

March 2020





What is Healthwatch Havering?

Healthwatch Havering is the local consumer champion for both health and social care in the London Borough of Havering. Our aim is to give local citizens and communities a stronger voice to influence and challenge how health and social care services are provided for all individuals locally.

We are an independent organisation, established by the Health and Social Care Act 2012, and employ our own staff and involve lay people/volunteers so that we can become the influential and effective voice of the public.

Healthwatch Havering is a Company Limited by Guarantee, managed by three part-time directors, including the Chairman and the Company Secretary, supported by two part-time staff, and by volunteers, both from professional health and social care backgrounds and lay people who have an interest in health or social care issues.

Why is this important to you and your family and friends?

Following the public inquiry into the failings at Mid-Staffordshire Hospital, the Francis report reinforced the importance of the voices of patients and their relatives within the health and social care system.

Healthwatch England is the national organisation which enables the collective views of the people who use NHS and social services to influence national policy, advice and guidance.

Healthwatch Havering is <u>your</u> local organisation, enabling you on behalf of yourself, your family and your friends to ensure views and concerns about the local health and social services are understood.

<u>Your</u> contribution is vital in helping to build a picture of where services are doing well and where they need to be improved. This will help and support the Clinical Commissioning Groups, NHS Services and contractors, and the Local Authority to make sure their services really are designed to meet citizens' needs.

'You make a living by what you get, but you make a life by what you give.' Winston Churchill



Introduction

In February 2020, Healthwatch Havering (along with its neighbours, Healthwatch Barking & Dagenham and Healthwatch Redbridge) was commissioned by the Barking & Dagenham, Havering and Redbridge Clinical Commissioning Groups (CCGs) to undertake a survey of service-users of GP surgeries whose first language was not English, to ascertain the extent of their use of interpreter services. The CCGs were proposing later in the year to re-commission an Interpreter Service and wanted data on which to judge the extent of service needed.

The original intention was to carry out a series of focus group-type events at which the agreed questionnaire would be completed by respondents, who would be drawn from people for whom English was a second language (including users of British Sign Language (BSL).

Regrettably, the commencement of this survey coincided with the development of the Covid19 Coronavirus pandemic, which led to the opportunity for holding focus groups to be greatly curtailed. In the event, Healthwatch Havering was able to conduct enough interviews to obtain completed questionnaires from 132 people; of them, 34 resided elsewhere than in Havering so the survey results are based on 98 questionnaires. The survey questionnaire is attached as Appendix 1.

Demographic background¹

The demand for interpreter services in Havering is rather lower than in nearby boroughs; the number of people for whom English is a second language is significantly lower in Havering than in other East London

¹ The demographic data quoted throughout out this report is derived from information available through the Havering London Borough Public Health Department website, based on data from the 2011 Census © Crown Copyright acknowledged



boroughs and indeed in London as a whole. Havering has traditionally had a much lower proportion of non-White British residents than elsewhere in London (in the 2001 census, the proportion of White British to residents from other backgrounds was roughly 90:10; by 2017 it had changed to roughly 83:17, with about 90% - irrespective of ethnicity - of the population having been born in the UK)². It should be noted - and emphasised - that being from a non-White British background need not be indicative that English is not a person's first language; see Appendix 2, section A for the languages spoken in Havering at the time of the 2011 census

Moreover, those residents from non-White British backgrounds were less likely to be newly-arrived immigrants but people moving to the borough with a settled way of life, whose command of English was already high, or the children or grandchildren of such people who had been through the British school system whose use of English was indistinguishable from people of White British backgrounds.

In the 2011 census (the latest dataset available that contained accurate information), 218,645 (95%) residents had English as their main or only language; of the remaining 5% (10,466), had a range of languages as their first, including 4,416 who spoke another EU language, 2,636 who had a South Asian language, 1,272 an East Asian language, 425 Turkish and 242 Russian (a fuller list, with London and national data, is available in Appendix 2). Currently, the population of Havering has risen to in excess of 250,000 and the proportion of non-White British residents will inevitably have risen but, nearly 10 years having passed since the last census, it is likely that the proportion of them lacking a sufficient command of English requiring them to use an interpreter service will have fallen.

