



Mathukia's Surgery 281 Ilford lane, Ilford, Essex IG1 2SF

Monday 2nd October 2017

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Please contact us for more details.

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| Service Provider | Mathukia's Surgery 281 Ilford Lane, Ilford, Essex IG1 2SF |
|---|---|
| Contact Details | Practice manager- Sharon Moorton |
| Date/time of visit | Monday 2 nd October 2017, 10.00am -11.30pm |
| Type of visit | Announced visit |
| Authorised representatives undertaking the visits | Kiran Kaur Singh Bushra Tahir Sarah Oyebanjo (staff support) |
| Contact details | Healthwatch Redbridge 1 st Floor, 103 Cranbrook Road Ilford, Essex IG1 4PU 020 3874 4120 |

Acknowledgements

Healthwatch Redbridge (HWR) would like to thank the staff and patients at Mathukia's Surgery for their contribution to the Enter & View programme.

Disclaimer

Please note that this report related to findings observed during our visit made on Monday 2^{nd} October 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 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:

- Two signs are available; one sign in front of the building and the other sign near the entrance.
- The sign is bold and easy to see from a distance. It is written in a white font on blue background.
- No accessible parking is available. There are three marked bays outside the surgery, but these are for the doctors. It is possible to park opposite the surgery or slightly further down the road and pay at a meter round the corner.
- Level entrance to the surgery so a ramp is not required. There is a button for wheelchair access.

Observations made inside the premises:

- The chairs are close to the self-check machine and this could be hazardous for someone with a visual impairment.
- There is a (temporary) ramp in the hall to some of the consultation rooms and the toilet which leads to a fire exit.
- Signs in the surgery were clear and easy to see. A large sign is placed above the reception area.
- There is a (half) glass screen, but it is only at the bottom of the reception desk. It would depend on a person's height as to whether this would hinder their ability to lip-read. Or the receptionist would need to stand up to enable a patient to lip read.
- The noticeboards were not cluttered and the notices were adequately spaced out.
- There is a sign on the noticeboard about making a complaint, but not the actual policy. The information was written in large print but it does not state that it is available in alternative formats such as audio.
- No hearing loop sign in reception.
- A TV screen is available to inform patients of their appointment. The doctor comes out to call the patient.
- There is a poster informing patients about their communication needs.
- The fire alarm does not have a flashing red light as well as sound.
- Fire exits are clearly signed in words and pictures.

Speaking to staff

The practice manager was not available during the visit so the representative spoke to the receptionist.

- The receptionist was aware of the Accessible Information Standard.
- A representative was shown the registration form and there was a question asking patients about their communication needs. There was also a large print registration form.
- She said that staff have received online training on how to support patients with visual impairment, hearing impairment and learning disability.
- She said that she would benefit from training regarding AIS.

Provider Response:

I am in the process of looking at the training needs of all administration staff and will ensure that AIS is included.

- Patients' information are flagged up on the computer system.
- The surgery uses EMIS database⁴.
- If a patient has a hearing impairment, the doctor or nurse will take the patient to the consulting room.
- A hearing loop is not available.
- With regards to providing information in alternative formats, the receptionist said that they can provide information in large print. Staff are able to book interpreters if necessary.
- There is a communications book.
- In the case of fire, staff will help patients to evacuate the building.
- A fire drill hasn't taken place recently.

Speaking to patients

Representatives spoke to two patients during the visit.

- One of the patients said that she was asked about her communication needs. She said that there was a question on the registration form.
- The second patient said that she could not remember if she was asked about her communication needs.
- Both patients did not have any additional communication needs and were unable to provide any additional information.

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

Recommendations

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

Provider Response:

The Mathukia Website is in the process of being redesigned and we will be taking your comments on board.

