



**Enter & View
Report**

**Dr Paulz Surgery
Seven Kings Health Centre
1 Salisbury Road,
Ilford, Essex
IG3 8BG**

Friday 14th July 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	Paulz Surgery Seven Kings Health Centre 1 Salisbury Road, Ilford, Essex IG3 8BG
Contact Details	Practice manager- Sabina Patel (on long term sick) Acting practice manager- Sandeep Patel
Date/time of visit	Friday 14th July 2017, 10.00am - 12.00pm
Type of visit	Announced visit
Authorised representatives undertaking the visits	Anne Bertrand Bushra Tahir
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 Paulz Surgery for their contribution to the Enter & View programme.

Disclaimer

Please note that this report related to findings observed during our visit made on Friday 14th July 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 thus 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

The surgery does not have a website.

Results of the visit

Observations made outside the premises:

- Signage says 'Seven Kings Health Centre' however there are two surgeries inside the building. The sign was bold and easy to see from a distance.
- The patient will not know this until they get into the building where there are two reception desks for the different practices.
- Parking is only available for residents. There is no parking for patients outside the health centre.

Provider Response:

There are parking facilities for the patients to park.

- There is a ramp available at both entrances however the edges of the ramp are not highlighted. Highlighting the edges of the ramp makes it easier for people with visual impairments to notice the ramp.

Observations made inside the premises:

- Once inside the building, it is easy to identify the reception area for the surgery.
- Both surgeries share the waiting area in the building.
- The waiting area is bright and welcoming.
- Representatives were unable to witness any interaction between staff members and service users because they had already seen all the patients on the day of the visit.
- The acting practice manager said that they only had six appointments booked for the day.
- There were no trip hazards or sharp edges in the surgery.
- There was a hearing loop sign but it is not currently working.
- The noticeboards were not cluttered but most of the information was written in a regular font size.
- The complaints procedure is on the noticeboard. It is only available in a regular font size and does not mention that it is available in alternative formats such as large print.
- The fire alarm has a flashing light as well as sound.
- The fire exits are clearly signed with words and pictures.
- There was no poster about the Accessible Information Standard asking people to inform staff about their communication needs.
- The surgery does not have an electronic screen to inform patients of their appointment. The doctor comes out to call the patient when it is time for their appointment.

Speaking to the practice manager

Representatives were informed that the practice manager was on long term sick so they spoke with the acting practice manager, who has been in the position for the last two weeks.

- The acting practice manager said that patients are asked about their communication needs when they first register at the surgery.
- The acting practice manager said that it is a small surgery so they tend to know their patients and their communication needs. The acting practice manager informed us that this is a very small surgery and they have less than 2000 patients and only one doctor.
- Patients' needs are recorded on the system.
- There is a red warning sign, which comes up on the computer when a patient has a communication impairment.
- The surgery does not have the EMIS ⁴database system.
- There is no official process in place to ensure that the doctor/ nurse dealing with the patient is aware of their communication needs before they start to interact with them. The acting practice manager said that the receptionists and doctors know the patients.
- There is a fixed hearing loop in the surgery but it was not working at the time of the visit.
- Staff have not been provided with training on how to use the hearing loop.
- Patients are made aware of the hearing loop because there is a notice on the wall.
- There is no training provided to staff members to support them to communicate effectively with patients.
- Staff have not received deaf awareness training, communication training, dementia awareness or easy read training.
- Information is available in large print for patients or next of kin/relatives. Staff sometimes ask for support with information from the other practice on the same floor.
- The surgery is unable to provide access to BSL interpreters, Signalong or Makaton support.
- There is no communications book⁵ available in the surgery. A communications book has useful images and advice to help staff communicate with people who have additional communication needs such as easy read information and basic BSL/Makaton signs.

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

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

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

Speaking to other staff (receptionists)

Representatives spoke to two members of staff during the visit.

- Both members of staff said that they were unaware 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.
- One staff member said that she does not need communication support training because she knows all their patients.
- Both staff members said that they would benefit from training relating to AIS.
- There is no system to inform staff about a patient's communication impairment. One patient has a card showing that she has a learning difficulty.
- Reception staff know many of the patients with learning difficulties so they are able to interact well with them.
- When the staff members were asked about how they would inform a Deaf patient about their appointment, they said that the receptionist would inform the person when it is their turn.
- There is a fixed hearing loop but at the time of our visit, it was not working. Representatives did not ask whether there were hearing loops in the consultation rooms.
- Staff said that they are unaware of how to communicate with people who have a communication impairment.
- Staff said that they do not have a communications book.
- Staff said that they are unsure if there is an appropriate alarm for people with a hearing impairment.
- There is no procedure for supporting someone who is Deaf in the case of an emergency.

