## **The Fullwell Avenue Surgery**

## **Practice Manager: Rita Patel**

## Authorised Representatives: Miranda Peers (staff member) & Neil Adie

## Date of Visit: 29<sup>th</sup> June 2018

Recommendations made in original report	Provider Response	Comments from review
<ol> <li>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.</li> <li>Patients should be able to:</li> <li>Change the size of the text; some people with a visual impairment need information in a large font size.</li> </ol>	No response	The practice manager said that this not been necessary because they use NHS Choices. They are looking into developing one.
<ul> <li>Change the colour of the background; some people cannot read text if there is insufficient contrast between text and background.</li> <li>Navigate the whole website without a mouse; some people who are</li> </ul>		

<ul> <li>blind/partially sighted with mobility impairments rely on the keyboard.</li> <li>Access website information via screen readers and translation software (such as Browesaloud) especially for people with visual impairments.</li> </ul>		
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.	No response	They downloaded one from the link provided by Healthwatch Redbridge. There is a print out at reception and an electronic copy on all staff desktops. On reflection back in the office it was realised that this is the Hospital communication book and it would be worth the practice also purchasing the Pre- hospital communication book. Healthwatch Redbridge can provide a link for this.
<ol> <li>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.</li> </ol>	No response	All staff are chaperoned trained. The CCG provided this training.

4. Staff should receive training on AIS.	No response	The practice manager rang the number she was given by Healthwatch Redbridge and it was the wrong number. She did not follow it up. She asked if we could let her know if the CCG provide this or if not what other providers there are.
5. Staff should be trained on how to provide information in an accessible format for patients with learning disabilities.	No response	They have 6 patients with learning disabilities (they may see if they can push their appointments forward so that they are not waiting too long in the waiting room). Staff know these patients. They come with a carer or family member. They book appointments at the end of a session when it is quieter and give them extra time if they need to. Information is flagged up on EMIS with a pop up box. Staff also use the Communications Book.
6. The complaints procedure should be updated and patients should be informed that they can get the complaints/compliments procedure in different formats such as large print.	No response	The Practice Manager said that there is a complaints procedure available.
7. The complaints leaflet should be available in a variety of accessible formats for patients.	No response	The practice manager said she needs to check if it is available in different formats.

8. 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.	No response	The practice does not have an AIS poster, the Practice Manager asked us to let her know of a provider of this.
9. 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.	No response	The Practice Manager said that they are still working on this. She said that staff pick up on it.
10. The surgery should consider changing the fire alarms so that there is a flashing light as well when the alarm sounds.	No response	There is no flashing red light on the fire alarm, It is a small practice. They have applied for planning permission to get it extended, if they get this permission, they would then get the flashing light on the fire alarm. At the moment the fire alarms are close together.
11. The surgery should consider highlighting the edge of the ramp so that it is easier for people with visual impairments to notice it.	No response	The ramp itself has had yellow tape wrapped around it (quite narrow tape). Our volunteer who is partially sighted felt there was not enough of a contrast and it was quite hard to see it in the bright sunlight. We showed (online) the Practice Manager thicker yellow tape that our volunteer would show up better against the black ramp.

12. 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	No response	The practice does not have an electronic screen, it is a small waiting room. If they get the extension, then they would get this.
13. It would be useful to have the name of the surgery on the board outside	No response	The practice was under a GP who retired in November - his name used to be outside on the board, they took it off when he retired. They are looking into how to paint the new GPs name. They are waiting to hear about their extension re the board. They had a sign with a light, but the neighbours complained about the light, so they disconnected it.
14. 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.	No response	The practice manager said they have details for a BSL agency. They have never used them.