- 2. The surgery should consider changing the fire alarms so that there is a flashing red light as well when the alarm sounds. This will allow Deaf people to know when the fire alarm goes off.
- 3. The complaints/compliments procedure should be available in a variety of formats such as audio. Also, patients should be allowed to make a complaint in alternative ways such as over the phone because some patients may not be able to write.
- 4. The surgery should get a hearing loop system and provide training for staff members on how to use the hearing loop.
- 5. It would be useful for TV screen to call out patient's name so that they know when it is their turn.

Provider Response:

The TV Screen in the Practice (Jayex Board) displays the patients name and also calls them. I am unsure why this was not working when your team was at the Practice.

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

6. It would be useful to have a yellow & black tape around the temporary ramp in the hall way to make it stand out more for someone who is partially sighted.

Provider Response:

The Practice is looking at alternative to the temporary ramp in the hallway.

Service Provider Responses

We would like to thank Mathukia's Surgery for the responses made and Healthwatch Redbridge has incorporated them within this report where appropriate.

Distribution

- Mathukia's Surgery
- 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

| GUIDANCE For Enter & View to GP Surgeries Re: Acce | Re: Accessible Information | Signs in various formats including pictures (e.g. on | Yes No |
|---|----------------------------|--|-----------|
| Observation Checklist | | tollet doors - are they clear/contrasting/pictures/ | Comments: |
| Name of Surgery: | | Interaction between staff and service users; are | Yes No |
| Name of Authorised Representative: | | they facing service user whilst talking to them using body language to communicate as well as verbal | ments |
| Date: | | communication, is plain language - is plain | |
| 4. | | | |
| Observations/Questions | | Complaint/compliments procedure information is | Yes No |
| Getting to the Service: | | available in alternative formats - for patients & | |
| There is sufficient and clear signage to the premises being whited: signs are clear, unobstructed and | Yes No | relatives - is it on the noticeboard | Comments: |
| easily readable | Comments: | | |
| | | Are the noticeboards cluttered, and are the notices easily legible | Yes No |
| There is accessible & sufficient parking available | Yes No | 1 | Comments: |
| close to the entrance - drop off point directly outside the entrance | Comments: | | |
| | | | |
| | | Is there a hearing loop sign? | Yes No |
| A ramp/lift is available, or there is a working | Yes No | | Commonter |
| people off uneven surface | Comments: | | - |
| | | Does the surgery have an electronic screen to | |
| Fire alarms have a light as well as sound | Yes No | inform patients of their appointment - if so what | |
| | Comments: | colour are the screen and writing - does it show room no. Doctor name - is it audio as well as visual | |
| Fire exits clearly signed in various formats. | Yes No | | |
| Words | | Further Comments: | |
| Pictures | Comments: | Please provide any relevant information about accessible information | |
| Within the premises: | | | |
| Are there trip hazards/sharp edges/furniture in pathway (both permanent & temporary) | Yes No | | |
| | Comments: | | |
| | | | |

Appendix 3 - Questions for lead staff

| Yes No Comments Yes No Comments | Comments Comments | Yes No Comments Yes No | Comments | Comments | | within 20 cessary. | | | |
|--|---|---|---|---|---|---|---|--|-----|
| 15. Are you able to access: • BSL (British Sign Language) interpreters • \$\frac{1}{2}\text{ignal}\text{ong}\text{ (based on BSL)} • MAKATON (a language programme using signs | and symbols to help people to communicate) 16. Where/which organisations might you access the above if you use them? | 17. Do you have a communication book? NOTE FOR REPS: If they have one, please ask to see it and comment on what you have seen 18. If the next of kin/carer of the patient had any | communication needs, is information provided to them in a format that is accessible to them? | 19. How would you know this and would it be on the patients records? 20. Is there anything you would like to share with | Healthwatch Kedbridge? | Information for Manager when leaving Inform them that we will send a copy of the report within 20 working days for your comments & corrections if necessary. | | | pro |
| | | Comments Yes No Comments | Last date of training | Yes No Yes No 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 9. 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 communicate effectively with patients? | Deaf awareness training Communication training Dementia awareness Easy read training | 40 11 - 4 - 1 - 4 - 4 - 4 - 4 | 12. How often do you have this training? 13. Is information available in different formats to Yes make it accessible to all patients and are patients aware of this? For example: large print, Comments easy read, Braille, Audio. | NOTE FOR REPS: Please ask to see examples of this if possible and comment on what you have seen 14. What format do you provide for people with: | a. Hearing impairment b. Visual impairment c. Learning disabilities | 64 |
| 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 Authorised Representatives: Date: | Are patients asked about their communication needs when they first register at the surgery? For example: Are they asked if they have difficulties with | sight/hearing? • Are they asked if they have a learning disability? | What have you put in place for existing patients to ensure that you are aware of their communication needs? | How are these needs recorded if they have any! Comments | NOTE FOR REDS: If the manager seems unsure you can prompt them with the following questions: Are they recorded on a database? Or by any other means? | 4. When a patient presents at reception, is there a 'pop up' which flags their needs? Fives. 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