² "This is Havering 2017: A Demographic and Socio0economic Profile" – Public Health Havering



The demographic information relating to the respondents in the survey is set out in Appendix 3.

Participants

Before the Coronavirus pandemic restricted activity, Healthwatch Havering was able to arrange participation from three groups of people:

- Havering Adult College classes for people learning English as a second language
- Havering Asian Social and Welfare Association (HASWA)
- DeafPlus class for people learning to lip read

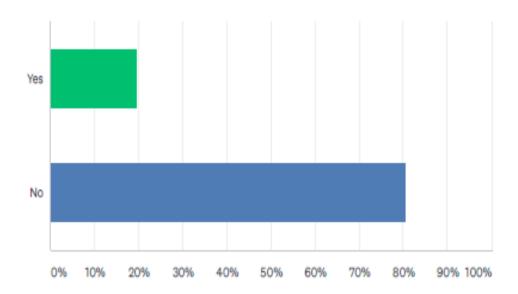
Healthwatch Havering is grateful to the Adult Education College, HASWA and DeafPlus for their invaluable help in facilitating the survey and to those people who participated in the survey through those organisations.

The survey results

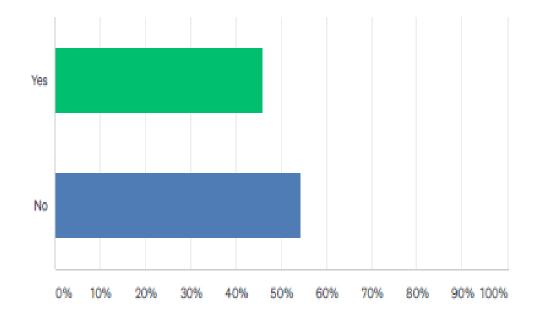
Not all respondents indicated the name and address of the GP surgery at which they were registered but those who did gave details of surgeries across the borough: the relatively random distribution of the surgeries named does not permit any particular conclusion to be drawn about the incidence of need for interpreter services on a locality or surgery by surgery basis.



Of those who responded, fewer than 20% had made use of an interpreter service at their surgery:

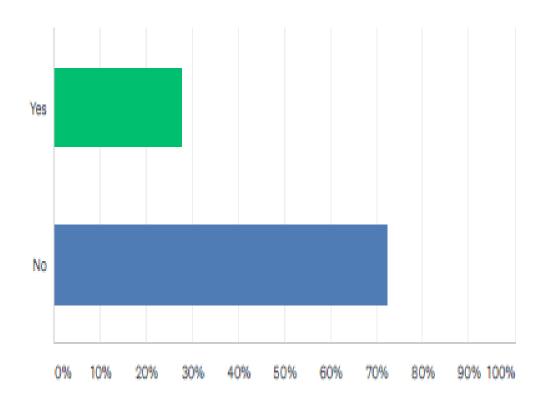


A higher proportion of respondents were aware that an interpreter service was available at the surgery:





And fewer than a third had been told that an interpreter service was available at the surgery:



Of those who had used the interpreter service (37 people), in slightly more than half of the cases (54% - 20 people), an interpreter had been physically present in the surgery for the consultation; in the remainder, the interpretation had been delivered by telephone.

34 people had been accompanied by a family member or friend to interpret for them rather than use an interpreter service; in 16 cases this had been at the request of a healthcare professional.

Bearing in mind that this survey was undertaken before the "lockdown" as a result of the Covid19 coronavirus pandemic led to the widespread use of video facilities for activity including GP consultations, 51% of respondents indicated that they were prepared



to use interpreter services by video (previous surveys of patients in Havering had indicated a much lower incidence of interest in using consultations by video or phone) ³.

For 30 people, the interpreter service had been available at a suitable time for the respondent, but the majority indicated that the interpreter had not been available at a suitable time. Only 4 respondents indicated that the interpreter had failed to be polite and respectful and only 4 (not necessarily the same people!) considered that, when they used the interpreter, they did not feel that they had understood what the healthcare professional they saw was telling them. 13 felt that the appointment they had did not last long enough.

Conclusion

Healthwatch Havering has carried out a number of Enter & View visits to GP surgeries across the borough. In response to specific questions about use of interpreter services, in only a few cases has mention been made of the need for interpretation by either staff of a surgery or patients.

