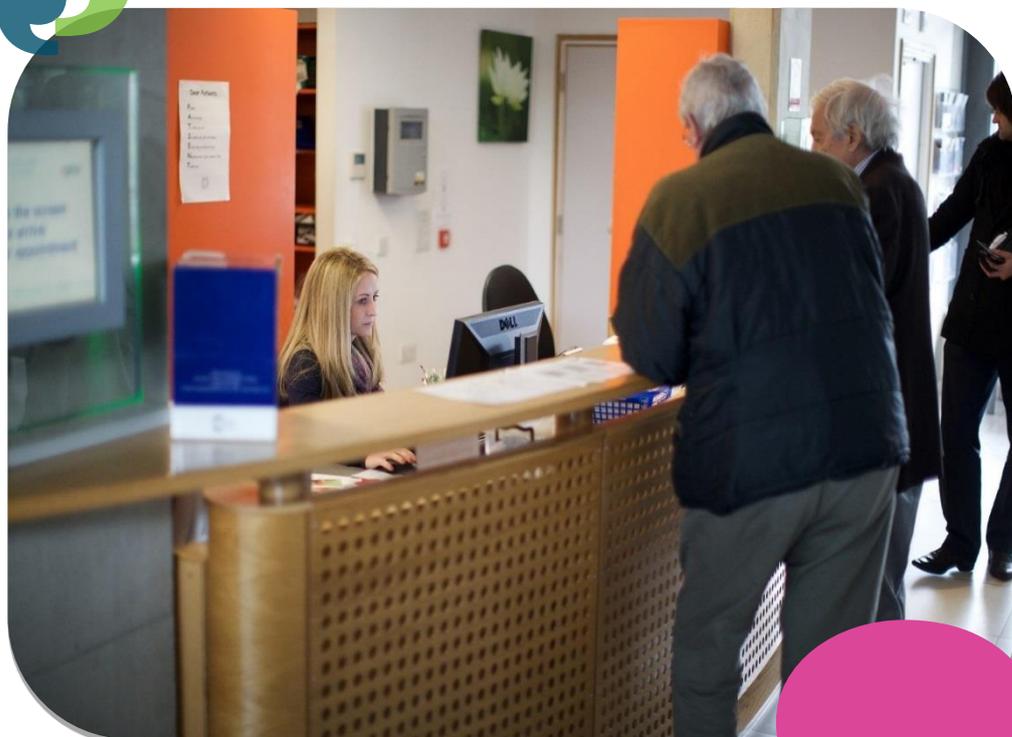
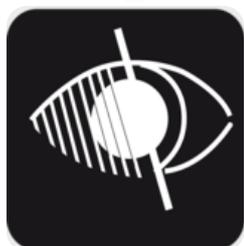


healthwatch

Redbridge



User Friendly?

Reviewing communication support at GP Practices in Redbridge

March 2018

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

020 8553 1236

info@healthwatchredbridge.co.uk

Contents

Introduction.....	4
Accessible Information Standard.....	5
Purpose of the visit.....	5
Methodology.....	6
Reviewing website accessibility.....	6
Representation.....	6
Key findings.....	7
Good practice.....	13
Outcomes and Impact.....	15
Overall Recommendations.....	17
Further Information.....	19

Introduction

The Accessible Information Standard (AIS)¹ is the new legal requirement that applies to all providers of NHS and publicly-funded adult social care services and came into force on 31 July 2016².

It is supported by the Equalities Act, and tells organisations how they should work to understand every patients' communication needs and provide any communication support that they might need. This includes making sure that people get information in accessible formats such as large print, Braille, easy read and via email.

In July 2016, Healthwatch Redbridge (HWR) organised a series of information workshops for practice managers working across Redbridge, Havering, Barking and Dagenham and Waltham Forest.

The workshops were designed to offer support and assist practices to identify and develop AIS action plans ahead of the AIS start date.

In early 2017, HWR also ran a series of information workshops for people with communication impairments. Feedback from these workshops raised further concerns that people were still not able to access information in a way that they could understand.

Between July and October 2017, Healthwatch Redbridge agreed to conduct a series of visits using our Enter & View powers, to all GP practices across Redbridge in order to discover whether the standards had been implemented effectively across the borough. In total, 45 visits were carried out.

