



**Enter & View
Report**

**Grove Surgery
200-202 Chadwell Heath Lane,
Chadwell Heath,
Romford, Essex
RM6 4YU**

Tuesday 11th July

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	Grove Surgery 200-202 Chadwell Heath Lane, Chadwell Heath , Romford, Essex, RM6 4YU
Contact Details	Practice manager- Jackie Dorman
Date/time of visit	Tuesday 11th July, 10am -12:00pm
Type of visit	Announced visit
Authorised representatives undertaking the visits	Chandra Patel David Marks Sarah Oyebanjo (staff support)
Contact details	Healthwatch Redbridge 1st Floor, 103 Cranbrook Road Ilford, Essex IG1 4PU 020 3874 4120

Acknowledgements

Healthwatch Redbridge (HWR) would like to thank the staff and patients at Grove 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 11th 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 <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

The surgery does not have a website.

Results of the visit

Observations made outside the premises:

- The sign in front of the surgery is large and easy to see from a distance. The name of the surgery is written in a blue font on a white background.
- Parking in front of the surgery is for staff members but patients can be dropped off right in front of the surgery. There is parking across the road for patients.
- It is easy to identify the main entrance. There is level access to the surgery meaning a ramp/lift is not necessary.

Observations made inside the premises:

- The waiting area was well lit and one receptionist sits facing the glass window screen whilst two staff members were on the telephone.
- There were no trip hazards/sharp edges in the waiting area.
- Representatives observed the interaction between staff and service users. Staff were facing service users when talking to them and used body language and gestures when necessary.
- In one instance, the receptionist was talking to a service user whose first language was not English. She used gestures to explain information to the service user.
- The noticeboards were not cluttered but not all the notices were legible due to the font used. Also, one of the noticeboards is high up, which might make it more difficult for some people to read the information presented on the board.
- There was no information about the complaints/compliments procedure on the noticeboard. However, when asked by one of the representatives, the practice manager provided the procedure.

Provider Response:

I did explain, at the time of your visit, the reason why the complaints procedure was not on the notice board at that moment in time as it was due to the fact that I had just altered the wording overnight and was waiting for it to be laminated the next day once our administrator came into the work, before fixing it our noticeboard.

- The fire exits were clearly signed in various formats.
- On the toilet door, there were pictures but no words. However, there was no signage to the toilet so the patient would have to ask at reception.

Provider Response:

We have put up a notice for the patients toilet which directs patients to the toilet.

- There was no information about the Accessible Information Standard on the noticeboards. Also, patients were not asked to inform staff about their communication needs.
- There was a hearing loop sign on the glass window screen in reception.
- An electronic screen was placed above the reception area. Patients name and the doctor's name was displayed in a red font on the black background. This may be hard to read for someone who is colour blind. It does not have an audio sound but staff said that if the person is Deaf then the doctor will come out and inform them that it is their turn.
- The fire alarm has flashing lights as well as sound.

Speaking to the practice manager

- The manager said that patients are asked about their communication needs when they first register at the surgery.
- Patients' needs are recorded on the database and there is a flagging system, which alerts the staff about the person's needs.
- The manager mentioned that they have 24 patients with learning disabilities and they are called annually for assessments. One of the doctors also conducts home visits for patients with learning disabilities.
- The manager said that she has received training for supporting patients with different communication needs.
- There is a portable hearing loop in the surgery, which the patient can take in to their appointment. However, the other member of staff mentioned that the hearing loop is fixed. Patients are made aware of the hearing loop because there is a sign in reception informing them of the loop system. On 31st August, a representative checked the portable hearing loop and it was working adequately.
- The manager said that staff are aware of how to communicate with people who have a hearing impairment, visual impairment and learning disability.
- The surgery does not have a communications book⁴ but the manager is interested in obtaining this book.

