



**Enter & View  
Report**

**Palms Medical Centre  
97-101 Netley Road,  
Newbury Park,  
Ilford, Essex  
IG2 7NW**

**Wednesday 19th 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.

[www.healthwatchredbridge.co.uk](http://www.healthwatchredbridge.co.uk)

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<b>Service Provider</b>	<b>Palms Medical Centre 97-101 Netley Road, Newbury Park, Ilford, Essex IG2 7NW</b>
<b>Contact Details</b>	<b>Practice manager- Aysen Ismail</b>
<b>Date/time of visit</b>	<b>Wednesday 19<sup>th</sup> July 2017, 1.30pm - 3.30pm</b>
<b>Type of visit</b>	<b>Announced visit</b>
<b>Authorised representatives undertaking the visits</b>	<b>Hyacinth Osborne Neil Adie Sarah Oyebanjo (staff support)</b>
<b>Contact details</b>	<b>Healthwatch Redbridge 1st Floor, 103 Cranbrook Road Ilford, Essex IG1 4PU  020 3874 4120</b>

## Acknowledgements

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

## Disclaimer

Please note that this report related to findings observed during our visit made on Wednesday 19th 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 programme<sup>1</sup> 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.

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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 Standard<sup>2</sup>. 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 1<sup>st</sup> 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.

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<sup>2</sup> <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 report<sup>3</sup> 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.

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

At the end of the visit, staff members were informed that a draft report would be sent to them. A draft report was sent to each GP practice and they were given 20 working days to respond with their comments.

## Reviewing website accessibility

In addition to visiting the GP practices, all the practice websites were checked to find out whether they are accessible for people with communication impairments.

Three volunteers assessed each website using a checklist (Appendix 1) devised by HWR staff members. Two of the volunteers who reviewed the website had communication impairments; one of the volunteers was Deaf and the other volunteer has Asperger's Syndrome.

## Results of website review

- It is not possible to change the size of the text on the website.
- The colour of the background cannot be changed.
- The images have text descriptions explaining what the image is about.
- The website has a “sitemap” button.
- 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:

- There is sufficient and clear signage to the premises. There is a large sign in black writing against white background over the front entrance.
- Opening hours are clearly marked, but in small print.
- There is parking for staff and doctors, as well as two designated accessible parking bays available.
- A ramp is available however there is no rail and the sides are not highlighted.

### Observations made inside the premises:

- During the visit, some of the lights in reception were not switched on. This meant that it was dark and it would be harder for a Deaf person to lip read.
- An authorised representative who is Deaf and has a visual impairment approached the receptionist to inform her about the visit. He noted that the receptionist's chair was quite low and the gap between the glass screens was fairly narrow.
- When the authorised representative asked about the hearing loop, the staff member was unsure about how it works and she mentioned that it is a new unit.
- There is sufficient signage of facilities, such as toilets, including disabled signs.
- The fire alarms do not have flashing lights.
- There was a fire exit sign above the entrance, however no signs pointing to the fire exit in the back.
- The Accessible Information Standard (AIS) poster was presented on yellow paper. There were two posters; one on the window glass screen in reception and one on the wall in the waiting area. The wall was painted a light yellow colour thus making it harder to notice the poster.
- The complaints/ compliments procedure was not available on the noticeboard.
- Noticeboards were cluttered and some of the information was not legible. Some posters on the noticeboards were colourful and this may be difficult for someone with a visual impairment to see. A staff member said that they use several colours to make it more eye catching.
- An example of a poster that was not accessible was a poster on the noticeboard with contact details of organisations in Redbridge. The details were written in a white font on grey background. This may not



be legible for someone with a visual impairment. Also, the font size of the details was small.

- The hearing loop sign is placed in reception. It is clear and easy to see the sign.
- There is an electronic screen in the waiting area, screen is black with red writing. There is a beep sound when the patients name and room number appear on the screen. A patient informed the representative that the sound does not always work.

### Speaking to the practice manager

The practice manager is new and only started in May.

