

Rydal Group Practice

Practice Manager: Dorota Jedlinski

Authorised representatives: Athena Daniels & Vivien Nathan

Date of visit: 28th June 2018

Recommendations made in original report.	Provider Response	Comments from Review
<p>1. To make the website more accessible, 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 who are	<p>The website was changed and designed by our PPG. We will however take on board your findings and make changes to the website as you recommend.</p>	<p>The practice manager told us that “In terms of the website we have increased the text across the website and adjusted the text colour to black instead of grey which should make the contrast more sufficient”.</p> <p>“It is quite a big job to make the website comply with “accessibility standards”. While some changes can be applied to make text easier to read, full navigation without mouse would be pretty difficult. Unfortunately coding to comply with accessibility standards is outside the skill set of the person that designed and works on our</p>

<p>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>website. We are currently looking at redesigning the site and looking at hiring someone with expertise to go through the code to make the necessary changes.”</p>
<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 will order a communications handbook.</p>	<p>The practice does not have a communications book. Representatives suggested that she contact Healthwatch Redbridge for more information about the book.</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</p>	<p>The care coordinator at the practice tries to ensure that all of our patients on the learning disability register are personally called in for their annual review either by</p>	<p>The practice manager mentioned that this has not been an issue but if it happens, the staff members know how to support the patients.</p>

<p>relay information to the individual. This is because it compromises a patients' right to privacy and dignity.</p>	<p>speaking to the patient directly or via the carer</p>	
<p>4. Staff should receive training on AIS.</p>	<p>Staff will receive training on AIS, visual impairment and deaf awareness and training on how to provide information in an accessible format for patients with learning disabilities.</p>	<p>Internal training took place in September 2017. They have also signed up for Blue Stream training online.</p>
<p>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.</p>	<p>See above</p>	<p>This training has not taken place yet.</p>
<p>6. Staff should be trained on how to provide information in an accessible format for patients with learning disabilities.</p>	<p>No response</p>	<p>Staff members have not yet been trained on how to provide information for people with learning disabilities. The practice manager mentioned that they have leaflets and a care navigator in</p>

		charge of elderly people who need extra help and patients with special needs. These patients can also get a longer appointment with the GP.
7. The complaints/compliments procedure should be available on the noticeboard in a variety of formats for patients.	No response	There is a large print and easy read version of the complaints procedure.
8. The leaflet informing people about the complaints/ compliments procedure should be available in a variety of formats for patients.	No response	See above.
9. 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.	We have ordered a poster about the AIS to display.	The AIS poster is displayed on an A4 paper. The practice manager enquired about where to get a larger poster.
10. 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.	No response	The practice has two fire marshals; each in-charge of a floor.

<p>11. The surgery should include a question about communication needs on the registration form.</p>	<p>We have added the question about communication needs to the new patient questionnaire.</p>	<p>The representative noted there were questions asking about visual and hearing impairments.</p>
<p>12. Patients should have access to information in a variety of formats and communication support such as a BSL interpreter. If this is not provided then patients communication needs may not be met.</p>	<p>No response</p>	<p>BSL interpreting is provided via Big Word</p>