

The Waterloo Practice

Accessible Information Standard Policy

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1 Introduction

1.1 Policy statement

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The Accessible Information Standard (AIS) came into effect on the 1 August 2016. All organisations that provide NHS care and/or publicly-funded adult social care are legally required to follow the AIS.

The Standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of patients, service users, carers and parents with a disability, impairment or sensory loss.

Home nation requirements are as follows:

- [England](#)
- [Scotland](#)
- [Wales](#)
- [Northern Ireland](#)

Further reading and background information into the AIS can be found [here](#).

1.2 Status

This document and any procedures contained within it are non-contractual and may be modified or withdrawn at any time. For the avoidance of doubt, it does not form part of your contract of employment.

1.3 KLOE

In England, the Care Quality Commission would expect any primary care organisation to have a policy to support this process and this should be used as evidence of compliance against CQC Key Lines of Enquiry (KLOE)¹.

Specifically, The Waterloo Practice will need to answer the CQC Key Question on both 'Effective' and 'Responsive'.

The following is the CQC definition of Effective:

By effective, we mean that people's care, treatment and support achieves good outcomes, promotes a good quality of life and is based on the best available evidence.

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|--------------------|--|
| CQC KLOE E1 | Are people's needs assessed and care and treatment delivered in line with current legislation, standards and evidence-based guidance to achieve effective outcomes? |
| E1.1 | Are people's physical, mental health and social needs holistically assessed, and is their care, treatment and support delivered in line with legislation, standards and evidence-based guidance, including NICE and other expert professional bodies, to achieve effective outcomes? |

The following is the CQC definition of Responsive:

By responsive, we mean that services meet people's needs.

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|--------------------|---|
| CQC KLOE R1 | How do people receive personalised care that is responsive to their needs? |
| R1.4 | How does the service identify and meet the information and communication needs of people with a disability or sensory loss? How does it record, highlight and share this information with others when required and gain people's consent to do so? |
| CQC KLOE R2 | Do services take account of the particular needs and choices of different people? |
| R2.1 | How are services delivered, made accessible and coordinated to take account of the needs of different people, including those with protected characteristics under the Equality Act and those in vulnerable circumstances? |
| R2.4 | Are reasonable adjustments made so that people with a disability can access and use services on an equal basis to others? |

1.4 Training and support

The organisation will provide guidance and support to help those to whom it applies to understand their rights and responsibilities under this policy. Additional support will be provided to managers and supervisors to enable them to deal more effectively with matters arising from this policy.

2 Scope

2.1 Who it applies to

This document applies to all employees of the organisation and other individuals performing functions in relation to the organisation such as agency workers, locums and contractors.

2.2 Why and how it applies to them

The organisation aims to design and implement policies and procedures that meet the diverse needs of our service and workforce, ensuring that none are placed at a disadvantage over others, in accordance with the [Equality Act 2010](#). Consideration has been given to the impact this policy might have with regard to the individual protected characteristics of those to whom it applies.

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3 Definition of terms

3.1 Accessible Information Standard

The Accessible Information Standard is lawful under the Equality Act 2010 and aims to make sure that people with a disability or sensory loss are given information that they can understand and the communication support they need.

3.2 Care Quality Commission

The Care Quality Commission (CQC) is the independent regulator of health and adult social care in England. The CQC makes sure that health and social care services provide people with safe, effective, compassionate, high quality care and encourages care services to improve.

4 Meeting the Accessible Information Standard

4.1 Aim¹

The aim of the Standard is to establish a framework and set a clear direction such that patients and service users (and where appropriate carers and parents) who have information or communication needs relating to a disability, impairment or sensory loss receive:

- Accessible information (“information which is able to be read or received and understood by the individual or group for which it is intended”)
- Communication support (“support which is needed to enable effective, accurate dialogue between a professional and a service user to take place”)

This includes accessible information and communication support to enable individuals to:

- Make decisions about their health and wellbeing and about their care and treatment
- Self-manage conditions
- Access services appropriately and independently
- Make choices about treatments and procedures including the provision or withholding of consent

4.2 Application of the AIS

All providers of NHS care are required to meet the AIS. The Standard applies to all services users who have information or communication needs as a result of disability, impairment or sensory loss. This includes patients who are:

¹ [NHS\(E\) AIS V1.1](#)

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- Deaf
- Blind
- Deafblind
- Suffering from learning disabilities

The Standard can also be used to support people with:

- Autism
- Mental health conditions
- Aphasia

The AIS should involve parents and carers.

4.3 Five steps of the AIS

There are five steps which The Waterloo Practice must take to ensure that the AIS is met. Each step is shown below:²

1. Identify

How does the service assess for disability related information or communication needs? How does the service find out if people have any of these needs? How does the service plan how it will meet those needs?

2. Record

How does the service record those identified needs clearly? What systems are in place as part of the assessment and care planning process?

3. Flag

How does the service highlight or flag people's information and communication needs in their records?

