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Accessible Information Standard Policy for GP practices

Date of policy: 28th October 2021   To be reviewed by : October 2024

Contents

Context

Druid Group supports equality of access for all, including in line with commitments set out in the [Equality Act 2010](#) [and the [NHS Constitution](#) / [Care Act](#) [2014](#)].

We are committed to complying with the Accessible Information Standard ([DCBI1605 Accessible Information](#)), and this policy sets out how we will ensure that we do so.

The Accessible Information Standard ('the Standard') sets out a series of requirements for organisations that provide NHS services and / or publicly-funded adult social care or health services, for commissioners of such services, and for IT suppliers. These 'applicable organisations' have a legal obligation to comply with the Standard, as set out in [section 250 of the Health and Social Care Act 2012](#).

As a provider of NHS services, the Standard requires Druid Group to identify, record, flag and share and meet the information and communication needs of people with a disability, impairment or sensory loss. These 'five steps' must be routinely and consistently followed.

This policy describes the actions that Druid Group Partners, Druid Group employees and those acting on behalf of Druid Group are expected to take in order to ensure that Druid Group complies with the Standard.

Scope of this policy

Overview

This policy sets out how Druid Group complies with the Accessible Information Standard ('the Standard'), including actions to be taken, and relevant roles and responsibilities.

The policy applies to all partners of Druid Group, to all staff / employees of Druid Group (including permanent, temporary, agency and locum staff) and to those acting on behalf of Druid Group.

Provision of NHS services

The Standard, and this Policy, is applicable to Druid Group as a provider of NHS services. Whenever Druid Group is acting as a provider of NHS services, as defined by [section 250 of the Health and Social Care Act 2012](#) [(and the [NHS Act](#) [2006](#) as amended)], we must comply with the Accessible Information Standard in full. [This includes all services provided to patients as part of our General Medical Services (GMS) contract]. The Standard, and therefore this policy, does not apply to privately-funded services.

All Druid Group staff will routinely follow the 'five steps' of the Standard (identify, record, flag, share, meet) – as relevant to their own specific roles – in all of their interactions with users of our services.

In line with the Standard, these actions will ensure that our patients / service users (and their parents and carers as appropriate) will:

- Be able to make contact with, and be contacted by, services in accessible ways.
- Receive correspondence and information in accessible formats, including alternatives to 'standard' printed formats.
- Be supported by a communication professional at their appointments if this is needed to enable effective, accurate two-way discussion.
- Receive support from staff to communicate effectively.

Delegated authority

Where Druid Group has delegated authority to another organisation, Druid Group retains responsibility for ensuring compliance with the Standard.

Roles and responsibilities

a. Business Manager

The Business Manager is responsible for ensuring Druid Group's overall compliance with the Accessible Information Standard, and therefore with this policy.

Specific actions to be taken or assured by the Business Manager in ensuring Druid Group's compliance with the Standard will include:

- [Maintaining, reviewing and updating this policy [every 3 years], ensuring that it is disseminated to all staff and also publicly available [locations; electronically on the practice shared drive, policies and procedures protocol folder. Paper copy in the policies and procedures folder].
- [Ensuring that Druid Group has an accessible complaints policy].
- [Ensuring that relevant and appropriate systems, processes and policies are in place to enable Druid Group to effectively meet the requirements of the Standard].
- [Identifying [and flagging / proactively contacting] existing patients who are known or likely (based on existing records / staff knowledge) to have information and / or communication needs. [An example letter is included at appendix a].
- [Identifying sufficient funding for providing accessible information and communication support to individuals with a disability, impairment or sensory loss].
- [Ensuring that staff receive appropriate training to enable them to follow this policy and comply with the Standard].
- [Ensuring that an electronic library of documents, information and service user forms / letters in accessible formats is maintained].
- [Ensuring that all correspondence and patient-facing information complies with the 'accessible information' guidelines at appendix d and includes the 'accessible information statement' at appendix c].

- [Communication about steps taken by Druid Group to comply with the Standard, and encouraging patients to inform staff of their information / communication needs via the GP practice, posters displayed in the waiting room].
- [Ensuring that feedback from individuals with information and communication needs relating to a disability, impairment or sensory loss is actively sought, and, when received, is used to make improvements].
- [Reporting on compliance with the policy to partners on a quarterly basis].

The Business Manager may delegate these responsibilities, as appropriate.

b. Reception / Deputy Business Manager(s)

All reception and administrative staff are responsible for routinely and consistently identifying, recording, flagging, sharing and meeting the information and communication needs of individuals with a disability, impairment or sensory loss, as outlined in section 3.c.

In addition the Reception / Deputy Business Manager(s) must ensure that the 'five steps' of the Standard are followed. In so doing they must ensure that:

- There is a clear procedure to be followed by all staff.

