

## Accessible Information Standard

The Accessible Information Standard (AIS) is a new standard that comes into force in July 2016. It aims to ensure that disabled patients and service users receive information in formats that they can understand and have appropriate support to help them to communicate. All NHS and publicly-funded adult social care services must follow AIS by law, under section 250 of the Health and Social Care Act 2012. The AIS also aims to begin to address the current disparity in the care received by disabled people by making sure that information is provided to all service users and patients in a way they can understand.

As an example, Action on Hearing Loss states that when visiting the GP more than a quarter of people with a hearing loss did not understand their diagnosis and over two thirds of people who asked for a British Sign Language interpreter did not get one. Similar experiences have been captured locally through Healthwatch projects in Bath and North East Somerset, Bristol, South Gloucestershire and Somerset. The Standard will apply to people that have a disability, impairment or sensory loss, and to their carers or parents. This will include making sure that people can get information in the format they need, for example large print, braille, audio, easy read British Sign Language interpreter, deafblind manual interpreter or an advocate. It will also ensure that people can get the support they require in order to be able to communicate, for example, the use of picture cards as prompts during a conversation which would enable effective and accurate dialogue between a health professional and service user to take place.

AIS does not cover those who need information translated because English is not their first language, or other aspects of accessibility in care such as signage or hospital transport.

The AIS applies to a wide range of NHS and publicly-funded adult social care organisations and services including NHS Trusts, Foundation Trusts, GP practices, pharmacies, care homes, nursing homes and day care. Commissioners of these services do not have to follow the Standard, but they must ensure that the service providers that they commission are adhering to it. Implementation of, and adherence to, the AIS will also be included in Care Quality Commission inspections.

## Timeline

From 1 September 2015, all relevant organisations will have been preparing for implementation of the AIS, including assessing their current electronic systems; reviewing policies, procedures and processes; looking at staff training and continuous professional development; and developing a local AIS implementation plan.

By 1 April 2016 all relevant organisations must identify and record information and communication needs with patients and service users:

- at the first interaction or registration with their service
- as part of ongoing routine interaction with the service by existing service users.

AIS applies to all information that is needed for a person to access, understand and use health and social care services. This includes, for example, letters about screening appointments, leaflets about self-care or managing a long term condition, face-to-face interactions between health and social care staff and the patient/ service user/carer, information on websites that people are signposted to and emails. General websites are out of scope, unless the patient is referred to a website for information about their care.

By 31 July 2016 all relevant organisations must have fully implemented and conform to the AIS by law. In addition to being part of the Health and Social Care Act 2012, the AIS is also in line with the Equality Act 2010, the Care Act 2014, the NHS Constitution and the Equality Delivery System.

## Key actions

Five key things have been set out for members of staff in NHS and publicly-funded adult social care services to do to support implementation of the AIS. They must:

- **ask**: does the person have any information or communication needs, and find out how the person's needs can be met. The person should be involved in this process
- **record** the person's needs. Individuals' information and communication needs must be recorded in a set way
- **highlight** or flag up in a person's file that they have communication or information needs and how these needs are to be met
- **share** information about a person's needs with other NHS and adult social care providers. Consent must be obtained before information is shared
- **provide** patients, service users and their carers with information in an accessible way and communication support if they need it.

## How might we start implementing the Standard?

The following advice is taken from a briefing produced by the British Medical Association, which was provided with a view to supporting organisational leads to effectively implement the Standard:

- Think carefully about how to identify individuals with information and communication needs when they contact the service. Who will ask, when, and how? This is most likely to be the role of 'first point of contact' staff, for example receptionists. It can be helpful to agree on a 'standard question' which staff can feel comfortable asking patients and service users – the most appropriate question is likely to vary locally

## Accessible Information Standard

and depending on the nature of the patient and service user group – services are advised to consult with relevant patient groups if possible. A question about communication and information needs should be included on ‘new patient’ or patient registration forms (where used).