- The practice manager said that patients are asked about their communication needs when they first register at the surgery. The authorised representative was shown a registration form. The registration form had information about the correspondence format required by the patient and asked patients whether they would like information in a regular format, auto tape, large print or braille.
- The manager is relatively new and is trying to put systems in place to make staff aware of patients communication needs.
- Communication needs are recorded electronically on the computer systems.
- The manager was uncertain of a 'pop up' system flagging patient's needs, but thinks that the practice may have it in place.
- The computer system used by the practice is called Vision but this is due to be changed in a few months.
- The doctor and nurses are informed of the patient's communication need by the flagging system.
- There is a new portable hearing loop. The manager said that staff have been trained to use the new hearing loop. Patients are made aware of this hearing loop.
- The practice manager was unsure of the training provided to staff with regards to deaf awareness, communication training, and easy read training.
- When asked about how information is provided in an accessible format, the practice manager only mentioned easy read leaflets.
- The manager was unsure of what is available (BSL interpreters, Singalong, MAKATON) but is looking at updating all systems.
- The practice does not have a communications book.

## Speaking to other staff (receptionists)

Representatives spoke to one member of staff during the visit.

- The staff member told us that staff are aware of the Accessible Information Standard as it is saved on the shared drive. She said staff have been provided with general training on AIS via online learning. The staff member also said that she has received online training for supporting patients with visual impairments, hearing impairments and learning disabilities.
- Patient's specific needs would be flagged up via computer system. They are currently using the Vision system, but will be getting the EMIS<sup>4</sup> system in October.
- When asked about how a patient with a hearing impairment would know when it is their turn for their appointment, the staff member said that there is a call system which shows patients name and room number. She also said that the electronic screen beeps. The representative explained that a Deaf patient would not be able to hear when it beeps. The staff member then said that a staff member would call the patient if necessary.
- There is a hearing loop in reception but the staff member said that she does not know how it works.
- When asked about how the staff member would support someone with a hearing impairment, she said that she would print off information for the person. For someone with a visual impairment, there is not much in place and staff would not know what to do.
- For a patient with a learning disability, staff would provide the information in an easier format. If necessary, the patient would be taken into a quiet room.
- The staff member also mentioned that there are learning disability sessions with the doctor. These sessions take place a few times in a month.
- The staff member also mentioned that most patients with learning disabilities come to their appointments with their carers.
- There is no communications book.
- The staff member said they would help patients outside of the building in the case of fire. The fire alarm has no flashing light.
- The staff member said they do not practice fire drills with patients.
- They have never had anyone ask for an interpreter, and are able to use relay services for people who are Deaf. They can also use email/online services for people who are Deaf and cannot call in to the practice, but they do not have facilities for patients to text into the surgery.

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<sup>4</sup> EMIS is an electronic patient health record system used by many GPs

- Staff members are able to provide printed information for patients in a way they prefer and they can get braille documents if needed. The authorised representatives were shown a leaflet that they had ordered in braille for a patient.

### Speaking to patients

Representatives spoke to two patients during visits.

- Both patients stated they were not asked specifically about communication needs. Both patients stated they had no communication needs.

## 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®<sup>5</sup>) especially for people with visual impairments.
2. A Communications handbook<sup>6</sup> 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. 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. The complaints/compliments procedure should be available on the noticeboard in a variety of formats such as large print for patients.
5. Poster about Accessible Information Standards should be printed on large white A3 paper if possible.
6. The surgery should provide training for staff members on how to use the hearing loop and also ensure that it is working properly.
7. The surgery should put a heading at the top of each noticeboard so that patients can easily identify relevant information. The boards should be free of clutter.
8. Fire drills should be practiced with patients so that staff know how to support patients in the event of a fire.
9. The surgery should consider 'highlighting the edge of the ramp to ensure that people with visual impairments are able to see it.

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

<sup>6</sup> 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.

## Service Provider Responses

1. We have had installed a new Patient Call display in our waiting room so that it will speak out the patients name and flash on the screen what doctor is ready to see them in which doctors room. We go over to EMIS on the 3<sup>rd</sup> October and the Screen has already been installed and the software will be installed a week after 3<sup>rd</sup> October as it needs to link to EMIS to work.

