knowing individual customer needs. For example, one customer at Raynel is coeliac and was allowed to purchase food that was not suitable for their dietary needs.

A relative also raised concerns that the customer had access to kitchen knives at Raynel, which was worrying, given their history of self-harm. Both issues have since been identified and addressed by the service managers.

### Staff

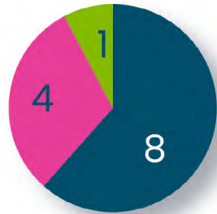
#### Do you receive adequate training to handle safeguarding concerns?



92% of staff reported receiving adequate training to manage safeguarding concerns.

### Do you feel the service provides a safe and secure environment?

- Yes
- Sometimes
- No
- Not sure



61% felt the service provides a safe and secure environment. The key factors contributing to this include staff training, access to an on-call manager, regular health and safety checks and up-to-date safeguarding training. However, some staff noted they can only sometimes maintain a safe environment. They talked about challenges such as insufficient training to support customers with challenging behaviours and complex mental health needs, and staffing shortages.

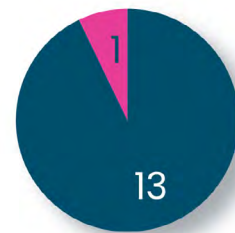


## 5. Care and support

### Customers

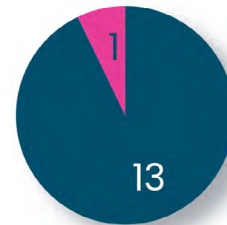
#### Are the staff kind and respectful?

- Yes
- Sometimes
- No
- Not sure



#### Do staff look after you well?

- Yes
- Sometimes
- No
- Not sure



93% of customers agreed that the staff are kind and supportive.

One customer at Scott Hall commented that staff provided one-to-one care and a call button to use for help after a fall.

Other customers made positive comments such as “I like the staff” and “they are kind to me”. However, one customer expressed concern that agency staff do not know how to use an oven, and they feel they have to “explain everything”. This customer also felt unsafe when out with an agency staff member who was frequently on their phone.

**Do staff meet needs relating to race, gender and religion?**



Customers generally felt that staff understood their needs related to race, gender, and religion, such as providing vegetarian or halal food.

**Relatives and carers**

**Are the staff kind and respectful?**



71% of relatives and carers said that staff treat the customers with respect. For example, staff respect customers’ preferences, support them in communicating their needs and hold annual review meetings.

**Do staff meet needs relating to race, gender and religion?**

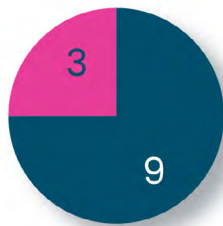


69% also agreed that the customers’ needs related to race, gender and religion are being met.

## Staff

**Do you feel you can meet the needs of customers, including those about race, gender and religion?**

- Yes
- Sometimes
- No
- Not sure



75% of staff said they feel they can meet customers’ needs, including those related to race, religion, and gender, because they have individual care plans. However, one staff member mentioned they would like training on transgender awareness and the use of pronouns. Another mentioned they need more staff to meet customer needs, especially for customers who use wheelchairs.

During the visit to Scott Hall, the manager provided an example of how they have been able to help a customer become healthier. One customer had been overweight and unable to leave their bed before attending the emergency respite service.

After joining the respite service, they lost 10 stone. Staff supported and encouraged them to move more, such as taking daily walks down the corridor. This made a big difference to their health and wellbeing.

The manager was asked how they handle a non-verbal customer who indicated they did not want personal care, even though the family wanted it. She responded that they encourage the customer and agree on certain steps, but never force them to do anything, as it is important to respect the customer’s wishes.

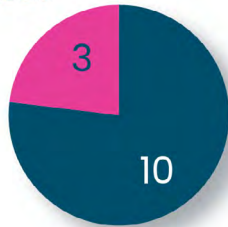
Staff were very enthusiastic in sharing how they ensure residents feel respected and listened to. These examples include food and activity choices, as well as catering to dietary requirements. Staff are trained to read body language and facial expressions, which is particularly useful when communicating with nonverbal customers.

