



Kenwood Medical Centre Kenwood Gardens, Ilford, Essex IG2 6YG

Monday 24th July 2017

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Please contact us for more details.

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Service Provider	Kenwood Medical Centre Kenwood Gardens, Ilford, Essex IG2 6YG
Contact Details	Practice Manager – Ameena Moghal
Date/time of visit	Monday 24th July 2017, 10:00am- 12:00pm
Type of visit	Announced visit
Authorised representatives undertaking the visits	Hyacinth Osborne Chesing Lee
	Miranda Peers (Staff support)
Contact details	Healthwatch Redbridge
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Acknowledgements

Healthwatch Redbridge (HWR) would like to thank the staff and patients at Kenwood 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 Monday 24th 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.

Introduction

Healthwatch Redbridge (HWR) is conducting Enter & View visits to all GP practices across Redbridge as part of our work programme during July to October 2017.

Last year, Healthwatch Redbridge organised a series of workshops for practice managers across Redbridge, Havering, Barking and Dagenham to inform them about the Accessible Information Standard². These visits are an opportunity for HWR to discover if the standards have been implemented across the borough.

Accessible Information Standard

This standard aims to ensure that people who have a learning disability, communication impairment or sensory loss are provided with information that they can understand. They should also be able to receive support so that they can communicate effectively with health and social care services.

From 1st August 2016, all organisations that provide NHS or social care must follow the standard by law. For organisations to effectively implement the standard, they need to consider their policies, procedures, human behaviour and where applicable, electronic systems.

Purpose of the visit

The visits were planned to evaluate whether GP practices across Redbridge are implementing the standards thereby ensuring that the needs of people with communication impairments are being met.

In addition to the workshop organised for practice managers, HWR also ran workshops for people with communication impairments. The feedback continues to show that people are not receiving information in a way that they can understand.

An example of when a patient's need was not met was when she asked her GP practice to provide information in large print but they continued to give her regular font. On one occasion, she missed her appointment because the letter that the surgery sent to her was not in the right font meaning that she was unable to read it.

² 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 practice does not have a website.

Results of the visit

Observations made outside the premises:

- Signage to the premises is clear and easy to read. There are large signs on both Cranbrook Road and the main entrance.
- There is a car park with two accessible parking spaces and eight spaces for other patients.
- There is a ramp available but it is not highlighted at the edge. Highlighting the edges of the ramp makes it easier for people with visual impairments to notice the ramp.

Observations made inside the premises:

- The reception area was brightly lit and spacious.
- In reception, staff sit facing patients however the computer screen is slightly blocking the staff. This would make it more difficult for a Deaf person to lip read.
- No trip hazards/ sharp edges were identified.
- Signs were available in various formats such as pictures and words in the surgery. Signs to the consulting rooms and toilets were clear.
- On the toilet door, there was a picture and also words.
- There are no noticeboards available. There is one bookcase with leaflets.
- The complaints procedure was not available. A representative mentioned that a feedback box appeared on the reception desk during the visit.
- There was no hearing loop sign. During the visit, a staff member brought the hearing loop in a box out of a cupboard.
- The surgery has an electronic screen to inform patients of their appointment. It is written in a yellow font on black background. The patients name is also called out when it is their turn.
- There was no poster informing patients about the Accessible Information Standard.
- The fire alarm does not have flashing lights as well as sound.

Speaking to the practice manager

The practice manager mentioned that she has only been in post for a few months.