- Relevant staff have received any necessary training to enable them to effectively follow the procedure / the 'five steps' of the Standard.

- Patient / service user record systems, including electronic / paper records enable the effective recording and flagging of needs.

- Electronic systems prompt staff to ask individuals about their information and communication needs and prompt for review of needs on an annual basis.

- Recorded needs are 'highly visible' and prompt staff to take action, for example electronic systems are formatted to automatically display a banner, flag, alert or 'pop-up window', and paper records are colour-coded or highlighted.

- Needs are recorded in line with the READv2 / SNOMED codes set out in the subsets of the Standard.

- One or more 'standard questions' has been agreed, which all staff ask all new patients / service users and appropriate existing patients / service users .

- Conversations with individuals about their information / communication needs can take place privately, including making available a private room for face-to-face conversations as appropriate.

- [The hearing loop system is operational, appropriately signed, and switched on whenever the practice / service is open].

- Registration forms, telephone 'scripts' and similar documents / prompts include a specific question or questions regarding information / communication needs.

- Arrangements have been made to gain and record consent to share individuals' information / communication needs with others involved in their health and care, as appropriate.

- A procedure is in place to communicate with individuals via email and / or text message, with their explicit consent.

- All correspondence and relevant documents include the 'accessible information statement' (see appendix c).

- Staff are able to promptly arrange professional communication support where needed by patients / service users, for example British Sign Language (BSL) interpretation, and alternative formats of documents or correspondence (for example braille).

- Systems are put in place to ensure that an individual is not contacted in a way that they cannot access, including ensuring any necessary by-passing of auto-generation systems.

- A longer appointment time is made available for individuals with information and / or communication needs, as needed.

- Steps are taken to maximise the accessibility of 'standard' documents and correspondence, as outlined in appendix d.

Reception staff

Reception staff, and any other staff at any time covering reception, are responsible for following the 'five steps' of the Standard, as follows:

- **Ask**: identify if an individual has any communication / information needs relating to a disability or sensory loss and if so what they are. Specifically, we will meet this step by including a standard question on registration forms and including a 'prompt' question as part of telephone scripts.

- **Record**: record those needs in a clear, unambiguous and standardised way in electronic and / or paper based record / administrative systems / documents. Specifically, we will meet this step by using READv2 / SNOMED CT codes and SystmOne.

- **Flag**: ensure that recorded needs are "highly visible" whenever the individual's record is accessed and prompt for action. Specifically, we will meet this step by the use of electronic alerts.

- **Share**: include information about individuals' information / communication needs as part of existing data sharing processes (and in line with existing information governance frameworks, and the [Data Protection Act 1998](#)). Specifically, we will meet this step by including data in Summary Care Records, NHS e-referral service communications, and as part of local information-sharing protocols or shared records.

- **Act**: take steps to ensure that individuals receive information which they can access and understand, and receive communication support if they need it. Specifically, we will meet this step by making available hearing loop systems, providing a range of ways for people to contact / communicate with the practice / service including email and text message, arranging professional communication support as needed to enable effective conversation, maintaining a contract with a provider of alternative formats, identifying and ring-fencing a budget for provision of alternative formats and communication support.

Doctors, practice nurses and other clinical staff
Whilst responsibility for many of the actions associated with compliance with the Standard lies with administrative staff, it remains important for all Druid Group staff, including medical and clinical staff, and partners, to comply with the Standard. Specific actions to be taken by GPs, practice nurses and other clinical staff include:

- Taking appropriate action(s) when a patient's record is 'flagged' to indicate that they have information and / or communication needs, including adopting appropriate techniques to support effective communication.
- Including identification and review of patients' / carers' information / communication needs as part of health checks, and similar assessments, and updating records / requesting updating of records as appropriate.
- When contacting patients directly, ensuring contact is made using an accessible communication method, as recorded.
- When sending correspondence or providing information to patients directly, ensuring that correspondence is sent / information is provided in an accessible format.
- Updating, or requesting the updating, of patients' records, whenever inaccuracy or additional information about their information and / or communication needs is identified / becomes apparent.
- Working effectively with, and appropriately involving, communication professionals, as needed to support effective conversation with a patient.
- Supporting patients with information / communication needs to consider consenting for 'additional information' to be included in their Summary Care Record, such that details about their information / communication needs as recorded by Druid Group are visible to other appropriate health care staff, and taking appropriate action based on their decision.

- Including information about patients' information / communication needs as part of referral correspondence, including when using the NHS e-referral service.

All staff

All partners and staff / employees of Druid Group and those acting for or on behalf of Druid Group are responsible for making themselves aware of and following this policy, and any other relevant processes to ensure that the requirements of the Accessible Information Standard are met. In addition, staff should familiarise themselves with the 'top tips' for accessible information and clear face-to-face communication at appendix d.

