

ALL DE LE CARLE

Enter & View Report

Goodmayes Medical Practice 595 Green Lane, Goodmayes, Ilford, Essex IG3 9RN

Monday 10th July 2017

This report is available to download from our website, in plain text version, Large Print, and can be made available in Braille or audio versions if requested.

Please contact us for more details.

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| Service Provider | Goodmayes Medical Practice 595 Green Lane, Goodmayes, Ilford, Essex IG3 9RN |
|---|---|
| Contact Details | Practice manager- Perri Mansaray |
| Date/time of visit | Monday 10 th July 2017, 10.30 am -12:30pm |
| Type of visit | Announced visit |
| Authorised representatives undertaking the visits | Hyacinth Osborne Kiran Kaur Singh Miranda Peers (staff support) |
| Contact details | Healthwatch Redbridge 1 st 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 Goodmayes Medical Practice for their contribution to the Enter & View programme.

Disclaimer

Please note that this report related to findings observed during our visit made on Monday 10th 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.

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

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

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.
- The website has a "sitemap" button.
- There are no images that need to be explained.
- It is not 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. However, a representative with a visual impairment suggested that it may be beneficial to have a sign at the front of building. This will make it easier for people coming from a distance to see where the surgery is located.

Provider Response:

We have already been given funding from our Patient Participation Group for a new sign to be erected near the pavement on completion of all our on-going current building works.

- Parking at the surgery is for GP staff only. There is parking available on the road for patients.
- There is a ramp available but the edge is not highlighted. Highlighting the edges of the ramp makes it easier for people with visual impairments to notice the ramp.

Observations made inside the premises:

• On approach to the reception area, there were three members of staff present. Two staff members were working on the computers with their back to the reception and one staff member was at the reception desk.

Provider Response:

There is only ONE member of staff who works at the back computer who has their back to the reception.

- The desk was side on, meaning that the receptionist had to turn to face anyone who approached the desk.
- The reception desk was quite high but the receptionist was sitting low down. This would make communication for someone with a communication impairment more difficult.

Provider Response:

If any patient has any communication difficulties: the member of staff will get up from their chair and go into the reception area and speak to the patient face to face.

- When the receptionist was speaking to patients, she spoke clearly.
- On the glass window screen in reception, there is a poster (A3) informing patients about the Accessible Information Standard and asking them to inform staff about their communication needs.
- There were trip hazards in the practice. The metal runner in the corridor next to the toilet is lifted at one end.
- At the entrance of the building, there is a heavy rug. Underneath this, a part of the carpet sticks out making it a trip hazard.

Provider Response:

We will investigate the trip hazards and fix them if necessary.

- Signage within the premises was clear in some instances. The signs for rooms 1 & 2 are clear with arrows pointing to these rooms.
- The sign for the treatment room has lettering in green which may not be accessible for someone who is colour blind.

Provider Response:

Treatment room signage is in green lettering, but if a person is colour blind, they would surely read the lettering as it would appear to them in black/grey.

• The sign for the toilet is large and clear. It is just words, no picture.

Provider Response:

We have put a new poster on the patient toilet door with words and a picture.

• The noticeboards were cluttered with a lot of information. The different boards are labelled at the top, but these labels could be bigger making it easier for someone to find what they are looking for.

Provider Response:

The noticeboards on the treatment room wall will be removed as a new patient television call screen is going to be fixed there. The cabling work for this was completed on 15 August, and also a patient self-check in facility will also be installed in the reception area.

• There were a few posters below the reception desk. It may be difficult for some people to read this information.

- The complaints procedure is on the noticeboard. It was only available in small print. When the representatives asked, they were told by reception staff that it is available in large print and can be printed off.
- There was no sign for a hearing loop in the reception/waiting area.

Provider Response:

We do not have a hearing loop in the reception area, therefore we do not have a sign.

• The surgery has an electronic screen. It had a red font on black background. The screen displays the patient's name, the doctor's name and the room that they need to go for their appointment. This may be hard to read for someone who is colour blind. The screen does not have audio, but beeps when a patient is called for their appointment.

Provider Response:

The current patient electronic screen is provided by Jayex. This is currently in the process of being updated as in Point 11 above, to a television call screen and patient self-check in facility. However, we suggest that you contact the manufacturer Jayex, with regards the Accessible Information Standards compliance with this equipment, as we do not have any other option on installation as it is recommended by our local CCG.