⁴ Example of a standard hospital communication book can be found at:

<http://www.uhs.nhs.uk/Media/SUHTInternet/PatientsAndVisitors/Learningdisabilities/Thehospitalcommunicationbook-part1.pdf>

- Patients are provided with information in a variety of formats such as large print depending on their needs.
- People with hearing impairments are provided with information by booking an interpreter, lip-reading or writing down the information.
- People with visual impairments are provided with interpreters, large print information and the receptionist will help them as well.
- Representatives were told that people with learning disabilities tend to come with their carers.
- The surgery is able to book interpreters for Deaf patients.

Speaking to other staff (receptionists)

Representatives spoke to one other member of staff during the visit.

- The staff member was unaware of what the Accessible Information Standard meant until the representative explained it to her.
- The staff member said that they have been provided with information about supporting people with communication impairments. However, they have not received specific training for visual impairment, hearing impairment and learning disabilities.
- The staff member said that she feels that Accessible Information Standard training would be beneficial.
- Patients' needs are identified and flagged up on the computer system whenever they visit the GP practice.
- If a patient with a hearing impairment was waiting for their appointment, the name will appear on the screen.
- If the person does not go to the doctor's room, the doctor will call the receptionist to ask why the patient has not come in then the receptionist will take the patient in to see the doctor.
- The staff member also mentioned that the patient will have an interpreter with him/her so the interpreter is able to alert the person that they should go into the doctor's room.
- There is a fixed hearing loop and there is a sign on the glass window to inform patients that this is available.

Provider Response:

Our Induction hearing loop is Portable and Not Fixed.

Healthwatch Redbridge Response:

Healthwatch revisited the surgery and can confirm that it is a portable hearing loop. The hearing loop was tested and it is working.

- The staff member said that she is aware of the ways to provide information for people with communication needs. She also showed the representatives a folder containing information on how to support people with communication impairments.
- When asked how the staff member would support someone with a hearing impairment, she said that she will book an interpreter.
- A patient with a visual impairment will be provided with large print information and someone with a learning disability would be supported to complete the registration form if necessary. They will also take their time to explain anything necessary to the person.
- There is no communications book in the reception.
- Staff said that in the case of an emergency, staff members will check all the rooms in the building to ensure that everyone has left.
- There was a fire drill about six months ago and no problems were identified.

Speaking to patients

Representatives only spoke to one patient. He said that he registered a while ago so he was unsure whether staff asked about his communication needs.

Recommendations

1. The surgery should consider having a website so that patients can access any necessary information on there. This website should be accessible to people with communication impairments.

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.
- Access website information via screen readers and translation software (such as Browesaloud®⁵) especially for people with visual impairments.

Provider Response:

The Surgery is endeavouring and actively looking into setting up the practices Website in order to facilitate registered patients as well as those who are considering to join our practice.

2. A Communications handbook⁶ 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.

Provider Response:

Communications Handbooks with basic BSL and Makaton Symbols for our Reception team have been ordered and we await delivery.

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

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

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

<http://www.uhs.nhs.uk/Media/SUHTInternet/PatientsAndVisitors/Learningdisabilities/Thehospitalcommunicationbook-part1.pdf>

individual. This is because it compromises a patients' right to privacy and dignity.

Provider Response:

We have protocols in place which help us to understand the medical and physical needs of the patients with carers so that we can create a direct rapport with these cohort of patients. This will help reduce our reliance on the carers, family and friends both for the medical and physical needs as well as their privacy and dignity.

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.

Provider Response:

The practice is actively looking into training for visual impairment and deaf awareness. This will be on an annual roll on programme.

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

Provider Response:

The Practice is providing in house training on how to provide information in accessible format for patients with learning disabilities. The staff are also currently completing on line training for Learning Disabilities Awareness through the Blue Stream Academy.

6. The complaints/compliments procedure should be available on the noticeboard and it should also be available in a variety of formats such as large print.

Provider Response:

Our Complaints / Compliments procedures are on display on our notice boards and they have been set up in various formats. These have now replaced our original complaints/compliments procedure.

7. The surgery should consider bringing the noticeboard to eye level as it might be difficult for some patients to read the information if it is high up.

Provider Response:

The Surgery will consider bringing the noticeboard to eye level due to difficulties that patients may have in reading some of the information.

