



**Enter & View
Report**

**VM Surgery
281 Ilford Lane,
Ilford, Essex
IG1 2SF**

Monday 2nd October 2017

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Please contact us for more details.

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Service Provider	VM Surgery 281 Ilford Lane, Ilford, Essex IG1 2SF
Contact Details	Practice manager- Sharon Moorton
Date/time of visit	Monday 2nd October 2017, 10.00am -11.30pm
Type of visit	Announced visit
Authorised representatives undertaking the visits	Neil Adie Hyacinth Osborne Miranda Peers (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 VM Surgery for their contribution to the Enter & View programme.

Disclaimer

Please note that this report related to findings observed during our visit made on Monday 2nd October 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 programme¹ 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 Standard². 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 1st 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 because the letter that the surgery sent to her was not in the right font meaning she was unable to read it.

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

NHS England reviewed the Accessible Information Standard during January-March 2017. Their subsequent report³ 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 to the specific nature of the visit, it wasn't always possible to speak to patients with communication impairments.

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

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:

- There is a large sign for the GP practice, but it is for the other practice that is in the same building, Mathukia's surgery. There is a note on one of the windows informing existing patients that VM surgery will be moving to this practice.
- No accessible parking is available. There are three marked bays outside the surgery, but these are for the doctors. It is possible to park opposite the surgery or slightly further down the road and pay at a meter round the corner.
- Level entrance to the surgery so a ramp is not required. There is a button for wheelchair access.

Observations made inside the premises:

- The chairs are close to the self-check machine and this could be hazardous for someone with a visual impairment.
- There is a (temporary) ramp in the hall to some of the consultation rooms and the toilet which leads to a fire exit.
- Signs in the surgery were clear and easy to see. A large sign is placed above the reception area. There was a poster directing patients to the consulting room for VM surgery.
- There is a (half) glass screen, but it is only at the bottom of the reception desk. It would depend on a person's height as to whether this would hinder their ability to lip-read. Or the receptionist would need to stand up to enable a patient to lip-read.
- The noticeboards were not cluttered and the notices were adequately spaced out.
- There is a sign on the noticeboard about making a complaint, but not the actual policy. The information was written in large print but it does not state that it is available in alternative formats such as audio.
- No hearing loop sign in reception.
- A TV screen is available to inform patients of their appointment. It does not call out the name of the patient. The doctor comes out to call the patient.
- There is a poster asking patients about their communication needs.
- The fire alarm does not have a flashing red light as well as sound.
- Fire exits are clearly signed in words and pictures.

Speaking to staff

The practice manager was not available during the visit so the representative spoke to the receptionist.

- The receptionist said that she is aware of the Accessible Information Standard.
- Staff have not been provided with training on how to support patients with visual impairment, hearing impairment and learning disabilities.
- She said that she would like more training with regards to AIS as this will increase her confidence.
- Patients' communication needs are flagged up on EMIS database⁴.
- If there is a patient with a hearing impairment, they will know about their appointment through the display board. The doctor is also able to inform the reception staff who will assist the patient.
- There is no hearing loop at the moment but this will be sorted out shortly.
- When asked about the different formats of providing information for someone with a communication need, staff said that they use their knowledge of the patient.
- The surgery does not have a communications book.
- In the event of a fire, the fire marshal will direct the patients out of building.
- A fire drill takes place every month and no problems have been identified.

Speaking to patients

Representatives were unable speak to patients during the visit as there were none waiting for appointments.

⁴ EMIS is an electronic patient health record system used by many GPs

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.
 - 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®⁵) especially for people with visual impairments.
2. A Communications Handbook⁶ 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. 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.
 4. Staff should be trained on how to provide information in an accessible format for patients with learning disabilities.
 5. 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.
 6. The complaints/compliments procedure should be available in a variety of formats such as audio. Also, patients should be allowed to

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

⁶ Example of a standard hospital communication book can be found at:

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

make a complaint in alternative ways such as over the phone because some patients may not be able to write.

7. The surgery should get a hearing loop system and provide training for staff members on how to use the hearing loop.
8. When the surgery has finally settled in, it would be useful to have the name of the surgery outside so that patients are aware that there are two surgeries in the building.
9. It would be useful for TV screen to call out patient's name so that they know when it is their turn.
10. It would be useful to have a yellow & black tape around the temporary ramp in the hall way to make it stand out more for someone who is partially sighted.

