



Granville Medical Centre 4 Granville Road, Ilford, Essex IG1 4JY

Wednesday 11th October 2017

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Please contact us for more details.

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Service Provider	Granville Medical Centre 4 Granville Road, Ilford, Essex IG1 4JY
Contact Details	Practice manager- Susan Byrne
Date/time of visit	Wednesday 11 October 2017, 11.00am -12.30pm
Type of visit	Announced visit
Authorised representatives undertaking the visits	Hyacinth Osborne Miranda Peers
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 Granville 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 11th 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.

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 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 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:

- Signs were very large and clear. The name of the surgery was written in a black font on white background.
- Three parking spaces are available at the front of the practice. The surgery has approached the council about getting an accessible parking bay outside and are looking into turning one of the existing bays into an accessible bay if it is large enough.
- There is a small car park at the back of the surgery for five cars but this is for staff only. The neighbour sold them the space and it was agreed with the council that it would not be for vehicles that come in and out all day so it cannot be used by patients.
- A ramp for access is available at the back of the premises. However, there is no sign informing patients that it is available. The edge of the ramp was not highlighted.
- The mat at the front door (outside) is a bit loose and this could present as a trip hazard.
- There is some slightly uneven ground at the back of the practice which could be a trip hazard.

Observations made inside the premises:

- The mat at the back door is a bit loose despite having a non-slip base and this could present as a hazard.
- Some signs within the premises are very bold and clear. However, signs on the consulting room doors with the GP names are not very clear - they have a gold background with black lettering which does not stand out.
- In the reception, there is a glass screen with a small gap at the bottom. This could make it difficult for someone who needs to lip read.
- The receptionist sits facing patients but quite low down which makes communication a bit more difficult. A representative observed her standing up a few times to speak to patients during the visit.
- The noticeboards were not cluttered and the notices were easily legible. They are clearly sectioned and labelled e.g. self-care, children & women, PPG, making it easy for patients to find the required information.
- There is a complaints procedure. It is not available on the noticeboard, but it is in a patient folder on a display unit next to reception. There is a small notice about the complaints procedure and it informs patients to ask the receptionist.
- The procedure and policy are written in a large font size. It does not mention its availability in other formats such as audio.

- There is a hearing loop but no sign. When the representatives arrived the hearing loop was behind the reception desk and it was not obvious that the surgery has a hearing loop. During the visit, the hearing loop was moved to the front of the reception desk thereby making it more visible.
- A TV screen is available. It has a blue background and white writing which is very large. It also has audio to inform patients about their appointment.
- There are two AIS posters one by the check in screen and one on a pillar in the corridor.
- The surgery has red flashing lights upstairs and the surgery is waiting for one to be installed downstairs.
- There are two fire exits clearly signed with words and pictures.

Speaking to the practice manager

- The practice manager said that patients are asked about their communication needs when they first register at the surgery. A representative was shown both the regular and large print registration forms. There is a section asking patients about their specific communication needs.
- Representatives were shown a document with the number of patients who have additional support needs and the way that they want to receive information. The surgery has ten patients with additional communication needs.
- With regards to finding out about communication needs of existing patients, the manager said that there is information on the noticeboard to make patients aware that they can inform staff members about their needs.
- Patients' needs are recorded on EMIS Web database⁴.
- This information 'pops up' when the patient presents at reception.
- Doctors and nurses are aware of this information because it 'pops up' when the patients name is inserted into the database.
- There is a portable hearing loop in the surgery. A representative checked the hearing loop using a hearing loop checker and it was working.
- Staff members have not been trained on how to use it.
- Patients have been provided with communication and easy read training using Blue Stream online training but they have not received Deaf awareness training.
- The manager said that it is possible to provide information in other formats such as large print.

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

- The surgery is able to access BSL interpreters using Big Word.
- There is no communications book.
- If the next of kin/ carer has any communication needs then this will be recorded on the database.

Speaking to staff

- The staff member said that she is aware of the Accessible Information Standard. She said that the surgery is focused on patients with additional needs. There are posters around the surgery to inform them about the support available.
- Staff have been provided with online training on how to support patients with visual impairments, hearing impairments and learning disabilities.
- Staff members have also done collective online research around this topic. There are protocols in place for new patients and all the information is shared with clinical staff.
- She said that she thinks she would benefit from training regarding AIS if there is any additional information that she needs to know.
- Patients with specific needs are identified on the EMIS Web database.
- When asked how a patient with a hearing impairment would know if they have been called for their appointment, she said that the information would be displayed on the electronic screen.
- There is a portable hearing loop.
- When asked about the ways that information should be provided for people with hearing impairments, she said that she can book an interpreter using Big Word.
- For patients with a visual impairment, she would provide large print and braille. The surgery is planning to get audio on their website.
- For patients with a learning disability, the surgery can provide easy read leaflets.
- A communications book is available. The representative was also shown a folder with several easy read health information.
- In the event of a fire or emergency, the fire marshal will wear a highly visible jacket and escort patients out of the building.
- She mentioned that they are planning to put a black/yellow tape at the access point at the back of the surgery.

Speaking to patients

A representative spoke to four patients during the visit.

- All four patients were unsure whether they were asked about their communication needs when they registered at the surgery. They had all registered at least ten years ago.
- None of the patients had any additional communication needs so they were unable to provide further 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.
 - Access website information via screen readers and translation software (such as Browesaloud®⁵) especially for people with visual impairments.