# 6. Food and nutrition

## Customers

**Do customers have choices about their meals?**

- Yes
- Sometimes
- No
- Not sure

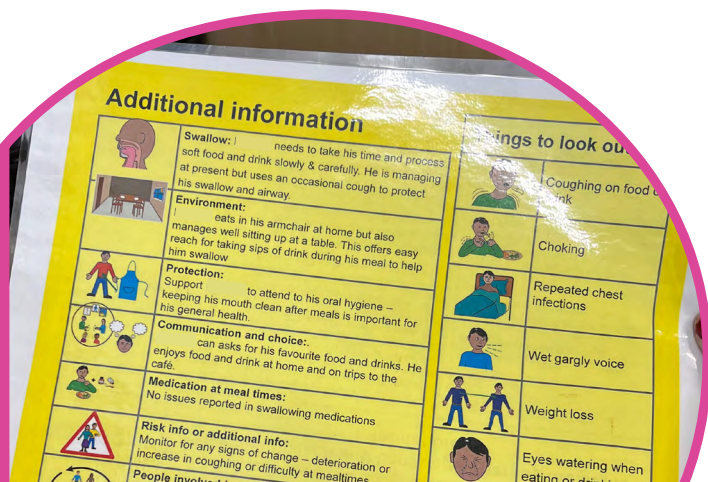


Most customers said they get to choose what they eat and drink.

One customer at Scott Hall Respite Care was diabetic and staff help them with their diet, through a chart which was clearly displayed on the fridge with diet recommendations and portion sizes. They worked with the staff to create a food chart outlining what to eat and what to avoid for a customer with diabetes.

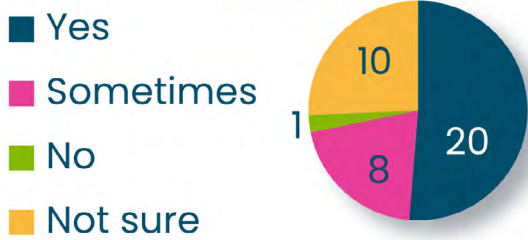


In Scott Hall Respite Care, we observed easy-read guides that provide staff with information on thickened fluids and indicators that a customer is having difficulty swallowing. These help staff to care for a customer's health needs and recognise when they are unwell.



## Relatives and carers

**Do customers have choices about their meals?**



Just over half of the friends and family respondents said that customers always get to choose their meals and drinks. Relatives and carers said customers’ likes and dislikes are recorded in their care plans.

Relatives said customers and staff decide on meals together, customers help in the kitchen and with shopping for ingredients. However, at Raynel Respite Care, one relative said the customer often misses supper time because he is in his room and is then only offered a bag of crisps. Another said the customer’s dietary requirements are not always adhered to, depending on which staff are on shift.

## Staff

**Do customers have choices about their meals?**



All staff said customers have a choice of meals. Staff at Crossheath Respite Care told us that each person has a personalised menu. Staff in Raynel Respite Care have meetings with customers to discuss their preferences, and customers cook their meals with staff.

	BREAKFAST	LUNCH	DINNER	SUPPER
	Tea, Coffee or juice with cereal or toast.	Customer choice or Day Centre	chicken nuggets chips	Toast/Biscuit/ Fruit/Yoghurt
	Tea, Coffee or juice with cereal or toast.	Customer choice or Day Centre	stir fry	Toast/Biscuit/ Fruit/Yoghurt
SUN	Tea, Coffee or juice with cereal or toast.	Customer choice or Day Centre	chicken sunday roast	Toast/Biscuit/ Fruit/Yoghurt
MON	Tea, Coffee or juice with cereal or toast.	Customer choice or Day Centre	spg. Bolognaise with lamb chicken	Toast/Biscuit/ Fruit/Yoghurt
TUE	Tea, Coffee or juice with cereal or toast.	Customer choice or Day Centre	omelette chips	Toast/Biscuit/ Fruit/Yoghurt
WED	Tea, Coffee or juice with cereal or toast.	Customer choice or Day Centre	chicken curry / rice	Toast/Biscuit/ Fruit/Yoghurt
THU	Tea, Coffee or juice with cereal or toast.	Customer choice or Day Centre	Sausage & mash	Toast/Biscuit/ Fruit/Yoghurt

