



**Enter & View  
Report**

**Hainault Surgery  
34 New North Road,  
Ilford, Essex  
IG6 2XG**

**Tuesday 1<sup>st</sup> August 2017**

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](http://www.healthwatchredbridge.co.uk)

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<b>Service Provider</b>	<b>Hainault Surgery 34 New North Road, Ilford, Essex IG6 2XG</b>
<b>Contact Details</b>	<b>Practice Manager – Tracy Whitrod</b>
<b>Date/time of visit</b>	<b>Tuesday 1<sup>st</sup> August 2017, 10:00am – 12:00pm</b>
<b>Type of visit</b>	<b>Announced visit</b>
<b>Authorised representatives undertaking the visits</b>	<b>Fiona Cooke Hyacinth Osborne Sarah Oyebanjo (staff support)</b>
<b>Contact details</b>	<b>Healthwatch Redbridge 1st Floor, 103 Cranbrook Road Ilford, Essex IG1 4PU  020 8553 1236</b>

## Acknowledgements

Healthwatch Redbridge (HWR) would like to thank the staff and patients at Hainault Surgery for their contribution to the Enter & View programme.

## Disclaimer

Please note that this report related to findings observed during our visit made on Tuesday 1st August 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 programme<sup>1</sup> 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.

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Section 221(2) of The Local Government and Public Involvement in Health Act 2007:  
<http://www.legislation.gov.uk/ukpga/2007/28/section/221>

## 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 Standard<sup>2</sup>. 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 1<sup>st</sup> 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

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<sup>2</sup> <https://www.england.nhs.uk/wp-content/uploads/2015/07/access-info-upd-july-15.pdf>

because the letter that the surgery sent to her was not in the right font meaning that she was unable to read it.

NHS England reviewed the Accessible Information Standard during January- March 2017. Their subsequent report<sup>3</sup> 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

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

to the specific nature of the visit, it wasn't always possible to speak to patients with communication impairments.

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:

- The sign in front of the surgery is large and easy to read. The writing is in a red font on white background. The board does not specify the name of the surgery.
- No parking facilities are available. Patients can use the side roads. There is one accessible parking bay in front of the surgery but this is not specifically for the surgery.
- There is level entrance to the surgery meaning that a ramp/lift is not necessary.

### Observations made inside the premises:

- On arrival at the surgery, the E&V Representative with a hearing impairment approached the reception desk. The staff member at reception did not make eye contact straightaway. The representative asked for a pen and paper. The staff member found it difficult to understand what the representative was asking for. Eventually the staff member at reception provided her with a piece of paper and pen. This interaction suggests that the staff member does not know how to support a Deaf person effectively.
- There was no glass screen in reception.
- No trip hazards or sharp edges were identified.
- There were no signs informing patients about the direction to the consulting rooms or toilets. However, it was only a short walk from the waiting area to the consulting rooms and toilets.
- The signs on the toilet were in writing with no pictures. This was an accessible toilet but no information explained this.
- The noticeboards were somewhat cluttered with bunting covering some of the information.
- Some of the information on the noticeboard was provided in large print.
- The complaints procedure was difficult to notice because it did not have a heading and was written in regular font size.
- At the bottom of the complaints procedure document, it said that it was updated in 2013.
- The fire exit is clearly signed with words and pictures. There was one fire exit sign above the door and three others in the waiting area.



- There was no hearing loop sign in the reception and waiting area.
- The surgery does not have an electronic screen. The representatives observed the clinicians come out to call the patients when it was time for their appointment.
- There was no poster informing patients of the Accessible Information Standard or asking patients to inform staff about their communication needs.

### Speaking to the practice manager

- The practice manager said that initially patients register then a nurse books them in for an initial appointment where any necessary information about their communication needs is noted.
- Any information on communication impairments is collected from the previous GP.
- In terms of finding out about existing patient's needs, the nurse picks up this information when interacting with them.
- The patient's needs are recorded on the computer system.
- When a patient presents at reception, this information is flagged up.
- The surgery uses the EMIS<sup>4</sup> patient data system.
- Information on the computer system identifies any communication impairment so that clinicians are aware of the patient's needs.
- The surgery does not have a hearing loop system.
- Staff members have not been provided with training on how to communicate with patients who have communication impairments.
- The manager said that they are unable to provide information in another format for patients.
- Patients with learning disabilities are called up annually to update their records.
- The surgery is unable to access BSL interpreters, signalong and Makaton.
- There is no communications<sup>5</sup> handbook.
- The practice manager said that the surgery does not currently have any Deaf patients or patients with visual impairments and only about 10 patients with learning disabilities.

