



Fencepiece Road Medical Centre 83 Fencepiece Road, Hainault, Ilford, Essex IG6 2NB

Thursday 27th July 2017

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Please contact us for more details.

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| Service Provider | Fencepiece Road Medical Centre 83 Fencepiece Road, Hainault Ilford, Essex IG6 2NB |
|---|---|
| Contact Details | Practice Manager – Sadaf Khalid |
| Date/time of visit | Thursday 27 th July 2017, 10:00am – 12:00pm |
| Type of visit | Announced visit |
| Authorised representatives undertaking the visits | Elaine Freedman Hyacinth Osborne |
| Contact details | Healthwatch Redbridge 1st Floor, 103 Cranbrook Road Ilford, Essex IG1 4PU |
| | 020 3874 4120 |

Acknowledgements

Healthwatch Redbridge (HWR) would like to thank the staff and patients at Fencepiece Road Medical Centre for their contribution to the Enter & View programme.

Disclaimer

Please note that this report related to findings observed during our visit made on Thursday 27th July 2017.

Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time of the visits.

What is Enter & View?

Part of the local Healthwatch programme¹ is to carry out Enter & View visits. Enter & View visits are conducted by a small team of trained volunteers, who are prepared as 'Authorised Representatives' to conduct visits to health and social care premises.

Enter & View is the opportunity for Healthwatch Redbridge to:

- Enter publicly funded health and social care premises to see and hear first-hand experiences about the service.
- Observe how the service is delivered, often by using a themed approach.
- Collect the views of service users (patients and residents) at the point of service delivery.
- Collect the views of carers and relatives through evidence based feedback by observing the nature and quality of services.
- Report to providers, the Care Quality Commission (CQC), Local Authorities, Commissioners, Healthwatch England and other relevant partners.

Enter & View visits are carried out as 'announced visits' where arrangements are made with the service provider, or, if certain circumstances dictate, as 'unannounced' visits.

Enter & View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation - so we can learn about and share examples of what a service does well.

Introduction

Healthwatch Redbridge (HWR) is conducting Enter & View visits to all GP practices across Redbridge as part of our work programme during July to October 2017.

Last year, Healthwatch Redbridge organised a series of workshops for practice managers across Redbridge, Havering, Barking and Dagenham to inform them about the Accessible Information Standard². These visits are an opportunity for HWR to discover if the standards have been implemented across the borough.

Accessible Information Standard

This standard aims to ensure that people who have a learning disability, communication impairment or sensory loss are provided with information that they can understand. They should also be able to receive support so that they can communicate effectively with health and social care services.

From 1st August 2016, all organisations that provide NHS or social care must follow the standard by law. For organisations to effectively implement the standard, they need to consider their policies, procedures, human behaviour and where applicable, electronic systems.

Purpose of the visit

The visits were planned to evaluate whether GP practices across Redbridge are implementing the standards thereby ensuring that the needs of people with communication impairments are being met.

In addition to the workshop organised for practice managers, HWR also ran workshops for people with communication impairments. The feedback continues to show that people are not receiving information in a way that they can understand.

An example of when a patient's need was not met was when she asked her GP practice to provide information in large print but they continued to give her regular font. On one occasion, she missed her appointment because the letter that the surgery sent to her was not in the right font meaning that she was unable to read it.

² https://www.england.nhs.uk/wp-content/uploads/2015/07/access-info-upd-july-15.pdf

NHS England reviewed the Accessible Information Standard during January-March 2017. Their subsequent report³ found that many participants felt that the standard could have a significantly greater impact than it has done to date. This suggests that monitoring its compliance is necessary.

These visits will identify any areas where improvements could benefit patients. There is also an opportunity for Healthwatch to share examples of good practice found in GP surgeries across Redbridge. It is hoped that our findings will support practices in improving their services and making reasonable adjustments to meet patients' health care needs.