8. Information about Accessible Information Standard should be available in the waiting area. If possible, the poster should be A3 so that it stands out.

Provider Response:

The practice has 2 x A3 notices in various formats for Accessible Information Standards - These are on display in the patients' reception area.

9. Staff should be provided with the necessary procedure for assisting Deaf people out of the building in the case of a fire.

Provider Response:

Staff have been provided with the necessary procedure for assisting Deaf people out of the building in the case of a fire. This training will be on an annual basis.

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

Provider Response:

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

Service Provider Responses

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

Distribution

- Grove 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	Yes	No
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: Accessible Information

Observation Checklist

Name of Surgery: _____

Name of Authorised Representative: _____

Date: _____



Observations/Questions	Yes	No
Getting to the Service: There is sufficient and clear signage to the premises being visited: signs are clear, unobstructed and easily readable	Yes Comments:	No Comments:
There is accessible & sufficient parking available close to the entrance - drop off point directly outside the entrance	Yes Comments:	No Comments:
A ramp/lift is available, or there is a working assistance bell - <i>Edge of ramp highlighted to keep people off uneven surface</i>	Yes Comments:	No Comments:
Fire alarms have a light as well as sound	Yes Comments:	No Comments:
Fire exits clearly signed in various formats. Words Pictures	Yes Comments:	No Comments:
Within the premises: Are there trip hazards/sharp edges/furniture in pathway (both permanent & temporary)	Yes Comments:	No Comments:

Signs in various formats including pictures (e.g. on toilet doors - are they clear/contrasting/pictures)	Yes Comments:	No Comments:
Interaction between staff and service users; are they facing service user whilst talking to them using body language to communicate as well as verbal communication, is plain language - is plain language used	Yes Comments:	No Comments:
Complaint/compliments procedure information is available in alternative formats - for patients & relatives - is it on the noticeboard	Yes Comments:	No Comments:
Are the noticeboards cluttered, and are the notices easily legible	Yes Comments:	No Comments:
Is there a hearing loop sign?	Yes Comments:	No 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		

Appendix 3 - Questions for lead staff

Questions for MANAGER/PERSON IN CHARGE at

GP Surgery

Name of Surgery: _____
 Name of lead manager: _____
 Name of Authorised Representatives: _____
 Date: _____

	Yes	No
1. Are patients asked about their communication needs when they first register at the surgery? For example: <ul style="list-style-type: none"> Are they asked if they have difficulties with sight/hearing? Are they asked if they have a learning disability? 	Please explain	
2. What have you put in place for existing patients to ensure that you are aware of their communication needs?	Comments	
3. How are these needs recorded if they have any? <i>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?</i>	Comments	
4. When a patient presents at reception, is there a 'pop up' which flags their needs?	Yes	No
5. If yes, what system do you use?	Comments	
6. If there is no system in place can you explain the reasons for this?	Comments	

	Yes	No
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?	Comments	
8. Is there a hearing loop in the surgery, if there is what type of loop is it? <ul style="list-style-type: none"> Fixed/Portable/Both 	Comments	
9. Have staff been provided with training on how to use it?	Yes	No
10. Are patients made aware that a hearing loop is available?	Yes	No
11. What training is provided to support all staff to communicate effectively with patients? Deaf awareness training Dementia awareness Easy read training	Last date of training Yes Yes Yes Yes	No No No No
12. How often do you have this training?	Comments	
13. Is information available in different formats to make it accessible to all patients and are patients aware of this? For example: large print, easy read, Braille, Audio. <i>NOTE FOR REPS: Please ask to see examples of this if possible and comment on what you have seen</i>	Yes	No
14. What format do you provide for people with: a. Hearing impairment b. Visual impairment c. Learning disabilities	Comments	

	Yes	No
15. Are you able to access: <ul style="list-style-type: none"> BSL (British Sign Language) interpreters Signalong (based on BSL) MAKATON (a language programme using signs and symbols to help people to communicate) 	Yes Comments	No Comments
16. Where/which organisations might you access the above if you use them?	Comments	
17. Do you have a communication book? <i>NOTE FOR REPS: if they have one, please ask to see it and comment on what you have seen</i>	Yes	No
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?	Yes	No
19. How would you know this and would it be on the patients records?	Comments	
20. Is there anything you would like to share with Healthwatch Redbridge?	Comments	

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.