Room 1 – lamb hot pot in freezer

DRINKS & DRINKS AVAILABLE: FRESH FRUIT, BISCUITS AND TOAST, TEA, COFFEE, SOFT DRINKS, MILK.

DRINKS MUST BE READILY AVAILABLE AND OFFERED FREQUENTLY TO CUSTOMERS TO EXPRESS THAT THEY ARE THIRSTY OR HUNGRY

## 7. Activities

We were told respite care does not organise many activities as customers are often busy with activities at the day centres and are tired when they return. However, staff make an effort to accommodate those who still want to take part in activities or go out.

All three groups of respondents mentioned that activities in respite care depend on staffing.



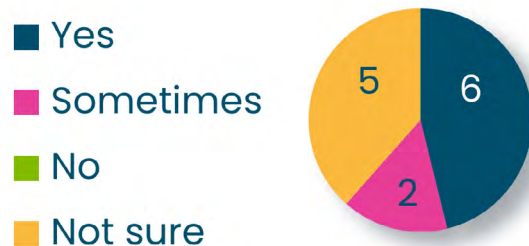
### Customers

**Do customers have access to enjoyable activities?**



Most customers said they enjoy activities such as jigsaws, listening to music, going to McDonald’s, watching movies, playing on the Xbox and days out.

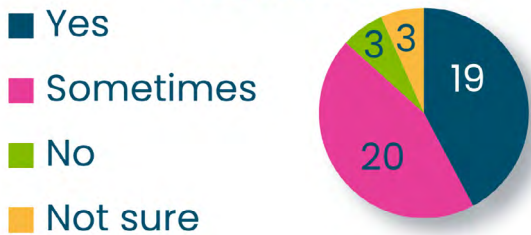
**Are you involved in your own care?**



Just over half of the customers said they get to help choose the activities. However, one customer said they cannot do the activities they want without a one-to-one carer.

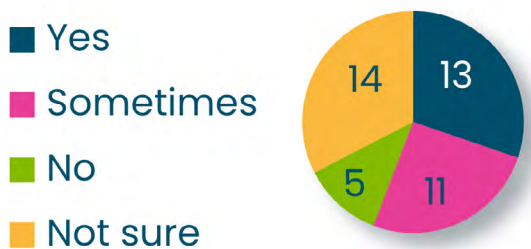
## Relatives and carers

### Do customers have access to enjoyable activities?



Around half of the family and friend respondents said customers have access to enjoyable activities.

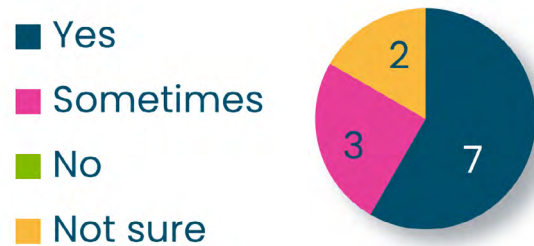
### Are customers involved in planning activities?



When asked whether customers are involved in planning activities, responses from relatives and carers were mixed. Most of the comments from relatives said they believe activities are limited due to services being understaffed.

## Staff

### Are customers involved in planning activities?



Just over half of the staff said customers are involved in planning activities. Most reported having meetings with customers to plan activities, especially for those not attending a day service. These activities include going out for a meal, going to the cinema, bowling, and playing board games.

