



Aldersbrook Medical Centre 65 Aldersbrook Road, Manor Park, E12 5DL

Wednesday 6th September 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

020 3874 4120

info@healthwatchredbridge.co.uk

Service Provider	Aldersbrook Medical Centre 65 Aldersbrook Road, Manor Park, E12 5DL
Contact Details	Practice Manager – Joanna Randan
Date/time of visit	Wednesday 6th September 2017, 10:00am – 11:30am
Type of visit	Announced visit
Authorised representatives undertaking the visits	Anne Bertrand Fiona Cooke
	Naina Thaker (staff support)
Contact details	Healthwatch Redbridge 1st Floor, 103 Cranbrook Road Ilford, Essex IG1 4PU
	020 3874 4120

# **Acknowledgements**

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

## **Disclaimer**

Please note that this report related to findings observed during our visit made on Wednesday 6<sup>th</sup> September 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.

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

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

appointment because the letter that the surgery sent to her was not in the right font meaning 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.

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

Where possible, the representatives spoke to the practice manager, other staff members such as the receptionist and nurses and service users. Due 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

- It is possible to change the size of the text on the website.
- The colour of the background cannot be changed.
- The images on the website have text descriptions explaining what the image is about.
- The website does not have a "sitemap" button.
- It is not possible to navigate the whole website without a mouse.
- There is no audio content on the website.
- Information on the website is written in plain English.

### Results of the visit

#### Observations made outside the premises:

- Signage to the premises is bold and clear but obstructed by the tree.
- No accessible parking is available.
- A ramp is available but the edge is not highlighted. Highlighting the edge of the ramp will make it easier for people with a visual impairment to notice the ramp. There is no assistance bell and the door is not automatic.
- The ramp is uneven.

#### Observations made inside the premises:

- No trip hazards were identified.
- There is no glass screen separating staff and patients.
- A Deaf representative approached the receptionist to inform her about the visit. She asked for a pen and paper. The receptionist seemed confused but provided the pen and paper. When communicating with the representative, she did not look at her but was focusing on the BSL interpreter. This interaction suggests that the receptionist does not know how to communicate effectively with a Deaf patient.
- Signage inside the surgery was not available in various formats. There were no pictures in front of the toilet.
- The noticeboards were not cluttered. However, there were notices on the wall and some were repeated.
- The complaint/ compliments procedure was not available on the noticeboard. Representatives asked staff for the procedure and were given the form.
- A hearing loop sign is available on the front door but not in the reception area.
- There is no electronic screen available in reception. There is a tannoy to inform patients when it is their turn.
- There was no poster informing patients about the Accessible Information Standard and asking them about their communication needs.
- The fire exits were clearly signed in words and pictures.

#### Speaking to the practice manager

The manager was not available during the visit so the representatives spoke to one member of staff.

- The staff member was unaware of the Accessible Information Standard.
- Staff members have not been provided with training on how to support patients with visual impairment, hearing impairment and learning disabilities.
- Staff said that she would benefit from AIS training.
- If a patient has an additional communication need then this is identified on the computer system.
- This information would be flagged up on the computer system. The surgery uses EMIS database<sup>4</sup>.
- When asked about how a patient with a hearing impairment would know if they are being called for their appointment, she said that there is only one Deaf patient and the receptionist will assist her.
- There is a portable hearing loop in the surgery. This can be taken into the consulting rooms. The staff were unsure about how the hearing loop works. A Deaf representative checked the hearing loop and it was working.
- In terms of providing information for people with a hearing impairment, the staff member said that she would write the information down.
- The staff member was unsure about how to provide information for someone with a visual impairment. The representative prompted her and she said that the surgery could provide large print information.
- The surgery does not have a communications book.
- There is no fire alarm; smoke alarm only.
- In the event of a fire, staff would support the patients to evacuate the building.
- The fire alarms are checked every week but there has been no fire drill.

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

### Speaking to patients

Representatives spoke to three patients during the visit

- All three patients said they could not remember if they had been asked about their communication needs.
- None of the patients had any communication needs so they were unable to provide any additional information.

### Recommendations

- 1. To make the website more accessible, patients should be able to:
  - 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 Browesaloud®<sup>5</sup>) especially for people with visual impairments.
- 2. A Communications Handbook<sup>6</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. Staff should receive training on AIS.
- 4. 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.
- 5. Staff should be trained on how to provide information in an accessible format for patients with learning disabilities.
- 6. The surgery should have a complaints/compliments procedure displayed on the noticeboard and this should be available in a variety of formats such as large print for patients.
- 7. It would be useful for the hearing loop sign to be placed in the reception area.