For the reasons of demography explained earlier in this report, relatively few residents in Havering lack a sufficient command of English that requires them to use an interpreter. That said, it is imperative that those who have an imperfect command of English should be able to communicate effectively with their healthcare professional in order to avoid any possibility of mutual misunderstanding that, in some instances, could result in significant harm. Currently planned development of large areas of the borough for new housing that will become available over the next 10 years means

³ See for example "**NHS Long Term Plan Engagement Programme"**, Healthwatch Havering, June 2019



that the demographics of the borough are likely to continue to change significantly from the current make-up. Whether in time the borough will match the diversity of its immediate neighbours, Barking & Dagenham and Redbridge, where the ratio of white British/non-White British is in both cases roughly 50:50, is currently unknowable; projections by Public Health Havering in 2017 ⁴ suggested that the white/BAME ratio in 2032 is currently expected to be 78:22, which suggests that it will be some time before parity is reached.

Despite the low demand at present, changes anticipated in housing provision across the borough suggest that the population profile will gradually come to reflect London's overall profile and it is essential that primary care services in the borough will be ready and prepared for this.

Regardless of how many residents currently need this service, it is important that the Interpreting Service commissioned by the CCG complies with the principles set out in NHS Guidance Note:

Commissioning Interpreting and Translation Services in Primary Care, ensuring the 8 Principles identified are part of the quality specification for Providers of the service.

It should be borne in mind also that there are different legal obligations concerning provision of support for Deaf, blind or deafblind people compared to those who speak a community language, which are covered under the Equality Act 2010 and Accessible Information Standard 2016 and a specific service must be available for these vulnerable groups.

⁴ See https://www.haveringdata.net/population-demographics



Appendix 1

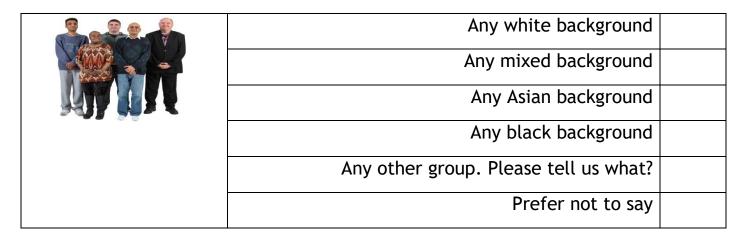
The questionnaire

Are you?		√Tick		√Tick
* †	Male		Other	
Т	Female		Prefer not to say	

How old are you?		√Tick		√Tick
8.2	Under 18		55 to 64	
0.0	18 to 24		65 to 74	
	25 to 34		75 or older	
	35 to 44		Prefer not to say	
	45 to 54			
Are you disabled?		√Tick		√Tick
	Physical / mobility		Learning / mental	
	issue		health issue	
	Visual impairment		Hearing problems	
	Another issue		No	

What background are you from?	
This is not about where you were born. It's about the group you think you	
belong to.	





What is the name of your doctors' surgery?		
Tell us 🧳		
what you think the idea is a good one? Yes No Not sure	Please tell us the name of your doctors' surgery:	

Tell us what you think

Have you used the surgery?	interpreting service at your doctors'	√Tick
	Yes	
	No	

If you haven't used the interpreting service, do you know about it?	√Tick
Yes	



No	

Has anyone at your doctors' surgery told you about the interpreting service?		√Tick
	Yes	
	No	

If you have used the did you use?	ne interpreting service, what service	√Tick
	Telephone interpreting	
	Face to face interpreting (the	
	interpreter was in the same room as	
	you)	
	Other service. Please tell us what?	
10.		

Have you ever taken a family member or friend to your	√Tick
doctors' surgery to interpret for you?	



	Yes	
	 No	

If you have taken a family member or friend to interpret for you, did your doctors' surgery ask you to do this?		√Tick
	Yes	
	No	

Are you happy to u	se video interpreting services?	√Tick
(Video interpreting	g is when there is a person on a screen)	
	Yes	
	No	

Awful

Not very good



	n interpreter who was in the same I you get an appointment at a time that	√Tick
May 5:00 18	Yes	
	No	

Was the interprete	er polite and respectful to you?	√Tick
The state of the s	Yes	
	No	

When you used an interpreter, how well do you feel that you understood what the doctor was saying?	√Tick

Okay

Really good

Fantastic

When you used an the doctor long en	interpreter, was the appointment with ough?	√Tick
	Yes	



n if		
5:00	No	



Appendix 2

Use of languages

A. Main Languages used in Havering

The following list of languages in use in Havering was prepared by Public Health Havering, derived from data obtained by the 2011 Census.