- The fire exits were clearly signed in words and pictures. There were two signs in the surgery; one in the waiting room and one in the corridor.
- During the visit, one of the fire exists was not in use. The fire exit in the corridor points to the back entrance. When you follow this sign to the back of the building (along a very short corridor) there is a sign on that door saying "Please do not go out there is wet concrete outside". This renders this fire exit unusable.

Speaking to the assistant practice manager

The manager was on annual leave on the day of the visit. The representative spoke to the assistant practice manager.

• The assistant practice manager said that patients are asked about their communication needs when they register at the surgery.

- When asked about what is put in place for existing patients, the assistant practice manager said that existing patients or their carers usually explain their needs when necessary.
- The needs of the patients are recorded on the database.
- When the patient presents at reception, there is a 'pop up' system and this information is forwarded to the doctor. This means that the doctor is aware of patients who have communication impairments.
- There is no hearing loop in the surgery.

Provider Response:

We made it quite clear that we do not have a hearing loop at the surgery.

- Staff have not been provided with any training to help them communicate effectively with patients.
- There is currently no information available in different accessible formats for patients. This may be available on the new system.

Provider Response:

This is a totally incorrect statement. It was pointed out to your staff that all the Accessible Information Standard forms are saved on our Shared Drive which is accessible to all staff, to print off large print forms if required and posters. We also have some already printed off in the reception area for quick access.

- When asked about the format that information will be provided for an individual with a hearing impairment, the assistant practice manager said that they will use lip reading and write things down. For someone with a visual impairment, they will provide the person with large print.
- The practice is able to access BSL interpreters for people who need it. However they are unable to access Signalong or Makaton.
- The assistant practice manager was unsure of the organisations that they use to book interpreters.

Provider Response:

The Assistant Practice Manager could not remember the name of the organisation we use for interpreting services but could show the visitor the poster in reception with all the booking details. It is the Big Word we use in Redbridge.

- The practice does not have a communications book.
- When asked how they would support the next of kin/carer with a communication impairment, the assistant practice manager said that they will find ways and means of getting through to the person.

Speaking to other staff (receptionists)

Representatives spoke to one staff member.

- The staff member said that she is aware of the Accessible Information Standard. An email was sent to all staff members from the practice manager.
- Staff have not been provided with any training for supporting people with visual impairments, hearing impairments and learning disabilities.
- The staff member said that she would be interested in any training regarding Accessible Information Standard.
- There is a database to identify patient's communication impairments.
- The staff member said that at the present moment, nothing is in place to ensure that a Deaf person knows when it is their turn to go into the consulting room. However, if the patient does not respond then the doctor comes out to call him/her.

Provider Response:

If a Deaf person is awaiting an appointment in the reception area we would have already organised a Big Word interpreter for their appointment or they come with an advocate. If they are alone, then the receptionist would go into the reception area and take the patient into the consulting room when called by doctor.

- Staff said that there is no hearing loop.
- The staff member said that she is aware of how to provide information in different formats but this is due to common sense rather than training.
- With regards to people with learning disabilities, the surgery relies on carers for any necessary information. The staff member was not aware of easy read information.
- The staff member was unaware of what a communication book is.
- The fire alarm does not have flashing lights. In the event of a fire, staff will help patients evacuate the building.

Provider Response:

We do not have a fire alarm.

• A fire drill has not been conducted recently.

Provider Response:

There is a list of our fire drills in the Practice Managers office with dates and times of the drills. The last two drills were held on a Thursday when the member of staff interviewed did not work.

Speaking to patients

Representatives spoke to four patients during the visit.

- Three of the patients said that they were not asked about their communication needs.
- One patient said that she was unsure but she thinks that staff asked her about her hearing impairment.
- One of the patients we spoke to has a hearing impairment. The patient said that staff are aware of her communication needs.
- She felt that all staff members were able to help her effectively according to her communication needs.
- She did not feel that there was anything that staff needed to do to improve the way information is provided to her.

Recommendations

- 1. To make the website more accessible, patients should be able to;
 - Change the colour of the background because some people cannot read text if there isn't sufficient contrast between the 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®⁴) especially for people with visual impairments.

Provider Response:

The website is hosted off site, and so we have very little editing ability.