However, at Fairfield Respite Care, a staff member said there are no communal activities and that customers have never been taken off the premises. Others said they try to organise activities, but it depends on staffing levels.

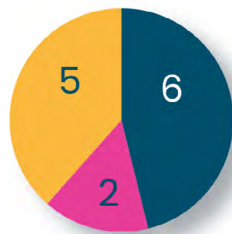


## 8. Involvement and feedback

### Customers

#### Are you involved in your own care?

- Yes
- Sometimes
- No
- Not sure



Half of the customers said they are involved in decisions about their care. For example, one customer in Crossheath Respite Care said they told the staff their needs when they first arrived.

#### Do you know how to report concerns?

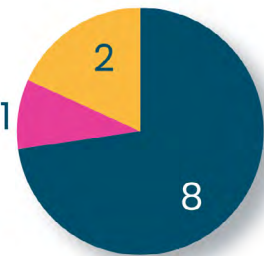
- Yes I know how
- No
- Not sure



Most customers said they would tell staff or family if something was wrong.

#### Were your concerns handled appropriately?

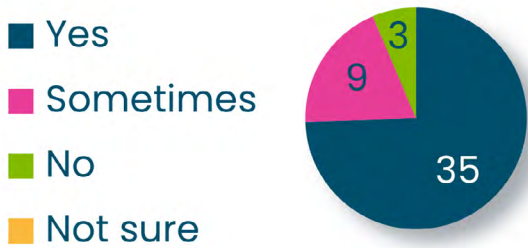
- yes it was sorted
- Sometimes
- No, it wasn't sorted
- Not sure if it was sorted



Over half of the customers said that issues have been resolved, usually by staff.

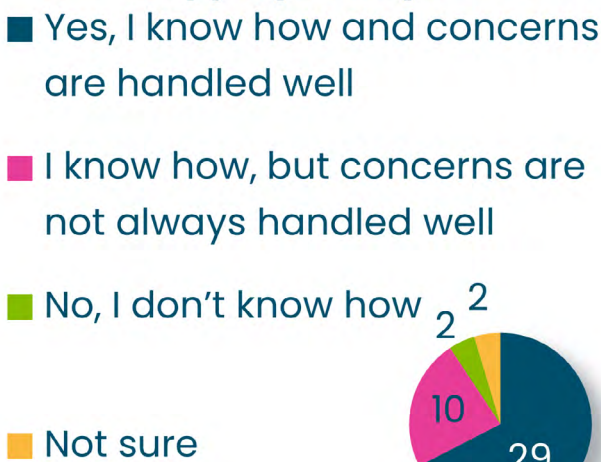
## Relatives and carers

### Are you involved in your relative/friend’s care?



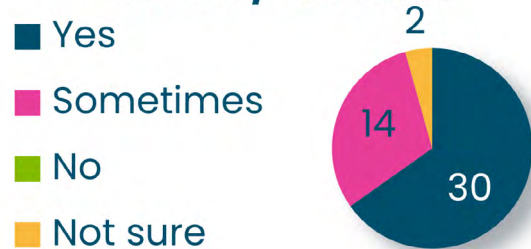
Most people are involved in care decisions through annual meetings with the service. However, three relatives said they are not involved, with one stating they have not involved “for many years now”.

### Do you know how to report concerns, and are they handled appropriately?



Most friends and family said they know how to raise concerns, and feel they are generally handled appropriately.

### Do staff communicate well with friends/relatives?



The majority also agreed that the staff communicated well with them. However, nine relatives said their concerns have not been handled properly. The main issue was limited follow-up communication, leaving them unsure whether their concerns had been resolved. Some people mentioned that the response’s effectiveness depended on which staff member handled the complaint.

## Staff

### Are residents and their families involved in decisions about their care?



Most staff said they always involve customers and their families in decisions about their care. Care plans are reviewed every six to twelve months with families, customers and key workers.

### Do you feel supported to act upon resident and families' feedback?



Most staff feel supported to act on feedback and raise concerns around poor practice and serious incidents.