Strategic Drivers:

- Part of Healthwatch Redbridge's work plan 2017-18
- Implementation of NHS Accessible Information Standards
- Seldom heard groups and the way in which they are supported to communicate are of particular interest to local Healthwatch.

Methodology

Each Enter & View visit was announced. All 46 GP practices were informed about the visit and given about three weeks' notice of the time period that the visit will take place. The practices were not given the specific time and date but rather given a two week time frame. Information provided prior to the visit included a brief summary of the visit and the role of the attendees.

Prior to the visit, HWR staff members worked with authorised representatives to prepare questions that will be used during the visit. There were three separate set of questions: one for lead staff member, one for other staff members and one for service users.

Each visit involved observing the external and internal areas of the surgery. Representatives had the opportunity to identify any issues or challenges that someone with an impairment might face when using the facilities in the surgery.

Where possible, the representatives spoke to the practice manager, other staff members such as the receptionist and nurses and service users. Due to the specific nature of the visit, it wasn't always possible to speak to patients with communication impairments.

³ https://www.england.nhs.uk/wp-content/uploads/2017/07/accessible-Info-std-review-report.pdf

At the end of the visit, staff members were informed that a draft report would be sent to them. A draft report was sent to each GP practice and they were given 20 working days to respond with their comments.

Reviewing website accessibility

In addition to visiting the GP practices, all the practice websites were checked to find out whether they are accessible for people with communication impairments.

Three volunteers assessed each website using a checklist (Appendix 1) devised by HWR staff members. Two of the volunteers who reviewed the website had communication impairments; one of the volunteers was Deaf and the other volunteer has Asperger's Syndrome.

Results of website review

- It is not possible to change the size of the text on the website.
- The colour of the background cannot be changed.
- The images have text descriptions explaining what the image is about.
- The website does not have a "sitemap" button.
- It is not entirely possible to navigate the whole website without a mouse.
- There is no audio content on the website.
- Information on the website is written in plain English.

Results of the visit

Observations made outside the premises:

- There is sufficient and clear signage to the premises.
- There is one accessible parking space. Other patients can park off the main road, as the main road is subject to restrictions (double yellow lines).
- There is level entrance to the surgery meaning that a ramp/lift is not necessary.

Observations made inside the premises:

- Reception staff sit facing patients making it easy for patients who are Deaf to lip read.
- There are signs on the consulting room doors however they are small and it may be difficult for someone with a visual impairment to read them.
- The noticeboard is not cluttered.
- The complaints/compliments procedure was not on the noticeboard. When asked by the representative, a staff member provided a copy of the complaints and comments leaflet.
- The hearing loop sign is displayed in reception.
- Representatives did not see any fire exit signs. The manager said that they are kept in the cupboard.
- The fire alarm does not have flashing lights as well as sound.

Provider Response:

We have recently had extensive renovation and in the process of completing works.

The fire alarm does have flashing lights and an audible alarm. It is a commercial grade fire alarm with sounders in each clinical room as per building regulations.

The fire exit signs were due to be installed and were in the cupboard for this reason. Again because of the building works. These will be installed.

- The surgery has an electronic screen that shows patients name and room in large letters as well as calling the patients name.
- There was no poster informing patients about the accessible information standard.

Speaking to the practice manager and doctor

The representative spoke to both the practice manager and doctor at the same time.

- The practice manager said that patients are not asked about their communication needs when they first register at the surgery.
- The representative was shown a registration form and this question was not on the form.
- After the patients register, they are asked to make an appointment with the practice nurse who will interview them and find out about their needs.
- There is nothing in place for existing patients. They need to inform staff about their needs.
- When a patient presents at reception, there is a 'pop up' system, which informs staff about the patient's communication needs. The surgery uses the EMIS⁴ system.
- The clinician is informed about the patient's need because it will be flagged up when the patient goes in to the consulting room.
- The surgery has a hearing loop however the manager did not know about this. On 20th September, a representative checked the hearing loop and it was working.

Provider Response:

The hearing loop was reinstalled after the recent building works. The manager did know about the previous system and all staff will be trained once again.