Each visit was documented and individual Enter & View Reports were compiled and published.

This report is a summary of our findings from across the borough.

¹ <https://www.england.nhs.uk/ourwork/accessibleinfo/>

² <http://www.legislation.gov.uk/ukpga/2012/7/section/250/enacted>

Accessible Information Standard

The Accessible Information Standard (AIS) aims to ensure people who have a learning disability, communication impairment or sensory loss are provided with information they can understand. They should also be able to receive support to help them communicate effectively with health and social care services.

From 1st August 2016, all organisations that provide NHS or social care services must follow the standard by law.

For organisations to effectively implement the standard, they needed to consider their policies, procedures, human behaviour and where applicable, electronic systems.

There are five basic steps which make up the Accessible Information Standard:



Purpose of the visits

A review of the standards by NHS England in March 2017³ found that many participants felt the standard could have a significantly greater impact than it had done to date. This suggested that monitoring its compliance was necessary.

The visits were planned to identify how GP practices across Redbridge were meeting the standards and assess whether the needs of people with communication impairments are being fully met.

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

Methodology

Each visit was announced with information being sent to each practice manager at least three weeks' before the visit was due to take place. Practices were not given a specific time or date for the visit but rather a two week time frame. Information provided included a brief summary of the visit structure and the role of the visitors (known as Authorised Representatives).

Prior to the visit, HWR staff members worked with the authorised representatives to prepare the questions used during the visit. Separate questionnaires were created for the senior staff member on duty, for other staff members and for patients or carers present during the visit.

Where a practice had their own website, this was also checked to review how accessible it was for people with communication impairments.

Authorised Representatives checked external and internal access to identify any issues or challenges that someone with an impairment might face when using the surgery. Some of our representatives had communication impairments which assisted in ensuring our review was inclusive.

Where possible, representatives spoke with the practice manager, other staff members such as the receptionist and nurses, and patients or carers. It was not always possible to speak to patients with communication impairments.

At the end of the visit, practices were informed that a draft report would be sent to them usually within two weeks and they were given four weeks to respond with their comments.

Reviewing website accessibility

Three volunteers assessed each website using a checklist created by HWR staff using information from Healthwatch England⁴.

Two of the volunteers who reviewed the website had communication impairments; one of the volunteers was Deaf and the other volunteer had Asperger's Syndrome.

Representation

During the visits, we spoke with:

- **33** Practice Managers or Doctors
- **55** Staff members (such as receptionists or practice nurses)
- **134** Patients

⁴ <http://www.healthwatch.co.uk/website-accessibility>

Key Findings

Website:



- **65% of practices have their own website (30/45)**

It is useful for the practice to have a website because patients can view additional information relating to the surgery and access other services online such as booking an appointment.

- **None of the websites had text recognition software**

Software such as 'Browsealoud'⁵ for example, enables access to information by reading the website content out loud. This is useful for people with visual impairments and other conditions such as Dyslexia.

- **It was not possible to change the background colour on any of the websites**

Changing the background colour is useful for some people where the text and background colours are quite similar.

- **It was possible to change the text size on just over a quarter (29%) of the websites**

Changing the text size is useful for people who require information in a larger font.

- **Most websites (69%) did not have a sitemap or a function whereby patients could navigate the website without a mouse (71%)**

A sitemap can make it easier for people with communication or sensory impairments to find information on the website and some people find it easier to use a keyboard than a mouse.

Note: Some practices responded that their websites were accessible. We therefore reviewed the websites again.

We found that although it was not possible to change these features directly, the websites provided information for patients to change these features using their internet browser.