Staff at Crossheath Respite Care said they discussed incidents at meetings to support learning.

### Do you feel supported in raising concerns about poor practice or serious incidents (whistleblowing)?



Many staff also said they feel comfortable raising concerns with current management.

When asked what helps them provide good care, staff mentioned good staffing levels, appropriate training, team-building activities, clear care plans, and access to the right equipment. However, several staff identified barriers to delivering quality care. The most common concern was the high number of agency staff, with varying levels of skill and training. Other challenges included staff shortages, feeling undervalued, and receiving inaccurate handovers or care plans.

# Our recommendations

## Good practice to maintain:

### 1. Ensuring cleanliness, displaying pictorial signage in accommodations and adhering to AIS standards.

Continue to ensure high standards of cleanliness and compliance with AIS requirements to maintain a safe, accessible, and hygienic environment.

This recommendation is linked to key findings 1 and 3.

### 2. Offering a variety of meal options and accommodating customers' dietary requirements.

Provide a variety of meal options and accommodate individual dietary requirements to support their health or religious needs.

This recommendation is linked to key finding 6.

### 3. Reviewing and updating care plans regularly with customers and relatives.

Involving customers and their families in care planning to ensure plans remain accurate, person-centred, and responsive to changing needs.

This recommendation is linked to key finding 8.

## Areas for improvement:

### 4. To review and develop a more effective induction programme for agency staff.

Review the current induction process for agency staff and develop an effective programme to ensure agency staff understand organisational standards, expectations, and individual customer needs for safe and consistent care.

This recommendation is linked to key findings 2, 5 and 10.

### **5. Consider increasing staffing levels during shifts.**

Review staffing ratios to reduce pressure on existing staff and maintain safe, high-quality care delivery.

This recommendation is linked to key findings 4 and 7.

### **6. Review and improve staff training programmes, with particular focus on strengthening medication management practices.**

Evaluate and improve training to make it more interactive, practical, and aligned with best practices, particularly in medication management.

This recommendation is linked to key findings 2 and 4.

### **7. Strengthen medication management.**

To build on existing training and support around medication management, the service should consider.

- Offering more targeted training, especially for complex needs.
- Ensuring regular checks to maintain high standards, reduce errors, and improve safety for all customers.

This recommendation is linked to key findings 2 and 4.

### **8. Improve communication with relatives and carers.**

Strengthen communication channels to keep families informed and involved in the care process, particularly after raising a concern.

This recommendation is linked to key finding 9.

### **9. Consider organising team-building and wellbeing activities.**

Promote a positive work culture and support staff morale through regular team-building sessions and wellbeing initiatives.

This recommendation is linked to key finding 10.

## Service provider response

“Thank you for providing the in-depth and detailed report – it has lots of information on there that is useful for us to read. Staff feeling undervalued is something that myself, Beckie and Victoria are really hopeful to improve for the respite staff team. We are conscious that there have been changes to management and we are working on building relations with staff, customers and family carers. To have sight of the questions and responses at the end of the report is helpful to see also.”

**Kathryn Pickthorne, Area Manager, Aspire.**

## Next steps

The report will be shared with Aspire, Leeds City Council and Care Quality Commission. We will agree with Aspire on the next steps to take in response to our recommendations and work with them to ensure that any agreed actions are followed through and implemented.

We will undertake any follow-up work required to ensure that real changes are made to the services.

The report will also be published on the Healthwatch Leeds website.

# Thank you

Thank you to all those who shared their feedback, and to staff and customers at Aspire Respite Services for welcoming us.

Thank you to our Enter and View representatives: Tatum Yip (Lead Staff), Angie, Denise, Dianne, Gemma, Jane, Janet, Jonathan, Katie, Meg, Oliver, and Wumi for undertaking the visits.

This report was written by Katie Joenn, Project Support Worker and Tatum Yip, Project Manager at Healthwatch Leeds.

