



The Willows Practice
Hainault Health Centre,
98 Manford Way,
Ilford, Essex
IG7 4DF

Tuesday 8th August 2017

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Please contact us for more details.

www.healthwatchredbridge.co.uk

020 3874 4120

info@healthwatchredbridge.co.uk

Service Provider	The Willows Practice Hainault Health Centre, 98 Manford Way, Ilford, Essex IG7 4DF
Contact Details	Practice Manager – Pam Gentry
Date/time of visit	Tuesday 8th August 2017, 10:00am – 12:00pm
Type of visit	Announced visit
Authorised representatives undertaking the visits	Fiona Cooke Hyacinth Osborne 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 The Willows Practice for their contribution to the Enter & View programme.

Disclaimer

Please note that this report related to findings observed during our visit made on Tuesday 8th August 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.

NHS England reviewed the Accessible Information Standard during January-March 2017. Their subsequent report³ found that many participants felt that

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

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

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.

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.
- There are no images that need to be explained.
- The website does not have 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:

- There is a large standalone board with the name of the surgery however the hedge in front of it is blocking the board so patients arriving at the surgery would not be able to see the sign.
- Three accessible parking spaces are available in the side car park and two accessible parking spaces are available in front of the surgery.
- There is no ramp/lift but a slight slope leading to the surgery. There is no handrail available.

Observations made inside the premises:

- Staff in reception sit facing patients and there is no glass screen separating the receptionists from patients. This would make it easier for a Deaf person to lip read.
- A Deaf representative approached the receptionist to inform her about the visit and her response showed that she was able to effectively communicate with a Deaf person.
- No trip hazards/ sharp edges were identified.
- Signage across the surgery was clear and easy to read.
- Signage to the consulting rooms were clear and bold.
- The toilet only had pictures but no words.
- There was no signage in reception to inform patients about where the toilet is located.
- The noticeboards were not cluttered. Information on the noticeboards were adequately spaced out and easily legible.
- The complaints procedure was available on every noticeboard in the surgery. It was available in a fairly large font size but did not mention its availability in other formats such as easy read.
- There was a poster informing patients that the surgery is able to offer interpretation services including British Sign Language.
- Another poster also informed patients that the surgery does not accept family members as interpreters. This is an example of good practice, as it ensures that the information provided to patients is confidential.
- There was no hearing loop sign in the waiting area.
- The surgery has an electronic screen with red font on black background.
 When it is the patients turn, the patient's name appears on the screen with the doctor's name and the room that the person needs to go to.
 There is also a beep sound to alert the patient.

- The fire exits are clearly signed in both words and pictures. It may be useful to have bigger signs so that they are more visible.
- The fire alarm has flashing lights as well as sound.
- There is no poster with information about the Accessible Information Standard.

Speaking to the practice manager

- The manager said that patients are not asked about their communication needs when they first register at the surgery. She said that the health questionnaire should cover this.
- There is nothing currently in place to ensure that staff are aware of the communication needs of existing patients.
- Patient's needs are recorded on the computer system called Microtect⁴.
- When a patient presents at reception, the patient's needs are flagged up on the computer system.
- The doctors and nurses are informed of the patient's communication need by the computer system.
- There is no hearing loop in the surgery but the manager is in the process of getting one.
- Staff have been provided with communication training but not Deaf awareness and easy read training. Staff members are signed up for Blue stream online training⁵. This training takes place on a monthly basis and covers a wide range of topics.
- The surgery is able to provide information in different formats such as large print but not braille.
- Depending on the needs of the next of kin/carer, the surgery is able to provide information in other formats.
- The needs of the next of kin/carer will be recorded on the computer system.
- The surgery is able to access BSL interpreters using Big Word.
- There is no communications⁶ handbook.
- The manager mentioned that the building is leased so it is difficult for them to make changes, as there are restrictions.

 $\frac{http://www.uhs.nhs.uk/Media/SUHTInternet/PatientsAndVisitors/Learning disabilities/Thehospital communication book-part1.pdf$

⁴ Microtect is an electronic patient health record system used by some GPs

⁵ http://www.bluestreamacademy.com/

⁶ Example of a standard hospital communication book can be found at:

Speaking to other staff (receptionists)

Representatives spoke to one member of staff during the visit.

- The staff member was unaware of the Accessible Information Standard.
- Staff have not been provided with specific training on how to support patients with visual impairment, hearing impairment and learning disabilities.
- She mentioned that they have online training every month and this training covers a wide range of topics. It is possible that training on how to support people with communication needs might be included later on.
- She said that training on AIS would be useful.
- A patient with specific communications needs will be identified on the computer system.
- When asked about how a patient with a hearing impairment would know that it is their turn, she said that the doctor would call the receptionist to inform them and the receptionist would take the patient in to the room.
- There is no hearing loop in the surgery.
- When asked about the ways to provide information for people with hearing impairments, the staff member said she can book an interpreter, write information down or send an email/text to the person.
- In terms of providing information for someone with a visual impairment, she would provide large print information.
- For someone with a learning disability, she would explain things in a bit more detail and allow for extra time.
- There is no communications handbook.
- The fire alarm has a red flashing light.
- In the event of a fire, staff will ensure that all patients are safely evacuated from the building.
- The surgery has a fire drill every week but no problems have been highlighted.

Speaking to patients

Representatives spoke to three patients during the visit.