Service Provider Responses

The VM Surgery ceased to exist from the 1st November 2017.

*Sharon Moorton
Practice Manager*

Distribution

- VM 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
Getting to the Service: There is sufficient and clear signage to the premises being visited: signs are clear, unobstructed and easily readable	Yes Comments:	No Comments:
There is accessible & sufficient parking available close to the entrance - drop off point directly outside the entrance	Yes Comments:	No Comments:
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 Comments:
Fire alarms have a light as well as sound	Yes Comments:	No Comments:
Fire exits clearly signed in various formats. Words Pictures	Yes Comments:	No Comments:
Within the premises: Are there trip hazards/sharp edges/furniture in pathway (both permanent & temporary)	Yes Comments:	No Comments:

Signs in various formats including pictures (e.g. on toilet doors - are they clear/contrasting/pictures)	Yes Comments:	No Comments:
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 Comments:
Complaint/compliments procedure information is available in alternative formats - for patients & relatives - is it on the noticeboard	Yes Comments:	No Comments:
Are the noticeboards cluttered, and are the notices easily legible	Yes Comments:	No Comments:
Is there a hearing loop sign?	Yes Comments:	No Comments:
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		
Further Comments: 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: _____

1. Are patients asked about their communication needs when they first register at the surgery? For example: <ul style="list-style-type: none"> Are they asked if they have difficulties with sight/hearing? Are they asked if they have a learning disability? 	Yes	No
Please explain		
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?	Comments	
<i>NOTE FOR REPS: If the manager seems unsure you can prompt them with the following questions:</i> <i>Are they recorded on a database?</i> <i>Or by any other means?</i>		
4. When a patient presents at reception, is there a 'pop up' which flags their needs?	Yes	No
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	

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"> Fixed/Portable/Both 	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 Communication training Dementia awareness Easy read training	Last date of training	
Yes No		
Yes No		
Yes No		
Yes No		
Comments		
Comments		
12. How often do you have this training?	Yes	No
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	

15. Are you able to access: <ul style="list-style-type: none"> BSL (British Sign Language) interpreters Signalong (based on BSL) MAKATON (a language programme using signs and symbols to help people to communicate) 	Yes	No
Comments		
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	

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: _____

	Yes Comments	No Comments
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: <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"> Visual impairments: blind & partially sighted On-line <input type="checkbox"/> Face to face <input type="checkbox"/> Both <input type="checkbox"/> Hearing impairments: profoundly deaf & hard of hearing On-line <input type="checkbox"/> Face to face <input type="checkbox"/> Both <input type="checkbox"/> Learning Disabilities On-line <input type="checkbox"/> Face to face <input type="checkbox"/> Both <input type="checkbox"/> 	Yes Comments	No Comments
3. Do you feel that you would benefit from any other training with regard to AIS?	Yes Comments	No Comments
4. How would a patient that has a specific need be identified? <input type="checkbox"/> If had hearing impairments, visual impairments or learning disability? <ul style="list-style-type: none"> Would it be flagged up on the computer system Electronic system A card provided by surgery they show to staff on arrival 	Yes Comments <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	No Comments
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>	Yes Comments	No Comments

	Yes Comments	No 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"> Fixed/Portable/Both 	Yes Comments	No Comments
7. Are you aware of the ways that information should be provided for people with: <ul style="list-style-type: none"> hearing impairments visual impairments learning disability? 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"> Hearing impairments - British sign language, subtitles on TV Visual impairments - Large print or audio Learning disabilities - Easy Read 	Yes Comments	No Comments
8. Do you have a communications book? NOTE FOR REPS: <i>If they have one, please ask to see it and comment on what you have seen</i> 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"> Flashing red light 	Yes No Comments	Comments
10. In the event of a fire, what is the procedure for evacuating those who are Deaf or Blind?	Comments	Comments
11. Has there been a fire drill and if yes, did it flag up any problems?	Yes Comments	No Comments
12. Is there anything you would like to share with Healthwatch Redbridge?	Comments	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"> • hearing problems • problems with your sight • Or needed easy read information? 	Yes Comments Yes Comments Yes Comments	No No No
2. How were you asked about this?		
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? 5b. Do you feel that the nurses are able to help you effectively according to your communication needs?	Yes Please explain Yes Please explain	No 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"> • large print, • audio (spoken/recorded information) • easy read 	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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