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<sup>4</sup> EMIS is an electronic patient health record system used by many GPs

<sup>5</sup> 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 spoke to two staff members during the visit; one nurse and one receptionist.

- Both staff members were unaware of the Accessible Information Standard.
- They have not been provided with any training to support patients with visual impairment, hearing impairment and learning disability.
- Both staff members said that they would benefit with training on AIS although they do not often come across people with communication impairments.
- Patient's needs are identified on the computer system.
- When asked about how a patient with a hearing impairment would know when it is their turn, both staff members said that staff would take the patient into the consulting room.
- Both staff members said that there is no hearing loop.
- One staff member said that she is able to provide information for someone with a hearing impairment due to her experience rather than training.
- The other staff member said that she would write information down for someone with a hearing impairment.
- One staff member mentioned that someone with a visual impairment or learning disability would come with their carer and the information will be given to them.
- There is no communications handbook.
- Staff were unsure whether the fire alarm has red flashing lights.
- Both staff members said that in the event of a fire, a staff member would escort the patient out of the building.
- A fire drill was conducted about a year ago and no issues were identified.

## Speaking to patients

Representatives spoke to three patients during the visit.

- One patient said that she was not asked about her communication needs whilst two patients said that they were unsure whether they were asked or not.
- One patient said that he has a slight hearing impairment (about 30% hearing loss). He said that staff are aware of his communication needs and he is supported effectively.

## 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®<sup>6</sup>) especially for people with visual impairments.
2. A Communications Handbook<sup>7</sup> 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.
  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.
  4. Staff should receive training on AIS.
  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.
  6. Staff should be trained on how to provide information in an accessible format for patients with learning disabilities.
  7. The surgery should consider changing the fire alarms so that there is a flashing light as well when the alarm sounds.

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

<sup>7</sup> Example of a standard hospital communication book can be found at:

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

8. 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.
9. The surgery should get a hearing loop system and provide training for staff members on how to use the hearing loop.
10. It would be useful to have the name of the surgery on the board outside.
11. 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.
12. 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.

## Service Provider Responses

- 1) We are going to purchase the communication book with basic images to help our staff communicate more effectively with patients who have communication impairment.
- 2) Staff are going to receive training on AIS for visual impairment and deaf awareness and also special needs with learning difficulties.
- 3) I will ensure that the complaints/compliments procedure is in different formats
- 4) We are about to purchase the hearing loop
- 5) Dr is going to change the sign outside of the surgery to state that we are a Surgery in large letters
- 6) We now have the Jayex TV which lets the patient know when the patient is being called by the GP/Nurse which will help patients who are deaf, it also says the name of the patient, so this will help visual impaired patients.
- 7) I will ensure I have signs on the Consulting rooms and make sure that the Toilet has sign.

## Distribution

- Hainault Surgery
- Redbridge Clinical Commissioning Group
- Barking, Havering and Redbridge Quality Surveillance Group
- Care Quality Commission
- Healthwatch England

## Appendix 1 - Website accessibility checklist

### Website accessibility checklist

Questions	Yes	No
Can you change the text size?		
	Comments	
Can you change the colour of the background?		
	Comments	
Does the website have a "sitemap" button?		
	Comments	
Are there keyboard shortcuts? / Can you navigate the website without a mouse?		
	Comments	
Does the website have audio content?		
	Comments	
Is the website content written in "plain English"?		
	Comments	
Additional comment		

## Appendix 2 - Observation sheets

### GUIDANCE For Enter & View to GP Surgeries Re: Accessible Information

#### Observation Checklist

Name of Surgery: \_\_\_\_\_

Name of Authorised Representative: \_\_\_\_\_

Date: \_\_\_\_\_



Observations/Questions	Yes	No
<b>Getting to the Service:</b> There is sufficient and clear signage to the premises being visited: signs are clear, unobstructed and easily readable	Yes Comments:	No
There is accessible & sufficient parking available close to the entrance - drop off point directly outside the entrance	Yes Comments:	No
A ramp/lift is available, or there is a working assistance bell - <i>Edge of ramp highlighted to keep people off uneven surface</i>	Yes Comments:	No
Fire alarms have a light as well as sound	Yes Comments:	No
Fire exits clearly signed in various formats. Words Pictures	Yes Comments:	No
<b>Within the premises:</b> Are there trip hazards/sharp edges/furniture in pathway (both permanent & temporary)	Yes Comments:	No