- Two patients said that they were not asked about their communication needs.
- One patient said that she cannot remember if she was asked about her communication needs.
- None of the patients had any communication needs so they were not able to provide any further information.

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 because some people who are blind/ partially sighted with mobility impairments rely on the keyboard.
 - Access website information via screen reader and translation software (such as Browesaloud®⁷) especially for people with visual impairments.
- 2. A Communications handbook⁸ 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.
- 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 in a variety of formats such as large print for patients.
- 7. The surgery should consider putting a poster about the Accessible Information Standards on the noticeboard. If possible, this information should be available on an A3 poster.
- 8. The surgery should consider putting hand rails as there is a slight slope when entering the surgery.
- 9. The surgery should include a question about communication needs on the registration form.

⁷ https://www.texthelp.com/en-gb/products/browsealoud/

⁸ Example of a standard hospital communication book can be found at: http://www.uhs.nhs.uk/Media/SUHTInternet/PatientsAndVisitors/Learningdisabilities/Thehospitalcommunicationbook-part1.pdf

- 10. The surgery needs to put a procedure in place to identify communication needs of existing patients.
- 11. The surgery should get a hearing loop system and provide training for staff members on how to use the hearing loop.

Service Provider Responses

'Many thanks for the report and I would like to let you know our progress so far. Once your colleagues left the site we were keen to address things mentioned at the time and I can confirm that so far we have re printed our practice leaflet and Health Questionnaire in large font size 18. We have also included the following questions:

Do you suffer from hearing impairment? Do you suffer from sight impairment? Do you have any learning difficulty?

We are attaching a note to all prescriptions asking patient to inform us of any communication needs and staff are asking patients the question at presentation.

Training is provided regarding AIS with Blue Stream and all staff are in the process of doing the module. A number have already completed it.

We have purchased 2 hearing loops which are in use and staff are trained on how it works. We tested it on our first partial hearing patient who presented and thought it wasn't working until he admitted he didn't have his hearing aid switched on, bless him.

I have emailed the building manager regarding the sign outside and the hand rails and await a response.

I am meeting with our clinical supplier on 7th September at which point I can discuss the web site issues and hopefully something can be arranged to address your concerns.

All other recommendations I will work through and hopefully have sorted soon.'

Pam Gentry Practice Manager

Distribution

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

Appendix 2 - Observation sheets

Signs in various formats including pictures (e.g. on Yes No toilet doors - are they clear/contrasting/pictures)	Interaction between staff and service users; are Yes No they facing service user whilst talking to them using body language to communication, is plain language - is plain	Yes Comments:	eboards cluttered, and are the notices	Is there a hearing loop sign? Comments:	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	
	they facing ser they facing ser body language communication language used	Yes No Comments:	Yes No Comments:	Yes No Comments:	Yes No inform p colour a Comments: room no	ments: No	
GUIDANCE For Enter & View to GP Surgeries Re: Accessible Information Observation Checklist	Name of Surgery:	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	Fire alarms have a light as well as sound Fire exits clearly stoned in various formats.	Words Pictures Within the premises: Are there trip hazards/sharp edges/furniture in pathway (both permanent & temporary)	

Appendix 3 - Questions for lead staff

Yes No Comments Yes No Comments	Comments	Yes Comments		Comments	Comments	t within 20 ecessary.			
15. Are you able to access: • BSL (British Sign Language) interpreters • <u>Signalong</u> (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 REDS: If they have one, please ask to see it and comment on what you have seen	io, if the next of kinroarer 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?	Zu. 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 days for your comments & corrections if necessary.			m
Yes No Comments	Comments Yes No	Comments Yes No	st date training	Yes No		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 Comwhat type of loop is it? • Fixed/Portable/Both 9. Have staff been provided with training on how to Yes 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	77 11 27 11 11 11 11 11 11 11 11 11 11 11 11 11		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	174
RGE at		Yes No Please explain		Comments	Comments		Yes No Comments	Comments	
Questions for MANAGER/PERSON IN CHARGE at GP Surgery Name of Surgery: Name of lead manager:	Name of Authorised Representatives: Date:	1. Are patients asked about their communication needs when they first register at the surgery? For example:	 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 communication needs? 		NOIE FURKEPS: If the manager seems unsure you can prompt them with the following questions: Are they recorded on a database? Or by any other means?	eption, is there a s?	5. If yes, what system do you use? Comments 6. If there is no system in place can you explain the Comments reasons for this?	

Appendix 4 - Questions for other staff

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Comments		Yes	Comments	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	 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	10. 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:		Wre 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	type of training it was and tick the appropriate box	Visual impairments: blind & partially sighted ne ne to face	Hearing impairments: profoundly deaf & hard of hearing			- Learning Disabilities -line - to face	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	 Mould it be flagged up on the computer system 	 Electronic system A card provided by surgery they show to staff on arrhival 	5. How would a patient with a hearing impairment move that they had been called for their providence?

Appendix 5 - Questions for Patients

Yes No	Please explain	Yes No	Please explain	Comments		Comments		Yes	No Please explain		_				
ba. Do you feel that the doctors are able to help you effectively according to your	communication needs?	5b. Do you feel that the nurses are able to help	communication needs?	6. If not, how do you feel this could be		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?				
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Questions for PATIENTS at GP Surgery					Yes No Comments	Yes No Comments	Yes No Comments			Comments - Please state		Yes No	Please explain	Yes No	Please explain

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