Governance

The Partners will receive quarterly summary reports, and an annual report, on compliance with this policy – and the Accessible Information Standard. Reports will include: the number and percentage of registered patients / service users asked about their information / communication needs; the number and percentage of registered patients / service users with relevant information / communication needs recorded, and an overview of types of needs; provision of correspondence and information in alternative formats; arrangement of support from communication professionals; feedback from patients / service users with information / communication needs.

In addition, Druid Group will note any incidents of non-compliance with the Standard – and any relevant complaints – for example when patients' / service users' needs are not appropriately identified, recorded, flagged, shared or met, for investigation and to ensure learning to prevent reoccurrence. Such incidents will be discussed at the weekly all staff meeting, and included in quarterly reports to partners as appropriate.

Communication

This policy is publicly available on the Druid Group website https://www.druidgroup.co.uk/ . Hard copies are also available on request from the on Teamnet.

This policy has been disseminated to staff via internal email communications, and is available on the Druid Group shared drive and Teamnet. For new staff, the availability and importance of this policy will be highlighted as part of induction.

Advice and Training

If any advice is required in relation to this policy please contact the Business Manager.

All Druid Group partners and staff are encouraged to complete the two NHS England e-learning modules supporting compliance with the Standard: The

[Accessible Information Standard: Introduction](#) and [The Accessible Information Standard: Towards Excellence](#).

Appendix A – Sample identification letter to patients / service users

<div align="right">

[Insert GP Practice / organisation name / logo]

Address

Address

Address

Address

</div>

Date

Dear XX

At Druid Group we want to make sure that we give you information in a way that you can understand, and that you find it easy to communicate with us.

If you find it difficult to read or understand information that we send you or if you need us to provide support so that you can communicate well at your appointments, please let us know.

Next time you contact or visit Druid Group, please discuss your needs with us. Alternatively, you can tear off the bottom of this letter and send us details of your needs in the envelope provided.

Thank you.

Yours sincerely,

Business Manager
On behalf of Druid Group

...............……**Please complete the below, tear off and return to us**…………………..

<div align="right">

[Insert GP Practice / organisation name / logo]

</div>

My name is…………………………………..

Please update your records:
I communicate using (e.g. BSL, deafblind manual): ………………………………….................

To help me communicate I use (e.g. a talking mat, hearing aids): …………………………..

…………………………………………………………………………………………………..... I

need information in (e.g. braille, easy read): ………………………………………………….... If

you need to contact me the best way is (e.g. email, telephone): …………………………..

Appendix B – Table of alternative formats and communication professionals

[The table below outlines some of the most common types of alternative formats and professional communication support which may be needed by people with a disability, impairment or sensory loss. There is further information in the Glossary in the Implementation Guidance v1.1 and Sense share information on Total Communication. Practices are advised to revise this table to include details of their own local arrangements and suppliers].

Format / type	Description	Patient Group	Availability	Cost
Audio	Information recorded from speech or synthetic (computer-generated) speech onto cassette tape, CD (compact disc) or as an electronic file such as an MP3.	Information in an audio format is needed by some people who are blind, deafblind or have visual loss. It can also be an accessible format for some people with a learning disability.	Audio formats available from [insert].	Approximate cost for a 600 word document is £8-£10.
Braille	A tactile reading format. Readers use their fingers to 'read' or identify raised dots representing letters and numbers.	Braille is used by some people who are blind, deafblind or have visual loss. It is estimated that between 4-5% of registered blind people in the UK read braille.	Braille embosser available at [insert] / braille document transcription available from [insert].	Approximate cost for a 600 word document is £8-£10.
Easy Read	Written information in an 'easy read' format in which straightforward words and phrases are used supported by pictures, diagrams, symbols and / or photographs to	'Easy read' information is primarily aimed to support people with a learning disability; however, it can also support people with other needs.	Easy Read document production available from [insert]. Templates and documents also available on [insert intranet	Approximate cost for a 600 word document (coproduced with people with a learning disability) is £1,050.

	aid understanding and to illustrate the text.		links].	
Large print documents	Printed information enlarged or otherwise reformatted to be provided in a larger font size. Accessible font (or point) sizes range from point 14 up to point 28, and individuals should be asked to specify.	Large print documents are needed by a range of different people, including some people with visual loss and / or who have a learning disability, and people with communication needs following a stroke.	Easily created in house.	Free of charge.
British Sign Language (BSL)	BSL is a visual-gestural language; it has its own grammar and principles, which differ from English.	BSL is the first or preferred language of some d/Deaf people and some deafblind people.	Support from BSL interpreter may be arranged from [insert]. A qualified, registered BSL interpreter may be found via the National Registers of Communication Professionals working with Deaf and Deafblind People (NRCPD) website.	Approximate costs for face-to-face BSL £40-60 per hour (minimum three hours plus travel expenses).
BSL video remote interpreting	An online service in which a BSL interpreter	BSL video remote interpreting may be appropriate /	The service is set up with a	Approximate cost of remote BSL