- 2. A Communications handbook⁵ with basic images of common BSL and Makaton symbols should be available in the reception thus enabling staff to communicate more effectively with patients who have communication impairments.
- 3. 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. Staff should be trained on how to provide information in an accessible format for patients with learning disabilities.

Provider Response:

We have a learning disability register here at the practice. All learning disability patients come with their carers or advocates, but we are happy to have any training regarding this.

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/Thehospitalcommunicationboo k-part1.pdf

5. The surgery should consider changing the fire alarms so that there is a flashing light as well when the alarm sounds.

Provider Response:

We do not have an electronic fire alarm.

6. Whilst the refurbishment is taking place, the fire exit in the corridor should be covered so that patients are not directed to the wrong exit.

Provider Response:

The back fire exit has been out of action whilst our building work has been taking place. This exit is completely blocked at present.

- 7. Patients should be informed that they can get the complaints/compliments procedure in different formats such as large print and audio.
- 8. Posters and leaflets in the waiting area should be simple to understand and accessible for people with communication needs.
- 9. It would be useful to reduce the amount of information on the wall and noticeboard, as this makes it difficult for patients to notice important information.
- 10. The surgery should get a hearing loop system and provide training for staff members on how to use the hearing loop.
- 11. The surgery should consider highlighting the edge of the ramp so that it is easier for people with visual impairments to notice it.
- 12. Staff should be provided with the necessary procedure for assisting Deaf people out of the building in the case of a fire.
- 13. Signs in the premises should be clear and legible. The surgery should consider putting a picture on the toilet door.

Provider Response:

We have already put a new sign on the patient toilet door which states words and pictures.

14. Staff should be informed of the organisations that they can use to book interpreters.

15. The surgery needs to put a procedure in place to identify communication needs of existing patients.

Provider Response:

We already have a procedure in place identifying existing patients with communication needs as they are already flagged up on our clinical system.

For any newly registered patients their communication needs are identified at new patient check with the HCA and the Accessible Information Standards template is completed by the HCA and is then read coded with the code 9Nf.

Service Provider Responses

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

Distribution

- Goodmayes Medical Practice
- Redbridge Clinical Commissioning Group
- Barking, Havering and Redbridge Quality Surveillance Group
- Care Quality Commission
- Healthwatch England

Appendix 1 - Website accessibility checklist

| Questions | | | |
|---|-----------|-----|--|
| Can you change the text size? | Yes | No | |
| | | | |
| | Comments | | |
| | | | |
| | | | |
| Can you change the colour of the | Yes | No | |
| packground? | 105 | 110 | |
| | Comments | | |
| | | | |
| | | | |
| loss the website have a "siteman" | Vac | No | |
| Does the website have a "sitemap" outton? | Yes | No | |
| | Comments | | |
| | | | |
| | | | |
| | | | |
| Are there keyboard shortcuts? / Can /ou navigate the website without a | Yes | No | |
| nouse? | Comments | | |
| | | | |
| | | | |
| | | | |
| Does the website have audio content? | Yes | No | |
| | Comments | | |
| | Commence | | |
| | | | |
| | | | |
| s the website content written in "plain | Yes | No | |
| English"? | · · · · · | | |
| | Comments | | |
| | | | |
| | | | |
| Additional comment | | | |
| | | | |
| | | | |

| Observation Checklist | | bigns in various formats including pictures (e.g. on toilet 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 | iments: |
| Date: | | communication, is plain language - is plain language used | |
| Observations/Ottestions | | Complaint/compliments procedure information is | Yec No |
| Getting to the Service: | | 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 | | 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 | N | | Commenter |
| unp nigningneed to keep | Comments. | | |
| people off meven surface | | | _ |
| | | Does the surgery have an electronic screen to | |
| Fire alarms have a light as well as sound | No | inform patients of their appointment - if so what | |
| S | 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 | ٩ ٧ | | |
| Words | | Further Comments: | |
| Se | Comments: | Please provide any relevant information about accessible information | |
| Within the premises: | | | |
| Are there trip hazards/sharp edges/furniture in Yes pathway (both permanent & temporary) | Ŷ | | |
| | Comments: | | |