Signs in various formats including pictures (e.g. on toilet doors - are they clear/contrasting/pictures)	Yes Comments:	No
Interaction between staff and service users; are they facing service user whilst talking to them using body language to communicate as well as verbal communication, is plain language - is plain language used	Yes Comments:	No
Complaint/compliments procedure information is available in alternative formats - for patients & relatives - is it on the noticeboard	Yes Comments:	No
Are the noticeboards cluttered, and are the notices easily legible	Yes Comments:	No
Is there a hearing loop sign?	Yes Comments:	No
Does the surgery have an electronic screen to inform patients of their appointment - if so what colour are the screen and writing - does it show room no. Doctor name - is it audio as well as visual		
<b>Further Comments:</b> Please provide any relevant information about accessible information		



# Appendix 3 - Questions for lead staff

**Questions for MANAGER/PERSON IN CHARGE at  
GP Surgery**

Name of Surgery: \_\_\_\_\_

Name of lead manager: \_\_\_\_\_

Name of Authorised Representatives: \_\_\_\_\_

Date: \_\_\_\_\_

	Yes	No	
1. Are patients asked about their communication needs when they first register at the surgery? For example: <ul style="list-style-type: none"> <li>• Are they asked if they have difficulties with sight/hearing?</li> <li>• Are they asked if they have a learning disability?</li> </ul>	Yes	No	Please explain  Comments
2. What have you put in place for existing patients to ensure that you are aware of their communication needs?			Comments
3. How are these needs recorded if they have any?  <i>NOTE FOR REPS: if the manager seems unsure you can prompt them with the following questions: Are they recorded on a database? Or by any other means?</i>			Comments
4. When a patient presents at reception, is there a 'pop up' which flags their needs?	Yes	No	Comments Comments
5. If yes, what system do you use?			Comments
6. If there is no system in place can you explain the reasons for this?			Comments

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	Yes	No	
7. Is there a process in place to ensure that the doctor/nurse dealing with the patient whilst they are in the surgery are aware of their communication needs before they start to interact with them?	Yes	No	Comments
8. Is there a hearing loop in the surgery, if there is what type of loop is it? <ul style="list-style-type: none"> <li>• Fixed/Portable/Both</li> </ul>			Comments
9. Have staff been provided with training on how to use it?	Yes	No	Comments
10. Are patients made aware that a hearing loop is available?	Yes	No	Comments
11. What training is provided to support all staff to communicate effectively with patients?  Deaf awareness training Dementia awareness Easy read training	Yes	No	Last date of training Yes No Yes No Yes No Comments
12. How often do you have this training?			Comments
13. Is information available in different formats to make it accessible to all patients and are patients aware of this? For example: large print, easy read, Braille, Audio. <i>NOTE FOR REPS: Please ask to see examples of this if possible and comment on what you have seen</i>	Yes	No	Comments
14. What format do you provide for people with: a. Hearing impairment b. Visual impairment c. Learning disabilities			Comments

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15. Are you able to access: <ul style="list-style-type: none"> <li>• BSL (British Sign Language) interpreters</li> <li>• Signalong (based on BSL)</li> <li>• MAKATON (a language programme using signs and symbols to help people to communicate)</li> </ul>	Yes	No	
16. Where/which organisations might you access the above if you use them?			Comments
17. Do you have a communication book? <i>NOTE FOR REPS: if they have one, please ask to see it and comment on what you have seen</i>	Yes	No	Comments
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?	Yes	No	Comments
19. How would you know this and would it be on the patients records?			Comments
20. Is there anything you would like to share with Healthwatch Redbridge?			Comments

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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.