<sup>&</sup>lt;sup>5</sup> https://www.texthelp.com/en-gb/products/browsealoud/

<sup>&</sup>lt;sup>6</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. Staff should be provided with training on how to use the hearing loop. The hearing loop should also be checked regularly to ensure it is working.
- 9. 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.
- 10. 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.
- 11. The surgery should consider 'highlighting the edge of the ramp to ensure that people with visual impairments are able to see it.

## **Service Provider Responses**

No response was received from Aldersbrook Medical Centre.

#### **Distribution**

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

## Appendix 2 - Observation sheets

The state of the s		
GUIDANCE FOF ENCET & VIEW to GP SURBETIES NET ACCESSIBLE INFORMATION	nation signs in various formats including pictures (e.g. on toilet doors - are they clear/contrasting/pictures)	res No
Observation Checklist		Comments:
Name of Surgery:	Interaction between staff and service users; are	Yes No
Name of Authorised Representative:	they facing service user whilst talking to them using body language to communicate as well as verbal	Comments:
Date:	communication, is plain language - is plain	
*		
Observations/Questions	Complaint/compliments procedure information is	Yes No
Getting to the Service:	available in alternative formats - for patients &	
There is sufficient and clear signage to the premises   Yes   being visited; signs are clear, unobstructed and	No relatives - is it on the noticeboard	Comments:
easily readable Comments:		
	Are the noticeboards cluttered, and are the notices easily legible	Yes No
There is accessible & sufficient parking available Yes	ON.	Comments:
- drop off point directly		
outside the entrance Comments:		
	Is there a hearing loop sign?	Yes No
A ramp/lift is available, or there is a working	9.	
imp highlighted to keep		Comments:
people off uneven surface Comments:		_
	Does the surgery have an electronic screen to	
Fire alarms have a light as well as sound	No inform patients of their appointment - if so what	
Comments:	room no. Doctor name - is it audio as well as visual	
Fire exits clearly signed in various formats.	No	
Words	Further Comments:	
Pictures	accessible information	
Within the premises:		
Are there trip hazards/sharp edges/furniture in Yes pathway (both permanent & temporary)	No.	
Comments:		

## Appendix 3 - Questions for lead staff

Yes No Comments Yes No	ments	Comments	Yes No Comments Yes No	Comments	Comments		within 20 cessary.			
15. Are you able to access:  • BSL (British Sign Language) interpreters  • Signalone (based on BSL)	MAKATON (a language programme using signs and symbols to help people to communicate)	16. Where/which organisations might you access the above if you use them?	17. Do you have a communication book?  NOTE FOR REPS: If they have one, please ask to see it and comment on what you have seen 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?	19. How would you know this and would it be on the patients records? 20. Is there anything you would like to share with	Healthwatch Redbridge?	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.			m
Yes No Comments	Comments	Yes No	Comments Yes No Comments	Last date of training	Yes No Yes No Yes No	Comments	Comments Yes No Comments		Comments	
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?  8. Is there a hearing loop in the surgery, if there is	what type of toop is it:  Fixed/Portable/Both  9. Have staff been provided with training on how to Yes use it?	10. Are patients made aware that a hearing loop is available?	11. What training is provided to support all staff to communicate effectively with patients?	Deaf awareness training Communication training Dementia awareness Easy read training		12. How often do you have this training?      13. Is information available in different formats to Yes make it accessible to all patients and are patients aware of this? For example: large print, Comments easy read. Braille. Audio.	NOTE FOR REPS: Please ask to see examples of this if possible and comment on what you have seen	14. What format do you provide for people with: a. Hearing impairment b. Visual impairment c. Learning disabilities	ru
RGE at			Yes No Please explain		Comments	Comments		Yes No Comments	Comments	
Questions for MANAGER/PERSON IN CHARGE at GP Surgery	Name of Surgery:  Name of lead manager:  Name of Authorised Representatives:	Date:	Are patients asked about their communication needs when they first register at the surgery? For example:     Are they asked if they have difficulties with	sight/hearing?  • Are they asked if they have a learning disability?	2. What have you put in place for existing patients to ensure that you are aware of their communication needs?		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?	4. When a patient presents at reception, is there a 'pop up' which flags their needs?	5. If yes, what system do you use? 6. If there is no system in place can you explain the Comments reasons for this?	ed