Appendix 4 - Questions for other staff

Questions for STAFF in GP Surgery

Name of Surgery: _____

Name of Authorised Representatives: _____

Dates: _____

	Yes Comments	No Comments
1. Are you aware of the Accessible Information Standard (AIS)?		
2. Have you been provided with training on how to support patients with:		
<p>NOTE FOR REPS: If they answer yes, please ask what type of training it was and tick the appropriate box</p> <ul style="list-style-type: none"> Visual impairments: blind & partially sighted <ul style="list-style-type: none"> On-line <input type="checkbox"/> Face to face <input type="checkbox"/> Both <input type="checkbox"/> Hearing impairments: profoundly deaf & hard of hearing <ul style="list-style-type: none"> On-line <input type="checkbox"/> Face to face <input type="checkbox"/> Both <input type="checkbox"/> Learning Disabilities <ul style="list-style-type: none"> On-line <input type="checkbox"/> Face to face <input type="checkbox"/> Both <input type="checkbox"/> 		
3. Do you feel that you would benefit from any other training with regard to AIS?	Yes Comments	No Comments
4. How would a patient that has a specific need be identified? i.e. had hearing impairments, visual impairments or learning disability? <ul style="list-style-type: none"> Would it be flagged up on the computer system Electronic system A card provided by surgery they show to staff on arrival 	Yes Comments <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	No Comments
5. How would a patient with a hearing impairment know that they had been called for their appointment? <i>Please ask staff member to describe this</i>	Comments	Comments

	Yes Comments	No Comments
6. Is there a hearing loop in the surgery, if there is what type of loop is it? <ul style="list-style-type: none"> Fixed/Portable/Both 	Yes Comments	No Comments
7. Are you aware of the ways that information should be provided for people with: <ul style="list-style-type: none"> hearing impairments visual impairments learning disability? <p>If yes, what are they?</p> <p>NOTE FOR REPS: If the member of staff is struggling to give some examples you can prompt them.</p> <ul style="list-style-type: none"> Hearing impairments - British sign language, subtitles on TV Visual impairments - Large print or audio Learning disabilities - Easy Read 	Yes Comments	No Comments
8. Do you have a communications book?	Yes Comments	No Comments
9. 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? <ul style="list-style-type: none"> Flashing red light 	Yes Comments	No Comments
10. In the event of a fire, what is the procedure for evacuating those who are Deaf or Blind?	Comments	Comments
11. Has there been a fire drill and if yes, did it flag up any problems?	Yes Comments	No Comments
12. Is there anything you would like to share with Healthwatch Redbridge?	Comments	Comments

Appendix 5 - Questions for Patients

Questions for PATIENTS at GP Surgery

Name of Surgery: _____
 Name of Authorised Representatives: _____
 Date: _____

1. When you registered at the surgery were you asked SPECIFICALLY if you had any: <ul style="list-style-type: none"> • hearing problems • problems with your sight • Or needed easy read information? 	Yes Comments No Comments Yes Comments No Comments
2. How were you asked about this?	
3. Do you HAVE a communication need such as those mentioned above? <i>NOTE FOR REPS: 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."</i>	Yes Comments - Please state No
4. Are staff aware of your communication needs?	Yes Please explain No
5. Do you feel that reception staff are able to help you effectively according to your communication needs?	Yes Please explain No

5a. Do you feel that the doctors are able to help you effectively according to your communication needs?	Yes Please explain No Please explain
5b. Do you feel that the nurses are able to help you effectively according to your communication needs?	Yes Please explain No Please explain
6. If not, how do you feel this could be improved?	Comments
7. What, if anything can be done to improve the way information is provided to you? For example: <ul style="list-style-type: none"> • large print, • audio (spoken/recorded information) • easy read 	Comments
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	Yes No Please explain
9. Is there anything else you would like to talk to us about?	_____

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