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

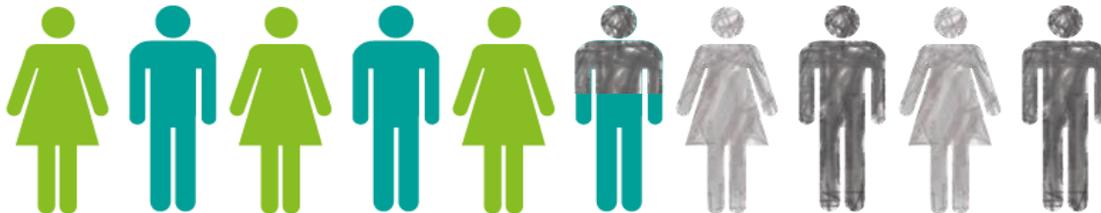
Communications book:



- 24% of GP surgeries have a communications book 11/45

A communications book is a tool which supports communication for people with sensory impairments. This handbook uses pictures to aid communication between patients and health professionals.

Reliance on family and carers:



- Over half of GP practices (54%) told us they relied on family members or carers to aid communication with patients who have a communication impairment

This can affect a patients' right to privacy and dignity. Also, it is possible that the information relayed is not correct.

Training:



- Only 41% of practices (19) had provided staff members with training about communicating with people who have communication impairments.
- Many of the practices that have completed this training use an online service called Bluestream training⁶.

Training can improve staff's confidence and communication skills with people who have communication impairments.

⁶ <http://www.bluestreamacademy.com/>

Fire alarms:



- 26% of practices have a flashing red light as part of their fire alarm systems. Many practices told us staff members would assist patients out of the building in the case of an emergency.

A flashing red light can alert a Deaf person in the case of a fire or emergency.



- Four practices did not have a regular fire alarm; one surgery had a fire alarm button behind the reception desk and another surgery used a bell to inform patients if there was an emergency.
- In the case of one surgery, there were no fire exit signs.

The surgery contacted us afterwards to inform us that this was due to an extensive renovation taking place and the signs were due to be installed shortly.

Accessible Information Standard poster:



- Less than a third of GP practices (30%) had a poster informing patients about the AIS and asking them to inform staff about their communication needs

Displaying posters in the waiting room (such as the example on the left) is a good way to inform patients about AIS and encourage them to tell staff about their communication needs.

Hearing loops:



- **80% of practices had a hearing loop (36)**

A hearing loop enables people with hearing aids to receive clearer information.



However, out of these practices:

- **Only 29 practices had a sign informing patients about the loop system**

A sign is useful for informing patients that a hearing loop is available in the surgery.

- **Only 20 practices had trained their staff to use the hearing loop**

In addition to this, even though some staff members said they had been trained on how to use the equipment, when asked about the equipment they were unsure about how to use it.

- **And 3 practices had their hearing loops in the box in a cupboard**

None of these surgeries had a sign informing patients about the hearing loop. This means that patients are unlikely to know that there is a hearing loop in the surgery.

Identifying support needs (Flagging):



- **91% of GP practices have a computer system that identifies when a patient presents with a communication impairment (41/45)**
- **However, only 24 practices used this system**

A flagging system is important because it enables practice staff to know when a patient with a communication impairment presents at reception.

Complaints forms:



- 67% of practices (30/45) display information about making a complaint on their noticeboard
- In some cases, the information was difficult for the representative to find on the board
- There was no information to tell people that the material was available in an alternative format
- Several GP practices mentioned that if someone wanted it in another format such as large print they would be able to provide this
- It was not clarified if the practices can provide the complaints form in audio or any other format

It is important for practices to inform patients that they can access the complaints form in other formats otherwise they are being excluded from making a complaint.

Registration form

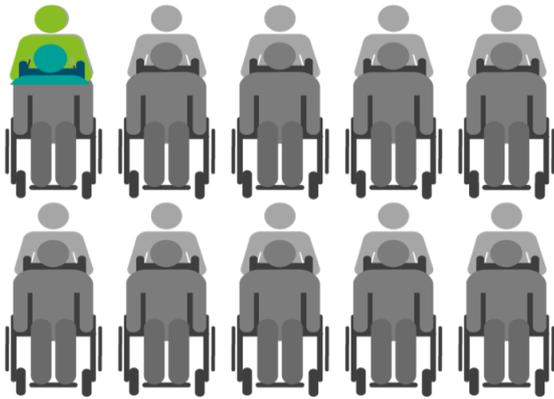


- 54% of practices told us they have a question on their registration form asking patients whether they have any communication needs.

Including this question on the registration form is a useful way for patients to inform staff about their needs.

