



Southdene Surgery The Shrubberies, George Lane, Essex E18 1BD

Tuesday 5th September 2017

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Please contact us for more details.

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Service Provider	Southdene Surgery The Shrubberies, George Lane, Essex E18 1BD
Contact Details	Practice Manager – Sunata Gaucaite
Date/time of visit	Tuesday 5th September 2017, 13:30pm – 15:00pm
Type of visit	Announced visit
Authorised representatives undertaking the visits	Chandra Patel Naina Thaker
Contact details	Healthwatch Redbridge 1st Floor, 103 Cranbrook Road Ilford, Essex IG1 4PU
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Acknowledgements

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

Disclaimer

Please note that this report related to findings observed during our visit made on Tuesday 5th September 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.

Section 221(2) of The Local Government and Public Involvement in Health Act 2007: http://www.legislation.gov.uk/ukpga/2007/28/section/221

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

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

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

users. Due to the specific nature of the visit, it wasn't always possible to speak to patients with communication impairments.

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 possible to change the size of the text on the website.
- The colour of the background cannot be changed.
- There are no images on the website that need to be explained.
- The website has a "sitemap" button.
- It is 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:

- Signage to the premises is clear and unobstructed.
- There is one accessible parking available close to the entrance of the surgery.
- A ramp is available but it is narrow. The edge of the ramp is not highlighted. Highlighting the edge of the ramp is useful for people with a visual impairment so that they are aware of the presence of a ramp.

Observations made inside the premises:

- No trip hazards or sharp edges were identified inside the premises.
- Signage directing patients to the consulting room were large and easy to read.
- The consulting room doors had the name of the doctor; this was written in a regular font size.
- The toilet door had only words and no pictures.
- There is no glass screen separating patients from staff members.
- Representatives observed the staff members directly facing the patients and speaking clearly.
- The noticeboards were not cluttered and the notices were legible. There were only five sheets of A4 paper on the noticeboard.
- There was no complaints/ compliments procedure available on the noticeboard.
- There was no hearing loop sign available in the reception area.
- The surgery has a TV screen to inform patients when it is their turn. The font is written in blue on white background.
- The TV screen also alerts the patient by calling out the individual's name.
- There was no poster informing patients about the Accessible Information Standard.
- The fire alarm comes through the TV screen so there is no flashing red light.
- The fire exists are clearly signed in pictures and words.

Speaking to the practice manager

The practice manager was not available during the visit. Representatives spoke to one receptionist.

• The staff member was not aware of the Accessible Information Standard.

Provider Response:

All reception staff has been given training in Effective Communication provided by PCC on 21st June 2017 which included AIS.

- The staff member said that she has not been provided with training on how to support patients with visual impairments, hearing impairments and learning disabilities.
- She said that she thinks she would benefit from AIS training.
- There is a computer system to inform staff members of the patient's communication needs.
- When asked about how a patient with a hearing impairment would know it is their turn, the staff member said that the person's name will appear on the TV screen so the patient can see this information and know where they need to go to.
- There is a portable hearing loop in the surgery. On the day of the visit, the hearing loop was still in the box however staff have been trained on how to use the hearing loop.
- When asked about how the staff member would provide information for someone with a hearing impairment, she said that she has not come across this yet and would speak louder/ clearer. Many patients with additional needs come to the surgery with someone.
- In terms of supporting someone with a visual impairment, the staff member said that she can provide large print information. The surgery has large print registration forms.
- The staff member said that people with learning disabilities tend to attend their appointments with their carers. The surgery provides double appointments for these patients. The surgery also ensures that they do not have to wait for a long period of time.
- The surgery does not have a communications book.
- The fire alarm does not flashing red lights.

- In the event of a fire, patients will be evacuated out of the building.
- There was a fire drill about two weeks ago.

Speaking to patients

Representatives spoke to one patient during the visit.

- The patient said that he registered about a year ago and was not asked about his communication needs.
- The patient did not have any communications needs and was unable to provide any further information.

Recommendations

- 1. To make the website more accessible, patients should be able to:
 - Change the colour of the background; some people cannot read text if there is insufficient contrast between text and background.
 - \circ Access website information via screen readers and translation software (such as Browesaloud \mathbb{R}^4) especially for people with visual impairments.

Provider Response:

The discussion about changing the colour of the website background and access website via screen readers started with Surgery's website developer.

2. A Communications Handbook⁵ 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.

Provider Response:

A communication book is being develop by the Practice. Date to be completed 31st December 2017.

- 3. Although we understand that people with communication needs often attend appointments with their carers; staff should reduce reliance on carers, family and friends to relay information to the individual. This is because it compromises a patients' right to privacy and dignity.
- 4. Staff should receive training on AIS.

Provider Response:

AIS training is in process and going to be completed by 31st December 2017.

5. 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.

⁴ <u>https://www.texthelp.com/en-gb/products/browsealoud/</u>

⁵ Example of a standard hospital communication book can be found at:

http://www.uhs.nhs.uk/Media/SUHTInternet/PatientsAndVisitors/Learningdisabilities/Thehospitalcommunica tionbook-part1.pdf

6. Staff should be trained on how to provide information in an accessible format for patients with learning disabilities.

Provider Response:

The reception staff has undertaken Effective Communication training on 31st June 2017. Further training in visual impairment and deaf awareness will be provided in 2018.

7. The surgery should have a complaints/compliments procedure displayed on the noticeboard and this should be available in a variety of formats such as large print for patients.

Provider Response:

Complaints/ compliments procedure has been displayed in the patient waiting area.

8. A hearing loop sign should be placed in the reception area so that patients know a hearing loop is available.

Provider Response:

A hearing loop sign has been displayed in reception.