- Staff have not been provided with training on how to use the hearing loop.
- Patients are made aware of the hearing loop because there is a hearing loop sign on the reception desk.
- Staff have received communication training but have not attended any training for deaf awareness and easy read training.
- Information is not available in different formats such as large print for patients.

⁴ EMIS is an electronic patient health record system used by many GPs

Provider Response:

The manager is aware of how to access accessible information online from NHS sources.

We do have a system of health checks for those with Learning Disabilities, annual checks for elderly with multiple medical problems.

- The surgery is unable to provide access to BSL interpreters, Signalong and Makaton.
- There is no communications book available in the surgery.
- The manager was uncertain about what they would do if the next of kin/carer required information in an accessible format.

Speaking to patients

Representatives spoke to five patients during visits.

- Four patients said that they were not asked about their communication needs. One patient said that he cannot remember if he was asked.
- One patient has a communication impairment and stated that the surgery knew of his communication needs due to annual medical checks.
- One patient reported that reception staff are unable to help him effectively according to his communication needs but the clinicians are able to.

Recommendations

- 1. To make the website more accessible, patients should be able to:
 - Change the size of the text because some people need information in a larger font size.
 - Change the colour of the background because some people cannot read text if there isn't sufficient contrast between the text and background.
 - Use a sitemap because it makes it easier for people to find information on the website.
 - Navigate the whole website without a mouse because some people who are blind/ partially sighted with mobility impairments rely on the keyboard.
 - Access website information via screen readers and translation software (such as Browesaloud®⁵) especially for people with visual impairments.

Provider Response:

The website does have pictures and all information can be seen on the front page. There is also video content.

http://www.fencepieceroadmedicalcentre.nhs.uk

There is a website accessibility tab where voice and larger text can be chosen

http://www.fencepieceroadmedicalcentre.nhs.uk/web_accessibility.
htm

The website has been designed by a nationwide GP practice website provider and have been constructed as per NHS guidance.

2. A Communications handbook⁶ with basic images of common BSL and Makaton symbols should be available in the reception enabling staff to communicate more effectively with patients who have communication impairments.

⁵ https://www.texthelp.com/en-gb/products/browsealoud/

⁶ Example of a standard hospital communication book can be found at: http://www.uhs.nhs.uk/Media/SUHTInternet/PatientsAndVisitors/Learningdisabilities/Thehospitalcommunicationbook-part1.pdf

- 3. Staff should receive training on AIS.
- 4. Visual impairment and deaf awareness training should be provided for all staff members as an annual roll on programme. This would enable staff to know how to communicate better with a deaf/blind person.
- 5. Staff should be trained on how to provide information in an easy read format for patients with learning disabilities.
- 6. The complaints/compliments procedure should be available on the noticeboard in a variety of formats such as large print and audio for patients.
- 7. The surgery should put a poster about Accessible Information Standard on the noticeboard. If possible, this information should be available on an A3 poster.
- 8. The surgery should consider increasing the size of the font on the consulting room doors making it easier for people with visual impairment to see.
- 9. The surgery should include a question about communication needs on the registration form. The patient record system in use at the practice (EMIS) is able to flag communication needs but only if the information is entered into the system.
- 10. The surgery needs to put a procedure in place to identify communication needs of existing patients.

Service Provider Responses

We would like to thank Fencepiece Road Medical Centre for the responses made and Healthwatch Redbridge has incorporated them within this report where appropriate.