## Appendix 4 - Questions for other staff

### Questions for STAFF in GP Surgery

Name of Surgery: \_\_\_\_\_  
 Name of Authorised Representatives: \_\_\_\_\_  
 Dates: \_\_\_\_\_

1. Are you aware of the Accessible Information Standard (AIS)?	Yes Comments	No
2. Have you been provided with training on how to support patients with:  NOTE FOR REPS: <i>If they answer yes, please ask what type of training it was and tick the appropriate box</i> <ul style="list-style-type: none"> <li>Visual impairments: blind &amp; partially sighted                          On-line <input type="checkbox"/></li> <li>Face to face <input type="checkbox"/></li> <li>Both <input type="checkbox"/></li> <li>Hearing impairments: profoundly deaf &amp; hard of hearing                          On-line <input type="checkbox"/></li> <li>Face to face <input type="checkbox"/></li> <li>Both <input type="checkbox"/></li> <li>Learning Disabilities                          On-line <input type="checkbox"/></li> <li>Face to face <input type="checkbox"/></li> <li>Both <input type="checkbox"/></li> </ul>	Yes Comments	No
3. Do you feel that you would benefit from any other training with regard to AIS?	Yes Comments	No
4. How would a patient that has a specific need be identified? <i>i.e.</i> had hearing impairments, visual impairments or learning disability? <ul style="list-style-type: none"> <li>Would it be flagged up on the computer system</li> <li>Electronic system</li> <li>A card provided by surgery they show to staff on arrival</li> </ul>	Comments  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
5. How would a patient with a hearing impairment know that they had been called for their appointment? <i>Please ask staff member to describe this</i>	Comments	

6. Is there a hearing loop in the surgery, if there is what type of loop is it? <ul style="list-style-type: none"> <li>Fixed/Portable/Both</li> </ul>	Yes Comments	No
7. Are you aware of the ways that information should be provided for people with: <ul style="list-style-type: none"> <li>hearing impairments</li> <li>visual impairments</li> <li>learning disability?</li> </ul> If yes, what are they? NOTE FOR REPS: <i>If the member of staff is struggling to give some examples you can prompt them.</i> <ul style="list-style-type: none"> <li>Hearing impairments - British sign language, subtitles on TV</li> <li>Visual impairments - Large print or audio</li> <li>Learning disabilities - Easy Read</li> </ul>	Yes Comments	No
8. Do you have a communications book?	Yes No	
9. 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? <ul style="list-style-type: none"> <li>Flashing red light</li> </ul> NOTE FOR REPS: <i>If they have one, please ask to see it and comment on what you have seen</i>	Comments	
10. In the event of a fire, what is the procedure for evacuating those who are Deaf or Blind?	Comments	
11. Has there been a fire drill and if yes, did it flag up any problems?	Yes Comments	No
12. Is there anything you would like to share with Healthwatch Redbridge?	Comments	

## Appendix 5 - Questions for Patients

### Questions for PATIENTS at GP Surgery

Name of Surgery: \_\_\_\_\_  
 Name of Authorised Representatives: \_\_\_\_\_  
 Date: \_\_\_\_\_

1. When you registered at the surgery were you asked SPECIFICALLY if you had any: <ul style="list-style-type: none"> <li>• hearing problems</li> <li>• problems with your sight</li> <li>• Or needed easy read information?</li> </ul>	Yes Comments	No Comments
2. How were you asked about this?	Yes Comments	No Comments
3. Do you HAVE a communication need such as those mentioned above?  <i>NOTE FOR REPS: If the patient answers yes, please continue with the questions, if they answer no, please say "we are here today to speak to patients with communication needs, so we don't need to keep you any longer. Thank you."</i>	Yes Comments - Please state	No
4. Are staff aware of your communication needs?	Yes Please explain	No
5. Do you feel that reception staff are able to help you effectively according to your communication needs?	Yes Please explain	No

5a. Do you feel that the doctors are able to help you effectively according to your communication needs?	Yes Please explain	No
5b. Do you feel that the nurses are able to help you effectively according to your communication needs?	Yes Please explain	No
6. If not, how do you feel this could be improved?	Comments	
7. What, if anything can be done to improve the way information is provided to you? For example: <ul style="list-style-type: none"> <li>• large print,</li> <li>• audio (spoken/recorded information)</li> <li>• easy read</li> </ul>	Comments	
8. Has there ever been a time when your communication needs have not been met? For example, when being called for an appointment or provided with written information	Yes No	Please explain
9. Is there anything else you would like to talk to us about?		

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