

Clayhall Group practice

Practice Manager: Sangeetha Pazhanisami

Authorised Representatives: Monazza Malik & Anne Bertrand

Date: 10th July 2018

Recommendations made in original report	Provider Response	Comments from Review
<p>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.</p> <p>Patients should be able to:</p> <ul style="list-style-type: none">• 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	<p>We are currently in process of creating new website following merger of Clayhall Clinic and Roding Lane surgery. Our surgery's new name will be 'Clayhall Group Practice'. Our website will include your recommendations</p>	<p>Representatives were told that the website has been created for both practices. The website includes provision of larger font.</p> <p>The representatives were able to access the website and clarify this.</p>

<p>who are blind/partially sighted with mobility impairments rely on the keyboard.</p> <ul style="list-style-type: none"> • Access website information via screen readers and translation software (such as Browesaloud) especially for people with visual impairments 		
<p>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</p>	<p>We have ordered two communication handbook from 'The Clear Communication People Ltd' which includes BSL and Makaton symbols. We have 'The hospital communication book' at the reception in the meanwhile</p>	<p>The representatives were shown the communication book that has been purchased by the practice.</p>
<p>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.</p>	<p>We as a practice make every attempt to communicate directly with the patient unless the patient indicates otherwise and request us to talk to the carers. We have written letter of consent from patients if this is the case.</p>	<p>Please see provider response column.</p>

4. Staff should receive training on AIS.	All staff have done AIS training in blue stream, since your visit.	Please see provider response column.
5. 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	We are in the process of organising training for Deaf/blind awareness for our staffs.	Representatives were told staff members have been provided with deaf awareness training. However, they have not yet had any training regarding visual awareness.
6. Staff should be trained on how to provide information in an accessible format for patients with learning disabilities.	Our staff are currently trained on using communication book to communicate with learning disabled patients. We are in the process of updating their training regarding communication with Learning disabled People.	Please see provider response column.
7. The surgery should consider changing the fire alarms so that there is a flashing red light as well when the alarm sounds. This will allow Deaf people to know when the fire alarm goes off.	We have currently purchased fire alarms for both sites which has flashing lights as well as sound and this will be installed by the end of November at the latest.	The surgery does not have a fire alarm with a flashing light.
8. Information on the noticeboard should be spaced out adequately so that patients can see the information clearly.	Our notice boards at both sites have been re-organised to ensure that the information leaflets are displayed in an orderly way with suitable spacing	The noticeboard has a heading and it has the appropriate information on it. The notices are spaced out and clear.

<p>9. The complaints/compliments procedure should be available in a variety of formats for patients.</p>	<p>Our complaints and Practice procedures are available in various formats and staff know to ask the Practice Manager for large print and various languages.</p>	<p>Please see provider response column.</p>
<p>10. It would be useful for the surgery to have an electronic screen to inform patients when it is time for their appointment. The screen should also have audio information for people who have a visual impairment</p>	<p>New Jayex board has been fitted. However, we are waiting for the software to be downloaded. Unfortunately this is in the remit of IT department at CCG and we have very little influence over the time line.</p>	<p>The representatives noted the electronic screen is now working.</p>
<p>11. The surgery should display a poster about the Accessible Information Standard on the noticeboard. If possible, this information should be available on an A3 poster.</p>	<p>AIS posters have been displayed on reception at both sites.</p>	<p>The representatives noted the AIS poster was on the noticeboard.</p>
<p>12. Staff members should be provided with information of the organisation for booking BSL interpreters.</p>	<p>Staff members are aware of how to book BSL interpreters through 'Big Word' and a poster explaining this is already in the reception area. This was reinforced in the practice meeting prior to your visit and this is in the minuted staff meeting.</p>	<p>The representatives were not able to see the poster in the reception area.</p>
<p>13. The surgery should include a question about communication needs on the registration form.</p>	<p>Reception staff and clinical staff are trained to recognise communication difficulties in patients and have conversation about meeting their needs.</p>	<p>Please see provider response column.</p>

	The good practice at Clayhall clinic were the communication needs will be added as message alerts, which will come as pop up alert when staff access records has been shared with Roding lane surgery . This structured approach is followed at both sites.	
14. The surgery should consider 'highlighting the edge of the ramp to ensure that people with visual impairments are able to see it.	We will be highlighting the edge of the ramp as per recommendation at Roding Lane site.	N/A
15. Patients should have access to communication support such as a BSL interpreter. If this is not provided then patients communication needs may not be met.	Staff are aware how to organise a booking for BSL interpreter. This is done by 'BIG WORD' and a poster for access code unique for the practice has always been displayed in the reception office. The information for patients regarding this service is clearly signposted in the waiting room of both practices.	Please see provider response column.