Provider Response:

Please refer to the new website evidence document attached.

We are liaising with our current website providers MySurgery - to find out when our contract with them will end as we have decided to move to Egton who offer a more manageable online service to meet the needs of all our patients.

2. If a communications book is available, all staff members should be aware of this. 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.

Provider Response:

All patients are aware of this booklet being available. This was mentioned in the Staff Meeting held early October - Please refer to the Agenda October Staff Meeting Evidence.

3. We are pleased that the complaints procedure is available in large print but it is also useful to have it in other formats such as audio or easy read for people with other communication impairments.

Provider Response:

We have requested for a quote from RNIB.ORG.UK to have our Practice Leaflet transcribed into Braille. Please see the Quote for Braille Leaflets Evidence.

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

4. A sign for the hearing loop should be placed in the reception and waiting area. This will help to ensure that patients are aware that the surgery has a hearing loop.

Provider Response:

Please refer to the Hearing Loop Sign Evidence. A sign has been placed in the reception area to inform patients that there is a hearing loop.

5. 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.

Provider Response:

We emailed the hearingloop.co.uk company for guidance on training they offer regarding the Hearing Loop.

6. We are pleased that there is a poster informing patients about AIS. If possible, this information should be available on an A3 poster.

Provider Response:

We do not have an A3 Printer on site - however we are considering to buy one in the short term future.

7. The surgery should consider 'highlighting the edge of the ramp to ensure that people with visual impairments are able to see it.

Provider Response:

Please refer to the Access Awareness Evidence Folder for the photos of these.

The surgery has now put black and yellow tape around the edges of the ramp.

8. It would be useful for the surgery to put a sign so that patients know there is a ramp at the back of the building.

Provider Response:

Please see the evidence attached - Access at Rear Evidence.

There is a sign informing patients that there is access available at the back of the building.

9. The surgery should ensure that the mat outside the building is secure so that patients do not trip.

Provider Response:

Mat outside the surgery has been removed - Please see evidence - Mat removed at entrance. All our mats in house are loose laid - hard floor mats with rubber borders for non-slip purposes.

Service Provider Responses

We would like to thank Granville Medical Centre for the responses made and Healthwatch Redbridge has incorporated them within this report where appropriate.

Distribution

- Granville 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

GUIDANCE For Enter & View to GP Surgeries Re: Accessible Information	essible Information		Yes No
Observation Checklist		tollet doors - are they clear/contrasting/pictures)	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	ments:
Date:		communication, is plain language - is plain language used	
Observations/Ouestions		Complaint/compliments procedure information is	Yes
Getting to the Service:		available in alternative formats - for patients &	
There is sufficient and clear signage to the premises being visited: signs are clear, unobstructed and	Yes 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 No		Comments:
crose to the entrance - grop on point directly outside the entrance	Comments:		
		Is there a hearing loop sign?	Yes No
A ramp/lift is available, or there is a working	Yes No		- Automore
assistance beu - Eage of ramp nignilighted to keep people off uneven surface	Comments:		
		Does the surgery have an electronic screen to	
Fire alarms have a light as well as sound	Yes No	inform patients of their appointment - if so what	
	Comments:	colour are the screen and writing - does it show room no. Doctor name - is it audio as well as visual	
Fire exits clearly signed in various formats.	Yes No		
Words Pictures	Comments:	Further Comments: Please provide any relevant information about accessible information	
Within the premises:			
Are there trip hazards/sharp edges/furniture in pathway (both permanent & temporary)	Yes No		
	Comments:		

Appendix 3 - Questions for lead staff

Yes No Comments Yes No Comments Yes No	Comments Comments	Yes No Comments Yes No	Comments	Comments		within 20 cessary.			
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) 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	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 loop is it? • Fixed/Portable/Both 9. Have staff been provided with training on how to 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	90 Users of sea J Line 16: 16: 16: 2	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. Realls.	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	rsi
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 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?	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? Comments	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?	aption, is there a	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	Comments	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 	 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 snow 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		12. Is there anything you would like to share with Healthwatch Redbridge?
			ON N				Ŷ.	8		9		S.				
rgery			Yes Comments				Yes Comments	Yes		Yes	Comments	Yes	Comments			Comments
Questions for STAFF in GP Surgery Name of Surgery:	Name of Authorised Representatives:		1. Wre you aware of the Accessible Information Standard (AIS)?	Have you been provided with training on how to support patients with:	NOTE FOR REPS: If they answer yes, please ask what	ig it was and tick the appropriate box	Visual impairments: blind & partially sightedlinese to faceth	Hearing impairments: profoundly deaf & hard of hearing		la parming Dicabilities		 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	Impairments of learning disability: Would it be flagged up on the computer system	Electronic system A card provided by surgery they show to staff on	5. How would a patient with a hearing impairment know that they had been called for their

Appendix 5 - Questions for Patients

Yes Please explain	Yes No	Please explain Comments	Comments			Yes	No Please explain			_				
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	pe Pe	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 		communication needs have not been met? For example, when being called for an appointment or provided with written	information	9. Is there anything else you would like to talk					
		e	2	2	o _N		o _N				o _N		No	
at GP Surgery –		-									_	olain	Γ	olain
5		Yes	Comments	Comments	Yes Comments		Yes	Comments - Please state			Yes	Please explain	Yes	Please explain

Healthwatch Redbridge

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