Speaking to patients

Dr Paulz surgery is very small and only six patients were booked in to be seen on the day of our visit.

Representatives were unable to speak to patients during the visit as they had all been seen before the visit commenced.

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.
 - Access website information via screen readers and translation software (such as Browesaloud®⁶) especially for people with visual impairments.
2. The surgery should consider investing in a patient record system that will alert staff members when a patient with an impairment presents at reception.
 3. A Communications handbook⁷ with basic images of common BSL and Makaton symbols should be available in the reception thus enabling staff to communicate more effectively with patients who have communication impairments.
 4. Although we understand that staff may have a good relationship with people who have communication impairments, it is important that there are formal procedures in place to support patients effectively. This is particularly important if practice staff leave as new staff members may not know about the needs of the patients.
 5. Staff should receive training and information on AIS.
 6. Visual impairment and deaf awareness training should be provided for all staff members. This would enable staff to know how to communicate better with a deaf/blind person.
 7. Staff should be trained on how to provide information in an accessible format for patients with learning disabilities.
 8. The complaints/compliments procedure should be available in a variety of formats such as large print for patients.

⁶ <https://www.texthelp.com/en-gb/products/browsealoud/>

⁷ Example of a standard hospital communication book can be found at:

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

9. The surgery should display a poster about Accessible Information Standard on the noticeboard. If possible, this information should be displayed on an A3 poster.
10. The surgery should ensure the hearing loop is working properly and provide training for staff members on how to use it. The manager mentioned that the issue has been reported to NELFT, as they are the service provider. Representatives were made aware that the issue had been reported to NELFT.
11. Staff should be provided with the necessary procedure for assisting Deaf people out of the building in the event of a fire.
12. The surgery should consider adding the names of both surgeries to the sign on the main entrance.
13. The surgery should consider marking the edge of the ramp to ensure that people with visual impairments are able to see it.
14. The surgery needs to put a procedure in place to identify the communication needs of existing patients.

Service Provider Responses

At the practice we will be looking into a communications handbook for those patients that have communication impairments. We will identify their needs when they are registering at the practice.

We have just contacted IT regarding our patient calling system to be available in reception so patients can check themselves in.

We are limited to things we can do here as the building is a community building shared by others too.

Distribution

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

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

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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
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
10. Are patients made aware that a hearing loop is available?	Yes	No
11. What training is provided to support all staff to communicate effectively with patients? Deaf awareness training Communication training Dementia awareness Easy read training	Comments	
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. NOTE FOR REPS: Please ask to see examples of this if possible and comment on what you have seen	Yes	No
14. What format do you provide for people with: a. Hearing impairment b. Visual impairment c. Learning disabilities	Comments	

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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
16. Where/which organisations might you access the above if you use them?	Comments	
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	Yes	No
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
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 Heathwatch 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.

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Appendix 4 - Questions for other staff

Questions for STAFF in GP Surgery

Name of Surgery: _____

Name of Authorised Representatives: _____

Dates: _____

1. Are you aware of the Accessible Information Standard (AIS)?	Yes	No
2. Have you been provided with training on how to support patients with:	Yes	No
NOTE FOR REPS: If they answer yes, please ask what type of training it was and tick the appropriate box Visual impairments: blind & partially sighted On-line ☐ Face to face ☐ Both ☐ Hearing impairments: profoundly deaf & hard of hearing On-line ☐ Face to face ☐ Both ☐ Learning Disabilities On-line ☐ Face to face ☐ Both ☐		
3. Do you feel that you would benefit from any other training with regard to AIS?	Yes	No
4. How would a patient that has a specific need be identified? ☐ If they had hearing impairments, visual impairments or learning disability?	Comments	
• Would it be flagged up on the computer system • Electronic system • A card provided by surgery they show to staff on arrival	☐ ☐ ☐	
5. How would a patient with a hearing impairment know that they had been called for their appointment?	Comments	
Please ask staff member to describe this		

6. Is there a hearing loop in the surgery, if there is what type of loop is it?	Comments
Fixed/Portable/Both	
7. Are you aware of the ways that information should be provided for people with:	Yes
- 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	Yes No Comments
8. Do you have a communications book?	Yes
NOTE FOR REPS: If they have one, please ask to see it and comment on what you have seen	Comments
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?	
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
12. Is there anything you would like to share with Heathwatch 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:	Yes Comments	No Comments
• hearing problems		
• problems with your sight	Yes Comments	No Comments
• Or needed easy read information?	Yes Comments	No Comments
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?	Yes Please explain	No
5b. Do you feel that the nurses are able to help you effectively according to your communication needs?	Yes Please explain	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: • 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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