At the time of preparing this report, this was the latest full information available.

Given the changes in population since 2011, it is not wholly reliable but for the purposes of this report is an adequate indicator. In any event, the list inevitably includes people whose birth language is listed but whose command of English is sufficient for most everyday purposes and who are unlikely to require interpreting services in most circumstances.

Main Language	Population	%
All usual residents aged 3 and over	229,106	100%
English	218,645	95.4%
Lithuanian	980	0.428%
Polish	829	0.362%
Panjabi	595	0.260%
Bengali (with Sylheti and Chatgaya)	490	0.214%
Tagalog/Filipino	430	0.188%
Turkish	425	0.186%
Gujarati	419	0.183%
Urdu	411	0.179%
Romanian	401	0.175%
All other Chinese	346	0.151%

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French	334	0.146%
Tamil	269	0.117%
Portuguese	260	0.113%
Russian	242	0.106%
Albanian	234	0.102%
Yoruba	212	0.093%
Spanish	211	0.092%
Bulgarian	208	0.091%
Cantonese Chinese	208	0.091%
Arabic	174	0.076%
Shona	168	0.073%
Italian	166	0.072%
Malayalam	162	0.071%
Persian/Farsi	140	0.061%
German	129	0.056%
Akan	122	0.053%
Thai	118	0.052%
Latvian	101	0.044%
Greek	95	0.041%
Hungarian	94	0.041%
Hindi	88	0.038%
British sign language	85	0.037%
Sinhala	84	0.037%
Afrikaans	76	0.033%
Other Languages: All other languages	70	0.031%
Serbian/Croatian/Bosnian	67	0.029%
Igbo	67	0.029%

Patients'	use of Interpreter Services at GP
practices	in Havering - survey report

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Dutch	60	0.026%
Mandarin Chinese	60	0.026%
African language (all other)	58	0.025%
Slovak	55	0.024%
Czech	44	0.019%
South Asian Language (all other)	42	0.018%
Ukrainian	34	0.015%
Kurdish	33	0.014%
Japanese	33	0.014%
Nepalese	30	0.013%
Vietnamese	29	0.013%
Telugu	28	0.012%
Any other Nigerian language	28	0.012%
West African language (all other)	26	0.011%
Swedish	25	0.011%
East Asian Language (all other)	25	0.011%
Maltese	24	0.010%
Pashto	24	0.010%
Swahili/Kiswahili	24	0.010%
West/Central Asian Language (all other)	23	0.010%
Welsh	22	0.010%
Luganda	20	0.009%
Malay	19	0.008%
Sign Language: Any Sign Communication System (Not BSL)	31	0.013%
Marathi	18	0.008%
Lingala	17	0.007%
Somali	16	0.007%

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Other UK language: Total	14	0.006%
Finnish	14	0.006%
Danish	12	0.005%
Amharic	11	0.005%
Northern European Language (non EU)	10	0.004%
Estonian	8	0.003%
Romani language (any)	7	0.003%
Krio	6	0.003%
Any other European Language (EU)	5	0.002%
Tigrinya	5	0.002%
Korean	4	0.002%
Any other Eastern European Language (non EU)	3	0.001%
Hebrew	2	0.001%
Slovenian	1	0.000%
Caribbean Creole: Caribbean Creole (English-based)	1	0.000%

Source: ONS Census 2011



B. Languages for which an interpreter was required in surgeries⁵

The top ten languages for which interpreters were required in Havering surgeries were (in order of demand):

- 1. Romanian
- 2. British Sign Language
- 3. Arabic
- 4. Albanian
- 5. Turkish
- 6. Polish
- 7. Russian
- 8. Bengali
- 9. Portuguese
- 10. Other

C. Languages used by respondents to the survey

Not all respondents indicated the language that they regarded as their first, but of the 50 who did, the languages named were:

Language	Users
British Sign Language	21
Russian	4
Romanian	3
Polish	3
Arabic	2
Albanian	2
Bengali	2
Lithuanian	2
Turkish	1
Portuguese	1

⁵ As provided by the BHR CCGs in the brief for this survey

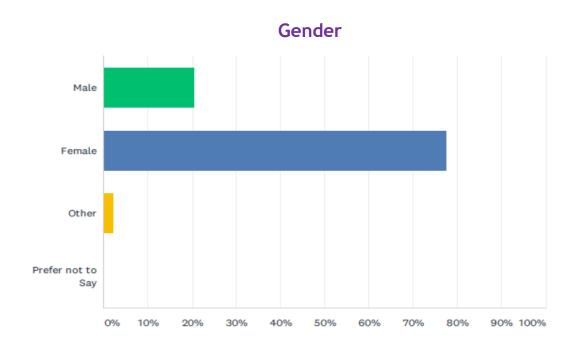


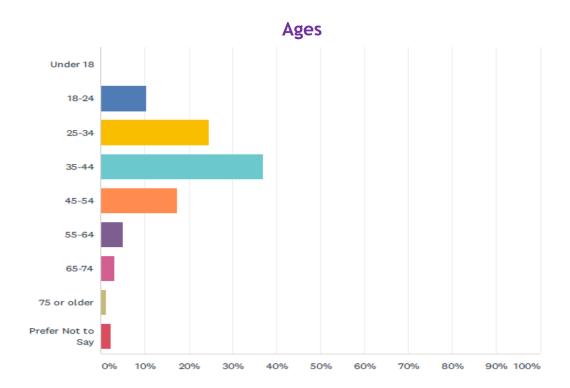
Moldovan	1
Bulgarian	1
Czech	1
Ukrainian	1
Other	5



Appendix 3

Demographics of survey respondents





No

10%

20%

30%

40%

50%

60%

70%

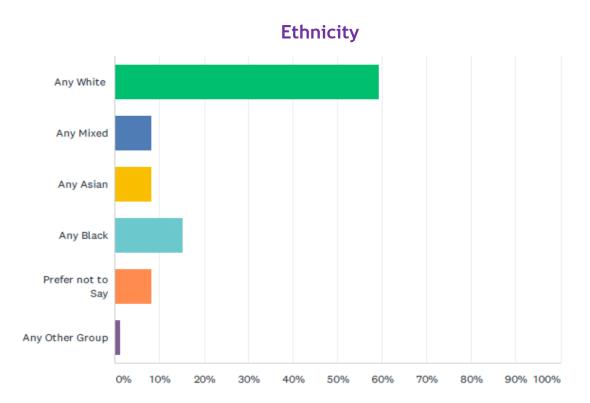
80%

90% 100%

Another Issue









Participation in Healthwatch Havering

Local people who have time to spare are welcome to join us as volunteers. We need both people who work in health or social care services, and those who are simply interested in getting the best possible health and social care services for the people of Havering.

Our aim is to develop wide, comprehensive and inclusive involvement in Healthwatch Havering, to allow every individual and organisation of the Havering Community to have a role and a voice at a level they feel appropriate to their personal circumstances.

We are looking for:

Members

This is the key working role. For some, this role will provide an opportunity to help improve an area of health and social care where they, their families or friends have experienced problems or difficulties. Very often a life experience has encouraged people to think about giving something back to the local community or simply personal circumstances now allow individuals to have time to develop themselves. This role will enable people to extend their networks, and can help prepare for college, university or a change in the working life. There is no need for any prior experience in health or social care for this role.

The role provides the face to face contact with the community, listening, helping, signposting, providing advice. It also is part of ensuring the most isolated people within our community have a voice.

Some Members may wish to become Specialists, developing and using expertise in a particular area of social care or health services.

Friends Network

Participation in the Healthwatch Havering Friends Network is open to every citizen and organisation that lives or operates within the London Borough of Havering. The Friends Network enables its members to be kept informed of developments in the health and social care system in Havering, to find out about Healthwatch activities and to participate in surveys and events

Interested? Want to know more?



Call us on 01708 303 300



email enquiries@healthwatchhavering.co.uk



Find us on Twitter at @HWHavering

To join the Healthwatch Havering Friends Network, click here or contact us as above





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