



Ilford Medical Centre 61 Cleveland Road, Ilford, Essex IG1 1EE

Friday 29th September 2017

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Service Provider	Ilford Medical Centre 61 Cleveland Rd, Ilford, Essex IG1 1EE
Contact Details	Practice manager- Anita Vallamkonda
Date/time of visit	Friday 29 th September 2017, 10.00am- 11.30pm
Type of visit	Announced visit
Authorised representatives undertaking the visits	Mike New Bushra Tahir
Contact details	Healthwatch Redbridge 1 st Floor, 103 Cranbrook Road Ilford, Essex IG1 4PU 020 3874 4120

Acknowledgements

Healthwatch Redbridge (HWR) would like to thank the staff and patients at Ilford 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 Friday 29th 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 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.

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

- It is possible to change the size of the text on the website.
- The colour of the background cannot be changed.
- There are no images on the website that need to be explained.
- The website has a "sitemap" button.
- It is 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:

- The medical centre sign is large and clear; it is written in a white font on blue background. However, the main entrance is not at the front of the building and there is no signage directing patients to the main entrance.
- There are no accessible parking spaces.
- There is no ramp/lift because there is level entrance to the building.

Observations made inside the premises:

- No trip hazards were identified.
- Signs inside the premises were clear and easy to see.
- The complaints/ compliments procedure was available on the noticeboard. However, it was not very prominent.
- Also, it does not mention its availability in alternative formats such as large print.
- The noticeboards were not cluttered and most of the notices were legible.
- Fire alarm does not have flashing lights as well as sound.
- Fire exists were clearly signed in pictures and words.
- A hearing loop sign was available on the hearing loop equipment but was not seen anywhere else in the surgery.
- An electronic screen was available but it was not working during the visit. Staff members were unsure of when it would be repaired and when it was last working.

Speaking to the practice manager

- The manager said that patients are asked about their communication needs when they first register at the surgery. A representative was shown the registration form and there was a question asking new patients about their communication needs.
- The procedure for identifying communication needs of existing patients was unclear.
- The communication needs of patients are recorded on the EMIS database⁴.
- When a patient presents at reception, information 'pops up' and flags their needs.
- Doctors and nurses are informed of the patient's communication needs by the computer system.

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

- There is a portable hearing loop. It has not been checked since it was installed. A representative checked the hearing loop and it was working.
- Staff members have been provided with training on how to use the hearing loop.
- The manager said that patients are informed of the hearing loop by signs available on the noticeboard. However, the representative did not see this sign.
- Staff members have been provided with in-house training on how to communicate effectively with patients. They have received Deaf awareness training, communication training and easy read training.
- Training is provided on an annual basis.
- Information is available in different formats such as large print. Patients can access audio information on the website.
- The manager said that patients with a hearing impairment have the hearing loop to assist them whilst patients with visual impairments can be provided with large print information.
- Patients who have a learning disability often visit the surgery with their carer.
- The surgery is able to access BSL interpreters. It has rarely been used; once or twice in five years.
- The manager informed Healthwatch that the surgery uses Big Word. .
- A communications book is not available.
- If the next of kin/carer has a communication need, staff are able to record this information on the database.

Speaking to other staff (receptionists)

Representatives spoke to two other staff members during the visit.

- Both staff members were aware of the Accessible Information Standard.
- They have been provided with online training with regards to supporting patients with visual impairments, hearing impairments and learning disabilities. This took place in August 2016.
- Patient's needs are flagged up on the computer system.
- When asked how a patient with a hearing impairment would know when it is their turn, staff said that the doctors or any other staff member would assist the patient to the consulting room.
- Both staff members said that there is a portable hearing loop.
- When asked about providing information for someone with a hearing impairment, both staff members mentioned the hearing loop.
- They were unable to explain how to provide information for patients with visual impairments or learning disability.

- Staff showed representatives a record of staff training when asked about the communication book.
- In the case of a fire emergency, patients will be accompanied out of the building.
- The fire alarm does not have a flashing red light.
- Both staff members were unaware of a recent fire drill.

Speaking to patients

Representatives spoke to four patients during the visit.

- Three of the four patients said that they were asked about their communication needs when they registered with the surgery.
- One of the patients mentioned that this was asked on the registration form.
- Two patients had additional communication needs.
- The first patient said that some of the staff members are aware of her communication needs.
 - ⇒The reception staff and doctors are able to help her effectively according to his communication needs but the nurse is not able to support her effectively.
 - ⇒She would like to see the same doctor every time she visits the surgery.
 - ⇒She would like to receive large print and easy read information.
 - ⇒She mentioned that she was not adequately supported when she had an asthma attack.
- The second patient said that staff members are aware of his communication needs.
 - ⇒Reception staff are unable to support him effectively but the doctor and nurse are able to support him effectively.
 - ⇒He would like a regular booking appointment. Also, availability of large print, audio and easy read information.
 - ⇒He mentioned that he was concerned about seeing other doctors.