- The manager said that patients are asked about their communication needs when they first register at the surgery. Patients are able to put this information on the registration form.
- A representative was shown a copy of the registration form. It was the regular NHS registration form, which does not ask any specific information about communication impairments.
- There is currently no system in place for identifying the needs of existing patients.
- Patient's communication support needs are recorded on the computer system. The surgery uses the EMIS⁴ database system.
- When a patient presents at reception, if they have a communication need then this is flagged up.
- The doctor/nurse is informed of the patients need when the receptionist books them in for the appointment as they put this information in the comments section.
- The practice manager said that there is no hearing loop.
- After the visit on Monday 24th July, the practice manager contacted Healthwatch Redbridge and informed Healthwatch that the hearing loop had been set up. She then requested for the hearing loop to be checked. Healthwatch Redbridge visited the premises on Thursday 28th September and checked the hearing loop using a checker. The hearing loop was working.
- Staff have not been provided with training on how to support patients with communication impairments.
- The surgery is not currently able to provide information in different formats such as large print and easy read.
- The surgery is not able to access BSL interpreters, signalong and Makaton.
- They have not used any organisations for supporting people with communication impairments.
- There is no system in place to support next of kin/carers who may have a communication impairment.
- There is no communications handbook⁵.

⁴ EMIS is an electronic patient health record system used by many GPs

⁵ Example of a standard hospital communication book can be found at: http://www.uhs.nhs.uk/Media/SUHTInternet/PatientsAndVisitors/Learningdisabilities/Thehospitalcommunicationbook-part1.pdf

Speaking to other staff

Representatives did not speak to any other staff member during the visit.

Speaking to patients

Representatives spoke to five patients during the visit.

- One patient said that he was not asked about his communication needs.
- Three patients said that they were unsure if they were asked about their communication needs.
- One patient said that she was asked about whether she has a disability but she is unsure if she was asked about communication impairments.
- Three of the patients had communication impairments.
- One of the patients has a learning disability. The representative spoke to her sister.
 - Her sister said that staff are aware of the patient's communication needs.
 - She said that staff are able to support her sister effectively according to her communication needs.
 - She mentioned that the service could be improved by ensuring that she is able to get a quicker appointment. She usually has to wait for two weeks. This is difficult for her as there are only certain days that she can come in with her sister.
 - When asked if the surgery could make any improvements with regards to the way information is provided, she said that the information is adequate because her sister will always attend the appointment with a carer.
 - She said that the GP conducts an annual health check for her sister.
- The second patient has 30% hearing loss. He said that he does not need any support and staff speak clearly when communicating with him.
- The third patient said that staff are unaware of her communication needs but she is able to understand the information that is given to her.

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®⁶) especially for people with visual impairments.

Provider Response:

The surgery is working on having a website as we have realised how essential it is for people with communication impairments.

2. A Communications handbook with basic images of common BSL and Makaton symbols should be available in the reception enabling staff to communicate more effectively with patients who have communication impairments.

Provider Response:

We have now a communication Hand book at all times available at front desk and my reception team are aware of the functionality and has been trained to put that in use.

- 3. Staff should receive training on AIS.
- 4. Visual impairment and deaf awareness training should be provided for all staff members as an annual roll on programme. This would enable staff to know how to communicate better with a deaf/blind person.
- 5. Staff should be trained on how to provide information in an accessible format for patients with learning disabilities.

Provider Response:

Staff training on AIS/visual impairment and deaf awareness is been looked into and we are organising it.

⁶ https://www.texthelp.com/en-gb/products/browsealoud/

6. The registration form should include a question asking patients about their communication needs.

Provider Response:

We always been using an extra information request questionnaire form along with the standard registration form, which asks about the special needs and requirements.

7. The surgery should consider putting up noticeboards so that patients can be kept informed about things happening in the surgery.

Provider Response:

The Display leaflet board has now been moved alongside to incorporate an extra notice board on the wall, opposite to the patients waiting area. So we are going to have 2 notice boards now.

8. The surgery should have a complaints/compliments procedure and this should be available in a variety of accessible formats such as large print and audio for patients.

Provider Response:

All staff have been well versed with Complaints/compliments procedure and we are making arrangements accordingly.

9. The surgery should set up the hearing loop system and ensure that staff are trained in how to use it.

Provider Response:

We have made available a functional hearing loop, which has been tested by Healthwatch Redbridge team.

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

Provider Response:

As the Accessible information standards posters are not on sale, I am making an arrangement to get it printed at photo shop and display on the noticeboard.