# References

Aspire (2025). Respite Care and Crisis Services. [www.aspirecbs.org.uk/aspire-respite-care-crisis-services/](http://www.aspirecbs.org.uk/aspire-respite-care-crisis-services/)

Accessible Information Standard [www.england.nhs.uk/long-read/accessible-information-standard-requirements-dapb1605/](http://www.england.nhs.uk/long-read/accessible-information-standard-requirements-dapb1605/)

# Appendices

## Appendix 1 – What is Enter and View?

The Health and Social Care Act allow local Healthwatch authorised representatives to check how health and adult social care services are run. They talk to service users, their families and carers. This is called Enter and View. These visits can be carried out in places like hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies.

Enter and View lets authorised representatives:

- Visit services and see how people experience care.
- Talk to service users, carers, and families at the point of service delivery.
- Observe how services work.
- Gather evidence-based feedback.
- Report findings to providers, the Care Quality Commission, Local Authority and NHS commissioners and quality assurers, Healthwatch England and relevant partners.
- Make recommendations to improve care locally and nationally.

What is the purpose of Enter and View?

Enter and View visits happen when people report problems or when services have a good reputation. Enter and View fits into three areas:

1. To contribute to a wider local Healthwatch programme of work.
2. To check a single issue across many places.

3. To look at one service based on local intelligence.

Who can Enter and View?

Healthwatch Leeds has trained volunteers and staff members who are authorised enter and view representatives (list of names available upon request).

All the authorised representatives have completed the following:

- Enter and View Training
- Safeguarding Training
- Enhanced DBS (Disclosure Barring Service) Check
- Equality and Diversity Training (not compulsory)

## Appendix 2 – Accessible Information Standard

The Accessible Information Standard was introduced by the government in 2016, and a refreshed version was published in June 2025. The standard is to make sure that people with a disability or sensory loss are given information in a way they can understand.

As part of the Accessible Information Standard, organisations that provide NHS or adult social care need to do six things.

They need to:

1. Ask people if they have any information or communication needs and find out how to meet their needs.
2. Record those needs.
3. Highlight or flag a person's file, so it is clear that they have information or communication needs, and clearly explain how those needs should be met.
4. Share information about a person's needs with other NHS and adult social care providers, when they have consent or permission to do so.
5. Make sure that people get information in an accessible way and communication support if they need it.
6. Review people's needs regularly.

More information about the Accessible Information Standard can be found at [www.england.nhs.uk/long-read/accessible-information-standard-requirements-dapb1605/](http://www.england.nhs.uk/long-read/accessible-information-standard-requirements-dapb1605/)

As part of the relaunch, NHS England requires health and care organisations to annually publish their compliance with the 2025 version by March 2027 using a new self-assessment framework (SAF).






**Committed  
to quality**

We were awarded a committed to quality marque from Healthwatch England. To obtain this we did an in depth audit which will be reviewed.


Your  
**healthwatch**  
Leeds

Healthwatch Leeds  
Community Interest Company 9542077  
The Old Fire Station  
Gipton Approach  
Leeds  
LS9 6NL

 [healthwatchleeds.co.uk](http://healthwatchleeds.co.uk)

 0113 898 0035

 [info@healthwatchleeds.co.uk](mailto:info@healthwatchleeds.co.uk)

 07717 309 843 (Textphone)

 [healthwatch.leeds](https://www.facebook.com/healthwatch.leeds)

 [@healthwatchleeds](https://www.instagram.com/healthwatchleeds)

 [/your-healthwatch-leeds/](https://www.linkedin.com/company/your-healthwatch-leeds/)

 [@healthwatchleeds.bsky.social](https://bsky.app/profile/healthwatchleeds.bsky.social)

 [youthwatchleeds/](https://www.facebook.com/youthwatchleeds/)

 [@youthwatchleeds](https://www.instagram.com/youthwatchleeds)

 [@youthwatchleeds](https://www.tiktok.com/@youthwatchleeds)