Appendix 2 - Observation sheets

Appendix 3 - Questions for lead staff

r r ۶ £ £ Yes Comments Comments Yes Comments Comments Comments Comments Comments Comments Inform them that we will send a copy of the report within 20 working days for your comments & corrections if necessary. Yes Yes Yes NOTE FOR REPS. If they have one, please ask to see it communication needs, is information provided to 18. If the next of kin/carer of the patient had any and symbols to help people to communicate) 20. Is there anything you would like to share with MAKATON (a language programme using signs 16. Where/which organisations might you access How would you know this and would it be on them in a format that is accessible to them? BSL (British Sign Language) interpreters 17. Do you have a communication book? Information for Manager when leaving and comment on what you have seen the above if you use them? Signalong (based on BSL) Are you able to access: Healthwatch Redbridge? the patients records? £ ۶ £ ខខខខ £ Last date of training Comments Comments 8. Is there a hearing loop in the surgery, if there is Comments Comments Comments Comments Comments Comments Yes Yes Yes Yes es) es, Have staff been provided with training on how to Yes doctor/nurse dealing with the patient whilst they 0. Are patients made aware that a hearing loop is What training is provided to support all staff to Deaf awareness training Communication training Is information available in different formats to patients aware of this? For example: large print, 40TE FOR REPS: Please ask to see examples of this 14. What format do you provide for people with: possible and comment on what you have seen 7. Is there a process in place to ensure that the communication needs before they start to make it accessible to all patients and are communicate effectively with patients? How often do you have this training? are in the surgery are aware of their Fixed/Portable/Both easy read, Braille, Audio. what type of loop is it? a. Hearing impairment Learning disabilities Dementia awareness b. Visual impairment nteract with them? Easy read training available? use it? ۶ ₽ Please explain Comments Comments Comments Comments Comments Questions for MANAGER/PERSON IN CHARGE at Yes Yes. 6. If there is no system in place can you explain the needs when they first register at the surgery? For What have you put in place for existing patients NOTE FOR REPS: If the manager seems unsure you can When a patient presents at reception, is there a Are they asked if they have a learning disability? How are these needs recorded if they have any? . Are patients asked about their communication Are they asked if they have difficulties with prompt them with the following questions: to ensure that you are aware of their **GP Surgery** 'pop up' which flags their needs? Name of Authorised Representatives: If yes, what system do you use? Are they recorded on a database? communication needs? Name of lead manager: Or by any other means? reasons for this? sight/hearing? lame of Surgery: example: Date:

| | | No | Ņ | P | Ŷ | | | | | | | | | ٩ | | | |
|--|--|---|---|---|--|--|---|--|--|--|--|--|--|--|---|---|--------------|
| 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 | 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 | Bo 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? | 11. Has there been a fire drill and if yes, did it flag | the and broncerio. | Is there anything you would like to share with Healthwatch Redbridge? | |
| | | | | | | | | | | | | | | | | | |
| | | | ٩ | | | | Ŷ | Ñ | | Ŷ | | Ŷ | | | | | |
| Surgery | | | Yes Comments | | | | Yes Comments | Yes | | Yes | Comments | Yes Comments | Comments | | | Comments | |
| Questions for STAFF in GP Su 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 | 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-tine Face to face | I samine Dicabilities | On-line Eace Both Both | 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 | impairments or 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 4 - Questions for other staff

| No plain | No | plain | 8 | | S | | | | plain | | | | | | | |
|--|--|----------------|---|----------|---|--|--|---|--------------------------------------|---|--|--|--|----------------|---|--|
| Yes Yes Please explain | Yes | Please explain | Comments | | Comments | | Yes | No | Please explain | | _ | _ | | | | |
| 5a. 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 | | If not, how do you feel this could be improved? | | 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 vour | communication needs have not been met? For example, when being called for an | appointment or provided with written | | Is there anything else you would like to talk to us about? | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | No | | No | No | | No | | , D | | | No | ain | No | ain |
| 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 Surgery: | Name of Authorised Representatives: | Date: | micro you registered at the surgery were you asked SPECIFICALLY if you had any: hearing problems | 0 | problems with your sight | Or needed easy read information? | How were you asked about this? | Do you HAVE a communication need such as | those mentioned above? | <u>NOTE FOR REPS</u> : If the patient answers yes, please continue with the questions, if they | answer no, please say "we are here today to | speak to patients with communication needs, so we don't need to keep you any longer. Thank you." | 4. Are staff aware of your communication | | 5. Do you feel that reception staff are able to | netp you effectively according to your communication needs? |

Appendix 5 - Questions for Patients

Healthwatch Redbridge

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