11. The surgery needs to put a procedure in place to identify the communication needs of existing patients. Some patient acquire communication impairments after registration; reviewing a patients needs every few years would be good practice.

Provider Response:

The surgery has put in an alert to manage the existing patients, which will show a pop up as soon as you try to access the patients' records.

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

Provider Response:

In regards to the Fire alarm - we have all these services in place by the NHS property services, as we are on the agreement with them. NHS property services claims to have the latest equipment in place and we are still trying to negotiate with our correspondent.

Service Provider Responses

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

Distribution

- Kenwood 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

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Questions	
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

2 2 2 2	The state of the s
Name of Surgery: Jate: Observations/Questions Getting to the Service: There is sufficient and clear signage to the premises Yes No being visited: signs are clear, unobstructed and clear signage to the entrance close to the entrance - drop off point directly comments: Aramp/lift is available, or there is a working Yes No assistance bell - Edge of ramp highlighted to keep people off uneven surface Fire alarms have a light as well as sound Yes No Comments: Fire exits clearly signed in various formats. Woords Woords	tollet doors - are they clear/contrasting/pictures)
Name of Authorised Representative: Date: Compositions	Interaction between staff and service users; are
Observations/Questions Getting to the Service: There is sufficient and clear signage to the premises Yes No being visited: signs are clear, unobstructed and comments: There is accessible & sufficient parking available Yes No close to the entrance - drop off point directly Comments: A ramp/lift is available, or there is a working Yes No assistance bell - Edge of ramp highlighted to keep people off uneven surface Fire alarms have a light as well as sound Comments: Comments: Comments: Comments: Fire exits clearly signed in various formats. Words	they facing service user whilst talking to them using body language to communicate as well as verbal
Observations/Questions Getting to the Service: There is sufficient and clear signage to the premises Yes No being visited: signs are clear, unobstructed and comments: There is accessible & sufficient parking available Yes No close to the entrance - drop off point directly Comments: A ramp/lift is available, or there is a working Yes No assistance bell - Edge of ramp highlighted to keep people off uneven surface Fire alarms have a light as well as sound Yes No Comments: Fire exits clearly signed in various formats. Yes No Words	communication, is plain language - is plain language used
emises Yes No Comments: Comments: Yes No Yes No Yes No Comments: Yes No Yes No Yes No	Complaint/compliments procedure information is
d Comments: Comments: Comments: Yes No	available in alternative formats - for patients &
Comments: Comments: Yes No Yes No Yes No Comments: Yes No Comments:	
ble Yes No Comments: Yes No Yes No Yes No Comments:	
ceep Comments: Yes No Yes No Yes No Yes No Yes No Yes No	Are the noticeboards cluttered, and are the notices easily legible
Comments: Yes No Comments: Yes No Comments:	
Comments: Comments: Yes No Comments: Yes No	
Yes No Comments: Yes No Comments:	ments:
Yes No Comments: Yes No Comments:	Is there a hearing loop sign?
Comments: Comments: Yes No Yes No	
Yes No Comments: Yes No	ments:
Yes No Comments: Yes No	
Yes No Comments: Yes No	
Comments: Yes No	
Yes No	
- the second	
Pictures Pictures any relevant information accessible information	
Within the premises:	
Are there trip hazards/sharp edges/furniture in Yes No pathway (both permanent & temporary)	ON
Comments:	ments:

Appendix 3 - Questions for lead staff

Yes No Comments Yes No Comments Yes No Comments	Comments Yes No	Comments Yes Comments	Comments Comments	within 20 cessary.	
15. Are you able to access: • BSL (British Sign Language) interpreters • Signalong (based on BSL) • MAKATON (a language programme using signs and symbols to help people to communicate)	16. Where/which organisations might you access the above if you use them? 17. Do you have a communication book?	NOTE FOR REPS: If they have one, please ask to see it and comment on what you have seem 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?	19. How would you know this and would it be on the patients records? 20. Is there anything you would like to share with Healthwatch Redbridge?	Information for Manager when leaving Inform them that we will send a copy of the report within 20 working days for your comments & corrections if necessary.	m
Yes No Comments	Yes No Comments	ments st date training	Yes No Yes No Yes No Yes No	Yes No Comments	Comments
ith the patient whilst they ware of their efore they start to efore the start to the surgery, if there is			on training	12. How often do you have this training? 13. Is information available in different formats to Pes make it accessible to all patients and are patients aware of this? For example: large print, comments easy read, Braille, Audio. NOTE FOR REPS: Please ask to see examples of this if possible and comment on what you have seen	14. What format do you provide for people with: a. Hearing impairment b. Visual impairment c. Learning disabilities
QE at	Yes No		Comments	Yes No Comments	Comments
Questions for MANAGER/PERSON IN CHARGE at GP Surgery Name of Surgery: Name of lead manager:	Name or Authorised Representatives: Date: 1. Are patients asked about their communication			ns unsure you can stions: sption, is there a	5. If yes, what system do you use? 6. If there is no system in place can you explain the Comments reasons for this?

Appendix 4 - Questions for other staff

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Comments		Yes	Vex	Comments	Yes Comments				,	No No	Comments			Comments		Yes	Comments	Comments	
 6. Is there a hearing loop in the surgery, if there is what type of loop is it? • Fixed/Portable/Both 	Are you aware of the ways that information should be provided for people with:	 hearing impairments 	administration les sais	• 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. • Impairments -British sign language, exhibite on TV.	 Visual impairments - Large print or audio Learning disabilities - Easy Read 		be 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	10. In the event of a fire, what is the procedure for	evacuating those who are Dear or Bund:	 Has there been a fire drill and if yes, did it flag up any problems? 		 Is there anything you would like to share with Healthwatch Redbridge? 	
							Ŷ.	Ç	2		2		o <u>v</u>					T	
rgery			Yes No Comments				Yes N Comments	No.	ments		Yes	Comments		Comments	[- -		Comments	
Questions for STAFF in GP Surgery Name of Surgery:	Name of Authorised Representatives:	Dates:	 Pure 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	of training it was and tick the appropriate box	Visual impairments: blind & partially sighted On-line Face to face Both	Hearing impairments: profoundly deaf & hard of	On-tine	Face to face	• Oraming Disabilities	On-line Face to face	3. Do you feel that you would benefit from any other training with regard to AIS?	4. How would a patient that has a specific need be	identified? i.g. had hearing impairments, visual impairments or learning disability.	Would it be flagged up on the computer system	Lectronic system Acard provided by surgery they show to staff on	5. How would a patient with a hearing impairment know that they had been called for their	appointment?

Appendix 5 - Questions for Patients

Please explain Comments

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Please explain

Name of Authorised Representatives:		help you effectively according to your communication needs?	Please explai
		along the one recovered and that the	,
Date:		you effectively according to your	
.		communication needs: 6 If not how do you feel this could be	Please explai
asked SPECIFICALLY If you had any: • hearing problems Yes	Ŷ	improved?	
Comments			
problems with your sight Comments	Ŷ	7. What, if anything can be done to improve the way information is provided to you? For example:	Comments
Or needed easy read information? Comments	Š.	 large print, audio (spoken/recorded information) easy read 	
2. How were you asked about this?		8. Has there ever been a time when vour	Yes
		communication needs have not been met?	N _o
3. Do you HAVE a communication need such as Yes those mentioned above?	Ŷ.	For example, when being called for an appointment or provided with written	Please explai
Comments - NOTE FOR REPS: If the patient answers ves.	. 0	information	
please continue with the questions, if they			
answer no, please say "we are here today to speak to patients with communication needs.		Is there anything else you would like to talk to us about?	_
so we don't need to keep you any longer. Thank you."			-
4. Are staff aware of your communication Yes	Ŷ.		
needs! Please explain	lain		
5. Do you feel that reception staff are able to Yes help you effectively according to your	Ŷ.		
communication needs?	lain		

Please explain

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