Practices also need to identify how they review patients' communication needs as they grow older. Many sensory impairments can be age related.

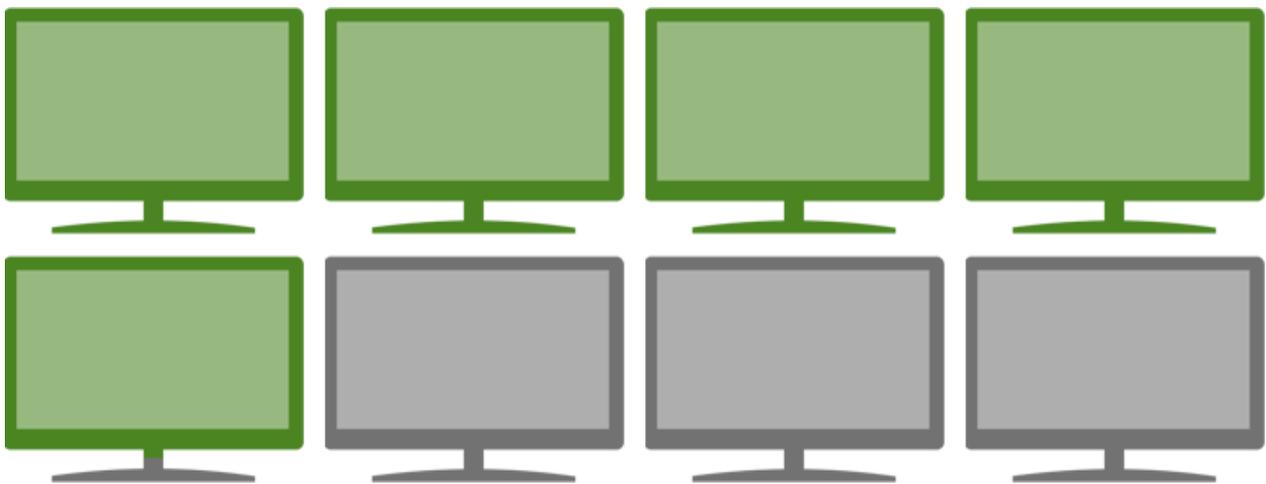
Ramps:



- 22 practices had a ramp to access the building, only one practice had the edges of the ramp highlighted

Highlighting the edge of a ramp with yellow markings enables someone with a visual impairment to know exactly where the edges are.

Electronic screens:



- 69% practices had an electronic television screen which provided health information (31/45)
- Screen were also used to call patients for their appointments
- At one practice, the screen was not switched on during our visit

An electronic screen is useful for informing patients about their appointments. Using this system, patients with hearing impairments would be able to identify when they were being called.

- Practices without screens used a number of different methods to call patients for their appointment such as a loud speaker system

Loud speaker systems are useful for patients with visual impairments.

Practices need to ensure all patients with communication needs are supported appropriately.

Good practice

We were really pleased to see the range of information and support offered by a number of practices.

Below are a few examples of the posters we saw on some of our visits.

We also realise that whilst other GP practices have some of these procedures in place already, this information is based on observations or information provided by staff members on the day of the visits.

Information Posters

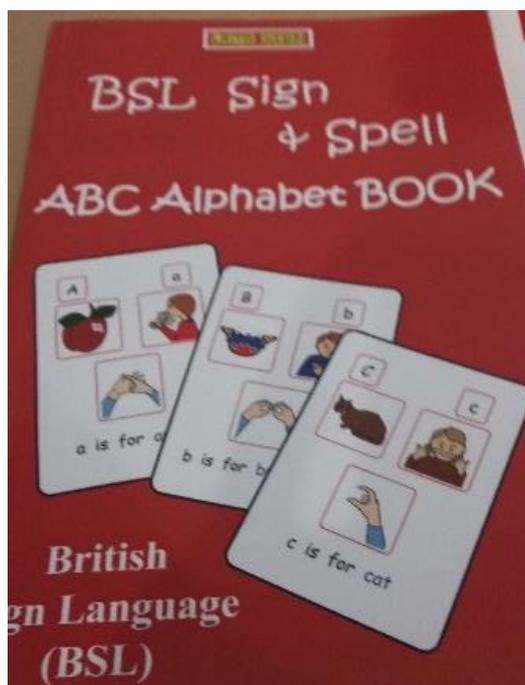


- In addition to having a poster asking patients about their communication needs, Castleton Road surgery informed patients about the organisation that provides BSL interpreting services



