



**Enter & View
Report**

**Rydal Group Practice
375 High Road,
Woodford Green, IG8 9QJ**

Friday 1st 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.

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Service Provider	Rydal Group Practice 375 High Road, Woodford Green, IG8 9QJ
Contact Details	Practice Manager – Dorota Jedlinski
Date/time of visit	Friday 1st September 2017, 10:30am – 12:00pm
Type of visit	Announced visit
Authorised representatives undertaking the visits	Hyacinth Osborne Sarah Oyebanjo
Contact details	Healthwatch Redbridge 1st Floor, 103 Cranbrook Road, Ilford, IG1 4PU 0203 874 4120

Acknowledgements

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

Disclaimer

Please note that this report related to findings observed during our visit made on Friday 1st 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.

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 that 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 not 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 does not have 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:

- It is difficult to identify the surgery until you are right in front of the building.
- The name of the surgery is written on a board in front of the building. It is written in a black font on white background.
- There is another board with the name of the surgery in the car park. The name is written in a red font on white background.

Provider Response:

Our PPG had a large input with regard to changing the signage at the surgery. We actually have signage on both sides of the entrance to the car park as well as on the wall of the car park.

- There are three accessible parking spaces in front of the surgery.
- A ramp/lift is not available. There are stairs when using the front entrance. There are hand rails for people to hold on to when using the stairs.
- Patients who need wheelchair access are signposted to the side door where there is level entrance into the surgery.

Provider Response:

We wanted to have a ramp installed at the front entrance but as the surgery is located in a conservation area so this was not possible. We are part way through alterations to the side entrance. We have changed the parking at the practice so that there is a clear access through for wheelchair users. We now have electric glass doors at the side entrance which open on approach. We are in the process of removing the internal doors so once inside the entrance wheelchair users will be able to navigate their way through without the need to open an internal door.

Observations made inside the premises:

- There is a trip hazard at the entrance because the pavement is uneven.

Provider Response:

We are waiting for work to commence to rectify this.

- There is a glass screen on one side of the reception. A glass screen can create a glare making it more difficult for a Deaf person to lip read.
- One representative observed the receptionist behind the glass screen stand up and move to the side without a glass screen when talking to one of the patients.
- The noticeboards were not cluttered. The posters were neatly spaced out and easy to read. Some of the posters were written in a small font.
- The complaints/compliments procedure is not available on the noticeboard. However, it was available on the reception desk for patients to take away with them. This leaflet was only available in a regular font size.
- There was a poster on one of the noticeboards asking patients to give their feedback and there was also information about the complaints advocacy service in Redbridge.

Provider Response:

The poster on the 'information for patients board' (noticeboard as mentioned above) asking patients to give feedback also refers the patient to reception for a copy of the complaints procedure which was deemed sufficient by the CQC inspector. The leaflets are available in large font. I have reminded all staff of this.

- There was no poster on the noticeboard informing patients about the Accessible Information Standard.
- Signs were available in a variety of formats in the surgery. Signs were written in words and pictures. There was clear signage to the toilet. On the toilet door, there were only pictures but no words. The pictures were large and easy to see.
- The consulting room doors had the name of the doctor and the room number. This is written in a white font on brown background.
- There was a hearing loop sign in reception.

- The surgery has a TV screen to inform patients of when it is their turn. The patient's name is written in a bold white font on blue background. The patients name, doctor name and room number is also called out.
- The signs for the fire exits are bold and large.
- The surgery does not have a fire alarm with red flashing lights.

Provider Response:

We have 2 fire Marshalls. One would take care of upstairs and one would take care of the ground floor. We would ensure all rooms and toilets were evacuated before leaving the premises.

Speaking to staff

The practice manager and deputy practice manager were not available during the visit. The representative was only able to speak to one member of staff (receptionist).

Provider Response:

Unfortunately, on the day of your visit, the reception co-ordinator was off sick. She would have been the person that would have been answering all of your questions on the day of the visit. The practice manager was not at work on the day of your visit and the deputy practice manager was in a meeting and therefore not available when you arrived. She did however, when her meeting had finished, ask if there was anything she could help with and you advised her that you didn't need any further questions answered.

- The staff member was unaware of the Accessible Information Standard.
- Staff have not been provided with training on how to support patients with visual impairments, hearing impairments and learning disabilities.
- The staff member said that she would benefit from training with regards to AIS.

Provider Response:

Staff have on going monthly training so the practice will incorporate this in to the next training session.

- Patients with communication impairments are identified when they present at reception because this information is recorded on the computer database.