| | | 8 | Ž | 2 | Ŷ. | | | | | | | | | No. | | |
|--|---|---------------------|-------------------------|---|--|--|---|--|---------------------------------------|---|--|---|--|--|--|---|
| Comments | | Yes | Vex | Comments | Yes Comments | | | | 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 neonle with: | hearing impairments | speciment in the second | 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 show us: Rashing red light | In the event of a fire, what is the procedure for evacuating those who are Deaf or Blind? | Has there been a fire drill and if yes, did it flag up any problems? | | Is there anything you would like to share with Healthwatch Redbridge? |
| | | | ON. | | | | Ŷ. | 9 | | Ŷ. | | o _N | | | | |
| rgery | | | Yes N Comments | | | | Yes Comments | Yes | | Yes | ments | Yes | Comments | | | Comments |
| Questions for STAFF in GP Surgery Name of Surgery: | Name of Authorised Representatives: | Dates: | | Have you been provided with training on how to support patients with: | NOTE FOR REPS. If they answer yes, please ask what | anning 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 | Face to face | u learning Dicabilities | | 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? Let had hearing impairments, visual increases to be a second seco | Would it be flagged up on the computer system | Electronic system A card provided by surgery they show to staff on | 5. How would a patient with a hearing impairment know that they had been called for their |

Appendix 5 - Questions for Patients

| Yes | , , , , , , , , , , , , , , , , , , , | S G | Comme | | Comme | | Yes | Please | | _ | _ | | | | | |
|---|---------------------------------------|-----------------------------------|---|------------------|--|--|--|---|--|---|---|--------------------------------|----------------|--------|--|--|
| 5a. Do you feel that the doctors are able to help you effectively according to your | | you effectively according to your | communication needs: 6. If not, how do you feel this could be | improved? | 7. What, if anything can be done to improve the way information is provided to you? For example: | large print, audio (spoken/recorded information) easy read | 8. Has there ever been a time when your communication needs have not been met? | For example, when being called for an appointment or provided with written | information | 9. Is there anything else you would like to talk to us about? | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | No | N _o | N _o | | No | , 60 | | | N _o | lain | No | lain | |
| urgery | | | | Yes Comments | Yes Comments | Yes Comments | | Yes | Comments - Please state | | | Yes | Please explain | Yes | Please explain | |
| Questions for PATIENTS at GP Surgery | Name of Authorised Representatives: | Date: | 1. When you registered at the surgery were you asked SPECIFICALLY if you had any: | hearing problems | problems with your sight | Or needed easy read information? | 2. How were you asked about this? | Do you HAVE a communication need such as those mentioned above? | NOTE FOR REPS: If the patient answers yes, please continue with the questions, if they | answer no, please say "we are here today to | so we don't need to keep you any longer. Thank you." | ff aware of your communication | needs: | ole to | netp you effectively according to your communication needs? | |

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