- The Willows Practice now informs patients that the surgery does not accept family members as sign language interpreters
- Goodmayes Medical Practice has an A3 poster informing patients about the AIS and asking them to inform staff about their communication needs.
- The Glebelands Practice has a poster informing patients that they can access information on NHS health checks in alternative formats such as braille, easy read and audio.

Availability of accessible information



- Granville Medical Centre and The Elmhurst Practice have folders containing several easy read health information leaflets.
- York Road Surgery has a folder containing large print forms and braille booklets (NHS health checks and cytology).
- York Road also have a BSL sign and spell ABC Alphabet book (*shown here on the right*).
- Ilford Lane Surgery uses a website called Easy Health for easy read information. This is useful for people who have learning disabilities.
- St Clements Surgery had the NHS health check booklet in an alternative format (braille).

These examples of good practice aid communication between staff members and patients.

Patients can access information in a format that they can understand.

Other

- The Practice Manager in York Road Surgery frequently assesses staff members on their knowledge of AIS

This helps to ensure staff have a good knowledge of the standard and enables them to support patients' appropriately.

- The Shrubberies Medical Centre has a separate list for existing patients with additional needs to ensure staff provide the additional support required

This list enables staff members to easily identify patients who require additional support.

- The Glebelands Practice and The Broadway Surgery send text messages to individuals with a hearing impairment if they need to relay information

Patients receive information in a way that they can understand.

Outcomes and Impact

Based on the recommendations made to the individual surgeries, some practices have contacted HWR to inform us that they have implemented or will be implementing the following actions over the next few months.



Communication books:

- Six practices have **purchased the communications book** and eight practices have **committed to buy the communications book** in the near future.
- Two practices are working on creating their own communication handbook.

Training:

- One practice has **already provided training on AIS** since the visit took place and 14 practices are **planning to provide AIS, visual impairment and deaf awareness training**.

AIS Posters:

- Two practices are **producing accessible posters** and three practices have **ordered AIS poster**.
- Five practices have **already displayed the AIS poster** on the noticeboard.

Website:

- 15 practices have **contacted their website provider** about improving website accessibility.
- Three practices without a website are **considering getting one**.

Hearing loop:

- Six practices have **provided training for staff members** on how to use the hearing loop system and three practices have **improved signage** for the hearing loop.
- Four practices have **purchased a hearing loop**.
- Three surgeries who previously had the hearing loop in the box have **installed their hearing loop system** and **staff have been trained** on how to use it.
- Two GP practices are **planning to train staff** on using the hearing loop.

Electronic/ TV screen:

- Six practices have **installed a new patient call display** in their waiting room to inform patients of their appointment.

Signage:

- Several practices have **improved signage outside and inside the premises**. Examples include signage directing patients to the toilet and putting a poster on the toilet door with words and a picture.
- One surgery has put a **sign in front of the building** to inform patients that there is an accessible entrance at the back of the building.

Registration form:

- Four practices have **amended the registration form** to include a question about communication needs.
- One practice has **printed their practice leaflet and health questionnaire in large print**. They have also included a question asking patients about their communication needs. Also, they are **adding a note to all prescriptions** asking patients to inform the surgery about their communication needs.

Complaints procedure:

- Three practices are now **displaying the complaints procedure** on the noticeboard and four practices provide the **complaints procedure in a large print format**.
- Another three practices have now included information about the **availability of the complaints procedure in alternative formats** such as large print.

Ramps:

- Two practices have put **black and yellow tape around the edges of the ramp** so that patients with a visual impairment are aware that there is a ramp.
- A number of other practices have informed us that they will put the yellow tape around the edges of the ramp in the near future.

Fire alarm:

- One practice has **ordered the red flashing light**.
- Several practices mentioned that they could not make changes to the building because it does not belong to them.