- The representative was shown the registration form and there was no question asking new patients about their communication needs. Patients were asked whether they have a disability.

Provider Response:
This has now been added to the form

- If a patient with a hearing impairment was waiting for their appointment, their name will appear on the TV screen. If they do not go to the doctor's room then the doctor will come out and get the patient.
- There is a portable hearing loop. A representative tested the hearing loop and it was working.
- When asked about the different formats for providing information for someone with a hearing impairment, the staff member said that she would use her knowledge of previous interaction.
- In terms of providing information for someone with a visual impairment, she said that staff will help the person.
- For someone with a learning disability, the carer would accompany the patient.
- The staff member said that the surgery has a carer coordinator to support carers with any additional needs.
- The surgery is unable to access BSL interpreters.
- The surgery does not have a communications book.

Provider Response:
We used to have a communications book until we changed our computer systems. We now communicate messages using the patient's notes electronically. This reduces the potential for errors and near misses.

- In the case of a fire, the fire marshal will escort the patients out of the building.
- No problems were identified during the last fire drill.

Speaking to patients

Representatives spoke to two patients during the visit.

- Both patients said that they could not remember if they had been asked about their communication needs.
- Both patients said that they do not have any communication needs so they were unable to provide any more information.

Recommendations

1. To make the website more accessible, 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®⁴) especially for people with visual impairments.

Provider Response:

The website was changed and designed by our PPG. We will however take on board your findings and make changes to the website as you recommend.

2. A Communications Handbook⁵ 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.

Provider Response:

We will order a communications handbook.

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.

⁴ <https://www.texthelp.com/en-gb/products/browsealoud/>

⁵ Example of a standard hospital communication book can be found at:

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

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.

Provider Response:

Staff will receive training on AIS, visual impairment and deaf awareness and training on how to provide information in an accessible format for patients with learning disabilities. Additionally the care coordinator at the practice tries to ensure that all of our patients on the learning disability register are personally called in for their annual review either by speaking to the patient directly or via the carer.

6. Staff should be trained on how to provide information in an accessible format for patients with learning disabilities.
7. The complaints/compliments procedure should be available on the noticeboard in a variety of formats for patients.
8. The leaflet informing people about the complaints/ compliments procedure should be available in a variety of formats for patients.
9. 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.

Provider Response:

We have ordered a poster about the AIS to display.

10. 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.
11. The surgery should include a question about communication needs on the registration form.

Provider Response:

We have added the question about communication needs to the new patient questionnaire.

12. Patients should have access to information in a variety of formats and communication support such as a BSL interpreter. If this is not provided then patients communication needs may not be met.

Service Provider Responses

We would like to thank Rydal Group Practice for the responses made and Healthwatch Redbridge has incorporated them within this report where appropriate.

Distribution

- Rydal Group Practice
- 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?	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

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		Yes	No
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: • Are they asked if they have difficulties with sight/hearing? • Are they asked if they have a learning disability?	Yes Please explain	No
	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
	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? • 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
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		

15. Are you able to access: • 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>		
• 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"/>		
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? <i>i.e.</i> had hearing impairments, visual impairments or learning disability?	Yes Comments	No Comments
• Would it be flagged up on the computer system	<input type="checkbox"/>	
• Electronic system	<input type="checkbox"/>	
• A card provided by surgery they show to staff on arrival	<input type="checkbox"/>	
5. How would a patient with a hearing impairment know that they had been called for their appointment?	Yes Comments	No Comments
<i>Please ask staff member to describe this</i>		

	Yes Comments	No Comments
6. Is there a hearing loop in the surgery, if there is what type of loop is it?	Yes Comments	No Comments
• Fixed/Portable/Both		
7. Are you aware of the ways that information should be provided for people with:	Yes Comments	No Comments
• hearing impairments		
• visual impairments		
• Learning disability?	Yes Comments	No Comments
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>		
• 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?	Yes No	Comments
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?	Yes Comments	No Comments
• Flashing red light		
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 Comments
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"> • hearing problems • problems with your sight • Or needed easy read information? 	Yes Comments	No Comments
2. How were you asked about this?	Yes Comments - Please state	No Comments - Please state
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 Please explain	No Please explain
4. Are staff aware of your communication needs?	Yes Please explain	No Please explain

5a. Do you feel that the doctors are able to help you effectively according to your communication needs?	Yes Please explain	No Please explain
5b. Do you feel that the nurses are able to help you effectively according to your communication needs?	Yes Please explain	No Please explain
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	Please explain
9. Is there anything else you would like to talk to us about?	_____	

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