- Brief staff about the Standard preferably via a face-to-face session (particularly for those most directly involved in its implementation), and follow-up with email information about what it will entail. Include information about or signposting to local policies and procedures for arranging the production of information in alternative formats and communication support.
- Inform patients and service users about the AIS via posters or onscreen information in waiting or reception areas. Encourage patients and service users to inform staff of their communication needs.
- Noting that the AIS does not include environmental or facilities matters, certain aspects are very relevant to people with a disability, impairment or sensory loss, and can facilitate clear communication. Consider whether some rooms are ‘better’ than others for people with communication needs, for example less cluttered, better light, more soundproof. When assessing lighting, be aware that this can help or hinder a person trying to lip read – the aim is for good light but not blinding - and consider whether curtains or blinds can be drawn.
- Consider your workforce. What training have individuals and teams had previously around disability-awareness and/or communication? Consider if any individual staff are best placed to support people with particular or complex communication needs, for example

staff who have had any specific training. In addition, be aware that some patients and service users with communication needs may have particular difficulty communicating with some members of staff. For example, people who lip read may struggle (or can even be unable) to lip read a member of staff with a beard or large moustache. Individuals with communication needs may request to see a particular member of staff who they know they can understand more easily.

- Clarify the policy for arranging conversion of documents and consider having the one or two most commonly used documents converted in advance of any request.
- Can you access communication professionals, specifically a British Sign Language (BSL) interpreter, speech-to-text-reporter (STTR), deafblind manual interpreter or advocate? Clarify the policy and process for arranging and booking such a professional. Is remote BSL interpretation and/or STTR possible?
- Identify which communication formats can be used or produced ‘in house’. For example, email and text message as an alternative to telephone or printed information, and large print. Consider any practical steps that staff will need to take to use and access these methods if they are not currently part of ‘business as usual’.

Some of the steps taken to begin implementation of the standard include:

- amending registration forms so that they are more accessible and include a question or section about information and communication needs
- adding a statement prompting patients and service users to inform the service if they have any information or communication needs to letters and leaflets

## Accessible Information Standard

- displaying posters and information in different formats encouraging patients and service users to inform the service if they have any information or communication needs
- checking to see if there is an induction loop system available to support hearing aid users and, if so, checking that it works and that staff know how to use it
- engaging with service users to seek their support for implementing the Standard
- reviewing existing policy and practice around use of email and/or text message to communicate with patients; these can be quick, cheap and convenient ways of contacting lots of people who have hearing or visual loss.

### Local implementation of the AIS

There is a B&NES Health and Wellbeing Network meeting to discuss and share experiences of implementing the AIS on Thursday 21 April from 9.30 – 11.30am at Fry's Conference Centre, Keynsham. See the events page at [www.thecareforum.org](http://www.thecareforum.org)

Sirona care & health C.I.C provides community healthcare services in B&NES and South Gloucestershire. The provider is working with all of their IT software suppliers to ensure that staff are prompted at first appointments to ask patients about their communication needs and record this information accurately. They are working on procedures to ensure that all staff know the routes and sources to obtaining information in an accessible form where requested.

Sirona also plans to extend their responsibilities to include translation and interpretation services; working with some of the organisation's service areas and producing some advisory leaflets in other languages, apart from English.

NHS Somerset Clinical Commissioning Group (CCG) has secured a small grant from NHS England to support implementation of the AIS. With this funding the CCG is developing videos to be used in Somerset hospitals to train staff around the Standard. The CCG has included accessible information as part of their equality and engagement objectives, and has recently provided equality training to a couple of local GP practices during which they have made them aware of their obligations to fulfil the AIS. These are just a few examples of the preparation and innovation that service providers are carrying out across the west of England to support implementation of the AIS.

### Find out more

To find out more about the Accessible Information Standard, including the AIS specification, implementation guidelines and plan W: <http://bit.ly/1IfVRvV>

Audio, British Sign Language and Easy Read versions of the AIS information are also available for patients and service users

W: <http://bit.ly/1Tgb21a>

BMA guidance W: <http://bit.ly/1RQoTub>

**For this newsletter in other formats call 0117 9654444**