9. The hearing loop should be placed in the reception area so that it is easy to use if a patient needs it. The hearing loop should also be checked regularly to ensure it is working.

Provider Response:

Hearing Loop is placed on the reception desk and a schedule for checking has been created. A designated person for this job has been allocated.

10. The surgery should display a poster about the Accessible Information Standard on the noticeboard. If possible, this information should be available on an A3 poster.

Provider Response: The poster about AIS has been placed in the reception.

11. The surgery should consider 'highlighting the edge of the ramp to ensure that people with visual impairments are able to see it.

Provider Response:

Discussion with the partners about highlighting the edge of the ramp is going to take place on 4th December 2017.

Service Provider Responses

We would like to thank Southdene Surgery for the responses made and Healthwatch Redbridge has incorporated them within this report.

Distribution

- Southdene 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

Website accessibility checklist			
Questions			
Can you change the text size?	Yes	No	
	Comments		
	comments		
Can you change the colour of the	Yes	No	
background?	Comments		
	comments		
Deep the makeite being a "site and "	Mar	Na	
Does the website have a "sitemap" button?	Yes	No	
buccon:	Comments		
Are there keyboard shortcuts? / Can	Yes	No	
you navigate the website without a	105	no	
mouse?	Comments		
Does the website have audio content?	Yes	No	
	Comments		
Is the website content written in "plain	Yes	No	\neg
English"?			
	Comments		
Additional comment			

Observation Checklist		toilet doors - are they clear/contrasting/pictures)	Comments:
Name of Surgery:		Interaction between staff and service users; are they facing service user while talking to them using	Yes No
Name of Authorised Representative:		body language to communicate as well as verbal	Comments:
Date:		communication, is plain language - is plain language used	
		Completion of the second s	Voc No
Getting to the Service:		complainty compunients procedure information is available in alternative formats - for patients &	
There is sufficient and clear signage to the premises Yes being visited: signs are clear, unobstructed and	N	relatives - is it on the noticeboard	Comments:
	Comments:		
		Are the noticeboards cluttered, and are the notices easily legible	Yes No
There is accessible & sufficient parking available Yes	No	9	Comments:
close to the entrance - drop off point directly			
outside the entrance Con	Comments:		
		Is there a hearing loop sign?	Yes No
A ramp/lift is available, or there is a working Yes	No		
ump highlighted to keep			Comments:
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	
Con	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.	No		
Words		Further Comments:	
2	Comments:	Please provide any relevant information about accessible information	
Within the premises:			
Are there trip hazards/sharp edges/furniture in Yes	N		
paunway (pour permanent & temporary) Con	Comments:		

Appendix 2 - Observation sheets

Yes No	ments	Yes No	nents	res no	Comments	Comments		Yes No		ments	res no	Comments	Comments		Comments					vithin 20 Pessary	16 100000						
 Are you able to access: •RGL (Rritich Gion Language) intermreters 	- בטר (הוינטו טופו דבוופמיפה) וווינט או כרכי	 Signationg (based on BSL) 		 MAKATON (a language programme using signs 	and symbols to help people to communicate)	16. Where/which organisations might vou 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	16. 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 Redbridge?			Information for manager when leaving	Inform them that we will send a copy of the report within 20 working daws for wour comments B. connections if necessary							
Yes No	Comments				Comments		Yes No	ments	Yes No	Commante		Last date of training	Yes No	Yes No Vac 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		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	with training on how to		ents 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				12. How often do you have this training?	ats 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: a. Hearine 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 Surgenu:		Name of lead manager:	Name of Authorised Representatives:	Date:		<u> </u>	en they first register at the surgery? For		 Are they asked it 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	COMMUNICACION 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 questions:		Are they recorded on a database? Or by any other means?		 When a patient presents at reception, is there a ' 'pop up' which flags their needs? 		If yes, what system do you use?	6. If there is no system in place can you explain the Comments	reasons for this?	

Appendix 3 - Questions for lead staff

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Comments		Yes Comments	Yes 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 	Are you aware of the ways that information should be provided for people with:	 hearing impairments 	 visual impairments 	 Learcolog 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: • Flashing 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? 	
		٩ N				Ŷ	Ŷ		Ŷ		Ŷ					
rgery		Yes	Comments			Yes Comments	Yes	Comments	Yes	Comments	Yes Comments	Comments			Comments	
Questions for STAFF in GP Surgery Name of Surgery:	Name of Authorised Representatives:	Dates:	Standard (AIS)? 2. Have you been provided with training on how to	support patients with: NOTE FOB REDS: if they measure wies planes not what	type 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-line Eace to face Both		On-line	Do you feel that you would benefit from any other training with regard to AIS?	 How would a patient that has a specific need be identified? i.e. had hearing impairments, visual 	 Would it be flagged up on the computer system 	 Electronic system A card provided by surgery they show to staff on arrived 	5. How would a patient with a hearing impairment know that they had been called for their	appointment; Diagra ark staff member to describe this

Appendix 4 - Questions for other staff

Yes No Diase evolain	se expiain	Yes No	Please explain	Comments			Comments				Yes	no Please explain										
octors are able to cording to your		3b. Do you feel that the nurses are able to help you effectively according to your		r do you feel this could be			 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 		For example, when being called for an appointment or provided with written			9. Is there anything else you would like to talk	to us about?						
			_																			
at GP Surgery					Yes No	Comments	Yes No Comments		Yes No Comments			Yes No	Comments -	Please state				Yes No	Please explain	Yes No	Please explain	

Appendix 5 - Questions for Patients

Healthwatch Redbridge

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