

Protocol Name	Accessible Information	Protocol Ref	PR0167
Clinical Area	Patient Services	Version No	1
Author(s)	Karen Taylor	Creation Date	16/05/2016
QoF Domain/Indicator		Review Date	01/11/2019

Protocol Aims

To ensure the practice complies with the new NHS accessible information standard in full.

Responsible for Implementation	Sent to for Information
All staff	

Introduction

The Accessible Information Standard aims to ensure that disabled people have access to information they can understand and the communication support they may need. The Standard applies to service providers across the NHS and adult social care system. As organisations that provide NHS services, GP practices are required by law to follow the Standard under Section 250 of the Health and Social Care Act.

Key requirements

There are five key requirements of the Standard:

1. Ask patients and carers if they have any information or communication needs, and find out how to meet their needs;
2. Record those needs in a set way;
3. Highlight a patient's file, so it is clear that they have information or communication needs, and clearly explain how those needs should be met;
4. Share information about a person's needs with other NHS and adult social care providers, when they have consent or permission to do so;
5. Make sure that people get information in an accessible way and communication support if they need it.

Identifying information and communication needs

- The Practice will ask patients and their carers if they have any communication/information needs relating to a disability, impairment or sensory loss, and if so, what they are;
- New patients will be asked at the point of registration or soon thereafter (e.g. on the registration form, new patient check template, over the phone, face-to-face);
- Existing patients can be asked opportunistically (e.g. when making an appointment, with repeat prescriptions, newsletters, posters, email, text messages);
- **There is no requirement for a retrospective trawl of all records to identify these patients;**
- Patients should be asked to self-define their communication/information needs and it is these needs (and not the disability) which should be recorded.

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Recording information and communication needs

- The Practices will record any identified needs within the patient record using the relevant read codes. Coded information can be supported by free text where necessary. A template has been created to support the recording of read codes
- This information should be made available to patients where they choose to access their record online.

Highlighting a patients information and communication needs

- Any communication and information needs identified must be made 'highly visible', such that they are seen and acted upon;
- For electronic records, this will be in the form of a reminder

Sharing information about a person's needs

- The Practice will ensure that information on a patient or carer's information/communication needs is included as a routine part of referral, discharge or handover;
- Information will be included within any local shared electronic records.

Making sure people get information in an accessible way and communication support if they need it

- The Practice will provide one or more contact methods which are accessible to the patient. The method must allow the individual to contact the practice, and staff must use this method to contact the individual. Methods include email, text message, telephone and letter;
- Where information/communication needs are identified, information (e.g. correspondence) must be provided in one or more accessible formats (e.g. non-standard print). Alternative formats can be provided either through auto-generated systems, or through prompting staff to make alternative arrangements. The adjustments made should be reasonable – but this does not mean that the patient must always receive information in their preferred format. What is important is that they can access and understand the information ;
- Where needed, appropriate professional communication support must be arranged by the practice to enable patients and carers to effectively receive NHS care;
- Interpreters and other communication professionals (e.g. British Sign Language (BSL) interpreters and deafblind manual interpreters) must have appropriate qualifications, Disclosure and Barring Service clearance, and be signed up to the relevant professional code of conduct;

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- Appropriately qualified practice staff who are registered as communication professionals may also provide professional communication support, in certain circumstances and where there is patient consent (which should be recorded);
- A patient's family member, friend or carer may also provide necessary support in certain circumstances and where this is the patient's explicit preference (which should be recorded);
- **The practice will refer to the NHS England guidance for further information on the use of practice staff, family members, friends and carers for communication support, including safeguarding and consent;**
- Patients or carers themselves must not be asked to meet the costs of any information or communication needs.

Exclusions

There are a number of exclusions to the scope of the Standard, as listed in section 5.6 of the NHS England specification. These include the provision of information in foreign languages, the design of signage, corporate communications and the accessibility of websites.