Other:

- One practice has **requested a quote from RNIB** to have their practice leaflet transcribed into Braille.

Overall recommendations:

From our findings we believe the following recommendations would be useful in supporting practices across Redbridge:

1. Practices without websites should consider having a website so that patients can access any necessary information on there. All websites 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.
 - Use the sitemap button, as this will make it easier for people with communication impairments to find information on the website.
 - Access website information via screen readers and translation software (such as Browesaloud⁷) especially for people with visual impairments.
2. Signage to the premises should be large and clear. This would make it easier for people with a visual impairment to identify the surgery.
3. GP practices that have a ramp should consider ‘highlighting the edge of the ramp’ to ensure that people with visual impairments are able to see it.
4. 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.
5. Staff should receive training on AIS. This would allow staff members to have a good understanding of what they need to do for patients to comply with the standard.
6. 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.

⁷ <https://www.texthelp.com/en-gb/products/browsealoud/>

7. All GP practices should have a computer system that alerts staff members when a patient with a communication impairment presents at reception. This would allow staff to provide the relevant support for the individual.
8. Staff should be trained on how to provide information in an accessible format for patients with learning disabilities.
9. Practices without the red flashing alarm light 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 there is an emergency.
10. A complaints/compliments procedure should be displayed on the noticeboard and this should be available in a variety of formats such as large print for patients.
11. All GP practices should have a hearing loop system and provide training for staff members on how to use the hearing loop.
12. All GP practices should 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.
13. A poster about the AIS should be displayed on the noticeboard. If possible, this information should be available on an A3 poster.
14. All practices should have a procedure in place to identify communication needs of existing patients. Some patients acquire communication impairments after registration or as they become older; reviewing a patients needs every few years would be good practice.
15. The registration form should have a question about the communication needs of patients.
16. 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.
17. Staff members should be provided with information of the organisation for booking BSL interpreters.
18. A Communications Handbook⁸ 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.

⁸ Example of a standard hospital communication book can be found at:

<http://www.uhs.nhs.uk/Media/SUHTInternet/PatientsAndVisitors/Learningdisabilities/Thehospitalcommunicationbook-part1.pdf>

Further Information:

How do you communicate?

Do you need our information in a **different way**?

- easy read
- email
- large print

Do you need **communication support**?

- British Sign Language BSL
- hearing loop
- advocate

Please tell the receptionist if you have any communication support needs. You need to help us make sure we get things right for you.

healthwatch Redbridge

NHS England

Thanks to easy on the *i* for the use of their image bank © LYPTT www.easyonthei.nhs.uk

- Healthwatch Redbridge has also created a workshop for GP Practices.
- If you would like further information on how we might help you, please contact us.

- Healthwatch Redbridge has created a simple poster to highlight the Accessible Information Standard to patients.
- If you would like to download a copy, please contact us.

Accessible Information Standards:

Workshops for GP Practices

Are you compliant? It is a legal requirement!

healthwatch Redbridge

Is your organisation struggling to implement the Accessible Information Standard?

Healthwatch Redbridge can help!

We provide 2-3 hour workshops for staff to understand how their organisation will be affected

Workshops will:

- ⇒ Find out what the standard means for you and your organisation
- ⇒ Identify the changes you need to make to the way you manage communication
- ⇒ Provide practical tips and ideas to make it easier for staff to communicate with people who have communication needs

Workshop (2-3 hours) - £250

Note: Costs are based on your organisation providing and covering the costs of an appropriate venue. Workshops cater for up to 12 participants and can take place at a time to suit. Practices may wish to share costs.

For further information please contact Cathy
(cathy@healthwatchredbridge.co.uk) or call 020 8553 1236

Acknowledgements:

Healthwatch Redbridge would like to thank the patients and practice staff who provided responses and contributed to the Enter and View visits.

Healthwatch Redbridge

103 Cranbrook Road

Ilford, Essex

IG1 4PU

020 8553 1236

info@healthwatchredbridge.co.uk

www.healthwatchRedbridge.co.uk

Healthwatch Redbridge is a Charity (number 1156320), and a company limited by guarantee (8389279), registered in England and Wales. Registered office as above.