Distribution

- Fencepiece Road Medical Centre
- Redbridge Clinical Commissioning Group
- Barking, Havering and Redbridge Quality Surveillance Group
- Care Quality Commission
- Healthwatch England

Appendix 1 - Website accessibility checklist

Website accessibility checklist

| Questions | |
|---|--------------------|
| Can you change the text size? | Yes No |
| | Comments |
| Can you change the colour of the background? | Yes No Comments |
| Does the website have a "sitemap" button? | Yes No Comments |
| Are there keyboard shortcuts? / Can you navigate the website without a mouse? | Yes No Comments |
| Does the website have audio content? | Yes No Comments |
| Is the website content written in "plain English"? | Yes No Comments |
| Additional comment | |

Appendix 2 - Observation sheets

| Yes No Comments: | Yes No Comments: | Yes No Comments: Yes No | Comments: Yes No Comments: | | |
|--|---|--|---|---|--|
| Signs in various formats including pictures (e.g. on toilet doors - are they clear/contrasting/pictures) | Interaction between staff and service users; are they facing service user whilst talking to them using body language to communicate as well as verbal communication, is plain language - is plain language used | Complaint/compliments procedure information is available in alternative formats - for patients & relatives - is it on the noticeboard Are the noticeboards cluttered, and are the notices | easily legible | Does the surgery have an electronic screen to inform patients of their appointment - if so what colour are the screen and writing - does it show room no. Doctor name - is it audio as well as visual Further Comments: Please provide any relevant information about accessible information | |
| c | | | | | |
| ssible Informatio | | Yes No Comments: | Yes No Comments: Yes No Comments: | Yes No Comments: Yes No Comments: | Yes No Comments: |
| GUIDANCE For Enter & View to GP Surgeries Re: Accessible Information Observation Checklist | Name of Surgery: Name of Authorised Representative: Date: | Observations/Questions Getting to the Service: There is sufficient and clear signage to the premises being visited: signs are clear, unobstructed and easily readable | There is accessible & sufficient parking available close to the entrance - drop off point directly outside the entrance A ramp/lift is available, or there is a working assistance bell - Edge of ramp highlighted to keep people off uneven surface | nt as well as sound | within the premises: Are there trip hazards/sharp edges/furniture in pathway (both permanent & temporary) |

Appendix 3 - Questions for lead staff

| Yes No | ments | Yes No Comments | Comments | | Yes No | Comments | Yes No | Commonte | SILIBILIDO | Comments | | Comments | | | | ithin 20 | | | | | | |
|---|--|---|--|--|--------|---|---|---|--|--|--|-------------------------|--|--|--|---|----------------------------|---|---|---|--|--|
| 15. Are you able to access: • BSL (British Sign Language) interpreters | | MAKATON (a language programme using signs and symbols to help people to communicate) | 16. Where/which organisations might vou access | | - | NOTE FOR REPS: If they have one, please ask to see it and comment on what you have seen | vatient had any | 9 | | v this and would it be on | the patients records? | ould like to share with | Healthwatch Redbridge? | | Information for Manager when leaving | Inform them that we will send a copy of the report within 20 working days for your comments B corrections if necessary. | | | | | | |
| Yes No | Comments | Comments | | Yes No | ments | Yes No | Comments | act date of | training | | Yes No | | Comments | Comments | Yes No | Comments | | | | Comments | | |
| 7. Is there a process in place to ensure that the doctor/nurse dealing with the patient whilst they | are in the surgery are aware of their communication needs before they start to interact with them? | 8. Is there a hearing loop in the surgery, if there is | what type of loop is it? • Fixed/Portable/Both | Have staff been provided with training on how to use it? | | 10. Are patients made aware that a hearing loop is available? | | 11. What training is provided to support all staff to | מווווווווווווווווווווווווווווווווווווו | Deaf awareness training Communication training | Dementia awareness Easy read training | | | 12. How often do you have this training? | 13. Is information available in different formats to | make it accessible to all patients and are patients aware of this? For example: large print, | easy read, Braille, Audio. | NOTE FOR REPS: Please ask to see examples of this | if possible and comment on what you have seen | What format do you provide for people with: Aearing impairment | b. Visual impairment c. Learning disabilities | |
| RGE at | | | | | Yes No | Please explain | | | | Comments | | | Comments | | | | | Yes No | Comments | Comments | Comments | |
| Questions for MANAGER/PERSON IN CHARGE at | GP Surgery Name of Surgery: | Name of lead manager: Name of Authoricad Representatives: | Date; | | _ | needs when they first register at the surgery; For example: | Are they asked if they have difficulties with | sight/hearing? | Are uley asked II uley have a tearning disability: | ng patients | to ensure that you are aware of their communication needs? | | How are these needs recorded if they have any? | NOTE FOR REPS: If the manager seems unsure you can prompt them with the following auestions: | | Are they recorded on a database: Or by any other means? | | tion, is there a | 'pop up' which flags their needs. | 5. If yes, what system do you use? | 6. If there is no system in place can you explain the Comments reasons for this? | |