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.
 - Access website information via screen readers and translation software (such as Browesaloud®⁵) especially for people with visual impairments.
- 2. The surgery should consider putting a sign directing patients to the main entrance.
- 3. 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.
- 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. Although staff have been provided with training on supporting patients with visual impairment, hearing impairment and learning disabilities, their responses when asked about providing information in alternative formats was not sufficient. This suggests that staff members require additional training or a refresher course to ensure that they can support patients adequately.
- 6. 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.
- 7. The complaints/compliments procedure should be available in a variety of formats such as large print.
- 8. The surgery should put another hearing loop sign in a visible area for patients.
- 9. The electronic screen should be fixed as soon as possible. This will help to ensure that patients know when it is their turn.

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

- 10. The surgery needs to put a clear 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.
- 11. Staff members should be provided with information of the organisation for booking BSL interpreters.

Service Provider Responses

A factual correction was made on page 9 by the practice manager and this has been noted. No other changes were requested.

Distribution

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

Appendix 2 - Observation sheets

Signs in various formats including pictures (e.g. on toilet doors - are they clear/contrasting/pictures)	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	Complaint/compliments procedure information is available in alternative formats - for patients & relatives - is it on the noticeboard	Comments: Are the noticeboards cluttered, and are the notices easily legible Yes No Comments:	Yes No Is there a hearing loop sign? Comments:	Yes No 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 Yes No	ments:
GUIDANCE For Enter & View to GP Surgeries Re: Accessible Information Observation Checklist	Name of Surgery: Name of Authorised Representative: Date:	Observations/Questions Getting to the Service: There is sufficient and clear signage to the premises being visited: signs are clear, unobstructed and	easily readable There is accessible & sufficient parking available close to the entrance - drop off point directly outside the entrance	A ramp/lift is available, or there is a working assistance bell - Edge of ramp highlighted to keep people off uneven surface	Fire alarms have a light as well as sound Fire exits clearly signed in various formats.	Words Pictures Within the premises: Are there trip hazards/sharp edges/furniture in pathway (both permanent & temporary)

Appendix 3 - Questions for lead staff

Yes No Comments Yes No Comments Yes No	Comments	Yes No Comments Yes No Comments	Comments Comments	within 20 scessary.	
15. Are you able to access: • BSL (British Sign Language) interpreters • <u>Signalong</u> (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.	м
Yes No Comments	Comments Yes No	Comments Yes No Comments Last date of	training Yes No 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 Comwhat type of loop 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	o. o. tr,	14. What format do you provide for people with: a. Hearing impairment b. Visual impairment c. Learning disabilities
RGE at		Yes No Please explain	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:	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?	What have you put in place for existing patients to ensure that you are aware of their communication needs? How are these needs recorded if they have any?	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?

Appendix 4 - Questions for other staff

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Comments		;	Yes		Yes Comments	Yes				Yes No	Comments			Comments	Yes	Comments	Comments
 6. Is there a hearing loop in the surgery, if there is what type of loop is it? • Fixed/Portable/Both 	7. Are you aware of the ways that information should	be provided for people with:	 hearing impairments 		 visual impairments 	 Learning disability? 	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 Visual impairments - Large print or audio Learning disabilities - Easy Read	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	 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: • Flashing red light	10. In the event of a fire, what is the procedure for evacuating those who are Deaf or Blind?	11. Has there been a fire drill and if yes, did it flag up any problems?		12. Is there anything you would like to share with Healthwatch Redbridge?
				S.				ĝ	Š		ž	!	§.				
rgery				Yes				Yes Comments	Yes	comments	Yes	Comments	Yes	Comments			Comments
Questions for STAFF in GP Surgery Name of Surgery:	Name of Authorised Representatives	of participation representations	Dates:	1. Are you aware of the Accessible Information Standard (ARX)	2. Have you been provided with training on how to support patients with:	REPS: If they answer ves. please ask what	type of training it was and tick the appropriate box	Visual impairments: blind & partially sighted On-line	 Hearing impairments: profoundly deaf & hard of hearing 	On-tine Face to face	Open District	On-line Face to face	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.e. had hearing impairments, visual	Would it be flagged up on the computer system	Electronic system A card provided by surgery they show to staff on arrival	5. How with a hearing impairment know that they had been called for their appointment?

Appendix 5 - Questions for Patients

res no Please explain	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-	Please explain Comments	Comments		Yes	Please explain	_			
oa. Do you reet that the doctors are able to help you effectively according to your communication needs?		nuses are able to help ng to your	communication needs: 6. If not, how do you feel this could be improved?	7. What, if anything can be done to improve the way information is provided to you? For example:	 large print, audio (spoken/recorded information) easy read 	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	 Is there anything else you would like to talk to us about? 			
			o _K	9	Ŷ		S		٥ ۷		9
GP Surgery			Yes No Comments	Yes No Comments	Yes No Comments		Yes No Comments - Please state		Yes No	Please explain	Yes No Please explain

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