2. We are in the process of arranging training for all staff to use the hearing loop. They have all been given an overview but not fully aware of how it fully works so we need to get them trained - can you advise of where to get this?

3. Our Fire Exit for ALL Patients and staff that work downstairs will ONLY be the front doors exit to the surgery that's why we do not have a sign that indicates to the back entrance. The back entrance would be a Fire Exit to staff working upstairs in the building and no patients are allowed upstairs in the surgery.

### Distribution

- Palms Medical Centre
- 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
<b>Getting to the Service:</b> 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:
<b>Within the premises:</b> 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		
<b>Further Comments:</b> 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: \_\_\_\_\_

1. Are patients asked about their communication needs when they first register at the surgery? For example: <ul style="list-style-type: none"> <li>Are they asked if they have difficulties with sight/hearing?</li> <li>Are they asked if they have a learning disability?</li> </ul>	Yes	No
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?	Comments	
<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>		
4. When a patient presents at reception, is there a 'pop up' which flags their needs?	Yes	No
Comments		
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	

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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?	Yes	No
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"> <li>Fixed/Portable/Both</li> </ul>	Comments	
9. Have staff been provided with training on how to use it?	Yes	No
Comments		
10. Are patients made aware that a hearing loop is available?	Yes	No
Comments		
11. What training is provided to support all staff to communicate effectively with patients? Deaf awareness training Communication training Dementia awareness Easy read training	Last date of training	
Yes		
No		
Yes		
No		
Yes		
No		
Comments		
12. How often do you have this training?	Comments	
Yes		
No		
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
Comments		
14. What format do you provide for people with: a. Hearing impairment b. Visual impairment c. Learning disabilities	Comments	

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15. Are you able to access: <ul style="list-style-type: none"> <li>BSL (British Sign Language) interpreters</li> <li>Signalong (based on BSL)</li> <li>MAKATON (a language programme using signs and symbols to help people to communicate)</li> </ul>	Yes	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
Comments		
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
Comments		
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.

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## 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:  NOTE FOR REPS: <i>If they answer yes, please ask what type of training it was and tick the appropriate box</i> <ul style="list-style-type: none"> <li>Visual impairments: blind &amp; partially sighted                              On-line <input type="checkbox"/>                              Face to face <input type="checkbox"/>                              Both <input type="checkbox"/></li> <li>Hearing impairments: profoundly deaf &amp; hard of hearing                              On-line <input type="checkbox"/>                              Face to face <input type="checkbox"/>                              Both <input type="checkbox"/></li> <li>Learning Disabilities                              On-line <input type="checkbox"/>                              Face to face <input type="checkbox"/>                              Both <input type="checkbox"/></li> </ul>	Yes Comments	No Comments
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? <input type="checkbox"/> If had hearing impairments, visual impairments or learning disability? <ul style="list-style-type: none"> <li>Would it be flagged up on the computer system</li> <li>Electronic system</li> <li>A card provided by surgery they show to staff on arrival</li> </ul>	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>	Yes Comments	No 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"> <li>Fixed/Portable/Both</li> </ul>	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"> <li>hearing impairments</li> <li>visual impairments</li> <li>learning disability?</li> </ul> If yes, what are they?  NOTE FOR REPS: <i>If the member of staff is struggling to give some examples you can prompt them.</i> <ul style="list-style-type: none"> <li>Hearing impairments - British sign language, subtitles on TV</li> <li>Visual impairments - Large print or audio</li> <li>Learning disabilities - Easy Read</li> </ul>	Yes Comments	No Comments
8. Do you have a communications book?  NOTE FOR REPS: <i>If they have one, please ask to see it and comment on what you have seen</i> 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"> <li>Flashing red light</li> </ul>	Yes No Comments	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"> <li>• hearing problems</li> <li>• problems with your sight</li> <li>• Or needed easy read information?</li> </ul>	Yes Comments  Yes Comments  Yes Comments	No  No  No
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"> <li>• large print,</li> <li>• audio (spoken/recorded information)</li> <li>• easy read</li> </ul>	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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