Appendix 4 - Questions for other staff

| | | ; | 2 | 4 | 2 | 8 | | | | | | | | | 8 | | |
|--|--|------------------------------|---|---|---|--|---|---|--|---------------------------------------|--|--|---|---|--|---|--|
| Comments | | ; | Yes | Vor | Comments | Yes | | | | Yes No | Comments | | | Comments | Yes | Comments | Comments |
| 6. Is there a hearing loop in the surgery, if there is what type of loop is it? • Fixed/Portable/Both | 7. Are you aware of the ways that information should | be provided for people with: | hearing impairments | | Visual impairments | Learning disability? | If yes, what are they? | NOTE FOR REPS. If the member of staff is struggling to give some examples you can prompt them. • Hearing impairments -British sign language, subtitles on TV | Visual impairments - Large print or audio Learning disabilities - Easy Read | 8. Do you have a communications book? | NOTE FOR REPS: If they have one, please ask to see it and comment on what you have seen | If there was a fire or emergency do you know if there is an appropriate alarm for those with hearing impairments? If yes, what is it? If possible, | can you snow us: • Flashing red light | In the event of a fire, what is the procedure for evacuating those who are Deaf or Blind? | 11. Has there been a fire drill and if yes, did it flag up any problems? | | 12. Is there anything you would like to share with Healthwatch Redbridge? |
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| rgery | | | | Yes Comments | | | | Yes Comments | Yes | | Yes | Comments | Yes | Comments | | | Comments |
| Questions for STAFF in GP Surgery Name of Surgery: | Name of Authorised Representatives: | | Dates: | Are you aware of the Accessible Information Standard (AIS)? | Have you been provided with training on how to support patients with: | NOTE FOR REPS: If they answer yes, please ask what | of training it was and tick the appropriate box | Visual impairments: blind & partially sighted On-line Face to face Both | Hearing impairments: profoundly deaf & hard of hearing | On-tune Part to face | on Disabilities | On-line | 3. Do you feel that you would benefit from any other training with regard to AIS? | 4. How would a patient that has a specific need be identified? i.g. had hearing impairments, visual | Impairments of learning disability; Would it be flagged up on the computer system | Electronic system A card provided by surgery they show to staff on arrival | 5. How would a patient with a hearing impairment know that they had been called for their appointment? |

Appendix 5 - Questions for Patients

| Yes No | res no | Comments | | | Comments | | Yes No | Please explain | | | | | | | |
|--|---|--|-----|----------|--|--|-----------|--|----------------------------|--|--------------|-----|----------------|-----|----------------|
| 5a. Do you feel that the doctors are able to help you effectively according to your communication needs? | nurses are able to nelp ng to your | 6. If not, how do you feel this could be | | | 7. What, if anything can be done to improve the C way information is provided to you? For example: | large print, audio (spoken/recorded information) easy read | et? | For example, when being called for an appointment or provided with written | information | 1 le thave anything also now all blick of all blicks now all a like to the | to us about? | | | | |
| | | | No | | o _N | Š. | | Ŷ. | | | | No | į | No | ·Ē |
| TS at GP Surgery | | | | Comments | Yes Comments | Yes Comments | | | Comments - Please state | | | | expla | | expla |
| Š | | | Yes | Com | Yes Com | Yes Com | | Yes | Comm Please | | | Yes | Please explain | Yes | Please explain |

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