(also known as video interpreting, remote interpreting or virtual interpreting)	interprets via video software. It enables a direct connection to an interpreter so that the d/Deaf person can sign to them what they want to say. The interpreter then speaks this to the hearing person (via video link) and signs back their (spoken) reply.	accessible for communicating with some BSL users (as above), especially in an emergency or urgent situation.	subscription fee and call charges apply per minute during use. [Insert details of any GP Practice contract].	interpretation is £2.50 – £3.90 per minute (as part of an agreed contract).
Note taker	In the context of accessible information, a notetaker produces a set of notes for people who are able to read English but need communication support, for example because they are d/Deaf.	A notetaker may be needed by someone who is d/Deaf or someone who has hearing loss.	Support from a professional notetaker may be arranged from [insert]. A qualified, registered notetaker may be found via the NRCPD website.	Approximate cost is £20 – 30 per hour plus travel expenses
Speech to text reporter (STTR)	A STTR types a verbatim (word for word) account of what is being said and the information appears on screen in real time for users to read. A transcript may be available and typed text can also be	An STTR may be needed by a person who is d/Deaf or has hearing loss. Alternatively, an STTR may support someone with visual loss (who is using screen-reader or other communication	Support from an STTR may be arranged from [insert]. A qualified, registered STTR may be found via the NRCPD website.	Approximate costs are similar to those for BSL interpreters.

	presented in alternative formats.	device).		
Lipspeaker	A person who repeats the words said without using their voice, so others can read their lips easily.	A lipspeaker may be used to support someone who is d/Deaf or has hearing loss to communicate.	Support from a professional lipspeaker may be arranged from [insert]. A qualified, registered lipspeaker may be found via the [NRCPD website]().	Approximate cost is £30 – 40 per hour

Appendix C – Standard wording to be inserted into all correspondence.
"If you need help communicating with us or us communicating with you, please let us know. You can call us on 01422 374662."

Appendix D – Clear face-to-face communication and accessible information
Tips for clear face-to-face communication

- Make sure you have the person's attention before trying to communicate with them. If they do not hear you, try waving or tapping them lightly on the shoulder.

- Identify yourself clearly. Say who you are and what you do – it may be more relevant to explain your reason for seeing the person rather than your job title.

- Check that you are in the best position to communicate, usually this will be facing the person, but consider whether seated or standing is more appropriate. Communication at eye level is usually easiest so if you are speaking to a wheelchair user consider sitting down if possible.

- Find a suitable place to talk, with good lighting and away from noise and distractions.

- Speak clearly and a little slower than you would do usually, but do not shout.

- Keep your face and lips visible – do not cover your mouth with a hand, your hair or clothing. If a member of staff is concerned about religious expression they should discuss this with their manager.

- Use gestures and facial expressions to support what you are saying.

- If necessary, repeat phrases, re-phrase the sentence or use simpler words or phrases.

- Use plain, direct language and avoid using figures of speech such as 'it's raining cats and dogs' or euphemisms such as 'expecting the patter of tiny feet'.

- Check if the person has understood what you are saying. Look for visual clues as well as asking if they have understood.

- Encourage people to ask questions or request further information. Ask if they would like anything in writing as a reminder or reference.

- Try different ways of getting your point across. For example writing things down, drawing or using symbols or objects to support your point.

Tips for accessible printed communication

- Use a minimum font size of 12 point, preferably 14 (which is readable by a significantly greater number of people).

- Use a clear, uncluttered and sans serif font such as Arial.

- Align text to the left margin and avoid 'justifying' text.

- Ensure plenty of 'white space' on documents, especially between sections. Avoid 'squashing' text onto a page and, if possible, include a double-space between paragraphs

- Print on matt and not gloss paper.

- Use page numbers.

- If printing double-sided ensure that the paper is of sufficient thickness to avoid text showing through from the other side.

- Correctly format Word documents and PDFs using styles and accessibility functions / checks. Ensure a correct and consistent heading structure, and that the cursor can move throughout all text.

- Use descriptions ('alt. text') to explain diagrams or photographs.

- Consider making all 'standard' printed letters / documents 'easier to read' – using plain English, highlighting important information, and supporting text with diagrams, images or photographs.

- Keep track of the electronic originals of documents you print out so you can re-print in larger font or convert to an alternative format when required.