## Appendix 4 - Questions for other staff

		운	;	o N	ž									£		
Comments		Yes	Comments	Yes Comments	Yes				Yes No	Comments			Comments	Yes	Comments	Comments
<ul> <li>6. Is there a hearing loop in the surgery, if there is     what type of loop is it?     Fixed/Portable/Both</li> </ul>	7. Are you aware of the ways that information should be provided for people with:	hearing impairments		<ul> <li>visual impairments</li> </ul>	<ul> <li>Learning disability?</li> </ul>	If yes, what are they?	NOTE FOR REPS: If the member of staff is struggling to give some examples you can prompt them.  • Hearing impairments -British sign language, subtitles on TV	<ul> <li>Visual impairments - Large print or audio</li> <li>Learning disabilities - Easy Read</li> </ul>	8. Do you have a communications book?	NOTE FOR REPS: If they have one, please ask to see it and comment on what you have seen	<ol> <li>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,</li> </ol>	can you snow us:      Rashing red light	<ol> <li>In the event of a fire, what is the procedure for evacuating those who are Deaf or Blind?</li> </ol>	<ol> <li>Has there been a fire drill and if yes, did it flag up any problems?</li> </ol>		<ol> <li>Is there anything you would like to share with Healthwatch Redbridge?</li> </ol>
			No Pts				No nts	S .	2	ž		N Y	ats			nts
rgery			Yes				Yes Comments	Yes		Yes	Comments	Yes	Comments			Comments
Questions for STAFF in GP Surgery gery:	Name of Authorised Representatives:		1. Are you aware of the Accessible Information Standard (AIS)?	2. Have you been provided with training on how to support patients with:	NOTE FOR REPS: If they answer yes, please ask what	type of training it was and tick the appropriate box	Visual impairments: blind & partially sighted -line      Ce to face      th	Hearing impairments: profoundly deaf & hard of hearing			- Learning Disabitutes -line	3. Do you feel that you would benefit from any other training with regard to AIS?	4. How would a patient that has a specific need be identified? i.g. had hearing impairments, visual impairments and impairments.	Wood it be flagged up on the computer system	<ul> <li>Electronic system</li> <li>A card provided by surgery they show to staff on service</li> </ul>	5. How would a patient with a hearing impairment know that they had been called for their appointment?

## Appendix 5 - Questions for Patients

	Questions for PATIENTS at GP Surgery	Surgery	5a. Do you feel that the doctors are able to	Yes No
	Name of Circums		help you effectively according to your	:
	Maille of Surgery.		communication needs?	Please explain
	Name of Authorised Representatives:		Ah Da von feel that the muree are all the holy	No.
[	Date:		von effectively according to your	
+	1 When you remistered at the current were you		communication needs?	Please explain
	asked SPECIFICALLY if you had any:		6. If not, how do you feel this could be	Comments
	<ul> <li>hearing problems</li> </ul>	Yes No	improved?	
		Comments		
	<ul> <li>problems with your sight</li> </ul>	Yes No Comments	7. What, if anything can be done to improve the way information is provided to you? For example:	Comments
	<ul> <li>Or needed easy read information?</li> </ul>	Yes No Comments	large print,     audio (spoken/recorded information)     easy read	
_	<ol><li>How were you asked about this?</li></ol>			
			8. Has there ever been a time when your communication needs have not been met?	Yes No
	3. Do you HAVE a communication need such as	Yes No	For example, when being called for an appointment or provided with written	Please explain
		Comments -	information	
	NOTE FOR REPS: If the patient answers yes,	Please state		
	please continue with the questions, if they		Alet at a dil blumu unu asla anthina aradi al 19	
	speak to patients with communication needs, so we don't need to keep you any longer. Thank you."		to us about?	_
	4. Are staff aware of vour communication	Yes		
	needs?			
		Please explain		
	5. Do you feel that reception staff are able to	Yes No		
	netp you errectively according to your communication needs?	Please explain		

Healthwatch Redbridge 1st Floor, 103 Cranbrook Road Ilford, Essex IG1 4PU

020 3874 4120

info@healthwatchredbridge.co.uk www.healthwatchRedbridge.co.uk