It should be noted that ideally this should be within the electronic patient record with the flag opened whenever the record is accessed. The chosen method must make it possible for all staff to quickly and easily be aware of those needs.

4. Share

Services sometimes need to share details of people's information and communication needs with other health and social care services. This means that other services can also respond to the person's information and communication needs.

5. Meet

How does the service make sure that it meets people's needs? How does the service make sure that people receive information which they can access and understand? How does the service arrange communication support if people need it?

² [CQC AIS](#)

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4.4 Required actions to meet each step

1. Identification of needs

The organisation is consistent in its approach to the identification of patients, service users, carers and their information and communication needs pertaining to disabilities, impairments and sensory loss. Staff are trained to ask if the patient has any communication needs opportunistically, there is a page on The Waterloo Practice website with further information and an online form patients/carers can submit or they are invited to tell The Waterloo Practice of their communication needs in whichever way they feel most comfortable.

2. Recording of needs

The organisation ensures consistency when recording the needs of patients, service users and carers that relate to a disability, impairment or sensory loss. The Waterloo Practice ensures that all needs are recorded accurately and the correct, consistent clinical code³ is used and is visible to staff enabling them to appropriately engage with the patient, their carer or family member(s).

3. Flagging

The Waterloo Practice will make use of alerts on The Waterloo Practice clinical system, this includes a pop up information box when opening the patient record thereby indicating that an individual has an information or communication need enabling staff to take the appropriate actions and ensuring that the needs of the patient are met.

4. Sharing

The Waterloo Practice will ensure that data about patient information or communication needs is shared appropriately, in line with extant guidance and as part of the referral and handover process.

5. Meeting

The Waterloo Practice will take the necessary steps to ensure that patients with communication or information needs receive information in a format which is accessible to them and in a manner in which they understand.

4.5 How to meet the AIS

1. Identification

The Waterloo Practice ensures that the practice website contains clear signposting and appropriate downloadable documentation, or that this is available on request, for patients who have communication needs. This information will be replicated in the practice waiting room.

All staff will make appropriate arrangements for individuals to discuss their communication needs privately, should they wish to do so, whilst ensuring that sufficient information is ascertained and recorded accurately. This is not a

³ [SNOMED CT browser](#)

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retrospective requirement and could easily be embedded into the registration process for new patients as per [Section 4.6](#).

2. Recording and flagging

The Waterloo Practice will ensure that the necessary clinical coding of communication needs is added to the clinical records of patients upon registration. They will also ensure that the appropriate on-screen alert is operating and that it includes information regarding the preferred communication channel or what level of communication support is needed.

In relation to online access, staff will adhere to the Access to Online Services Policy which is available [here](#).

3. Sharing

Clinical members of staff are responsible for ensuring that, when a patient is referred to any other NHS or social care organisation, they are asked (at the time of consultation) for permission to share their communication needs with the other organisation.

All staff are to ensure they are aware of the applicable practice privacy notice for their region of [England](#), [Scotland](#), [Wales](#) or [Northern Ireland](#) and should, if necessary, refer patients to this notice.

Consent must be obtained and is to be clearly identifiable and separate from other comments entered into the healthcare record. For further information, refer to the practice [General Data Protection Regulation \(GDPR\) Policy](#) and the practice [Consent Policy](#).

4. Meeting patient needs

The Waterloo Practice will ensure that all correspondence affords patients the opportunity to have their individual information or communication needs met by including the following on said correspondence:

“If you would like this letter or information in an alternative format (for example, large print or easy read) or if you need help with communicating with us (for example, because you use British Sign Language), please let us know. You can visit our website’s accessible information page and complete the online form, call us on 01484 500977, write to us or come into the practice to speak to us.”

The practice will also ensure that the current contact details for access to properly qualified persons who are registered interpreters for deafblind persons or who use sign language and other assisted communication methods are available in reception.

The organisation will ensure that only persons who are registered interpreters, properly qualified, insured and DBS checked to Enhanced Disclosure level are used.

4.6 Registration

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The Waterloo Practice will ensure that as much information about patients' specific needs is captured during the registration process. Patients will be asked to complete the new patient application form.

5 Summary

The Waterloo Practice has a duty to ensure that the Accessible Information Standard is adhered to and must also demonstrate to the CQC how it is meeting the AIS. Effectively implementing the standard will lead to improved patient experience and outcomes whilst ensuring that patients receive safe, high quality care at all times.

[Annex A](#) gives examples of the tools and assistance available as well as further reading and links to training for organisation use.

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Annex A – Useful information and links

Listed are useful links to NHS England guidance on implementing the Accessible Information Standard (AIS).

This [link](#) provides the full list of factsheets and clarifying information. It also provides a further link to the comprehensive NHS E implementation guidance to support AIS. At The Waterloo Practice we are aware that it is our responsibility to implement and to fully adhere to the AIS.

Within this NHS E link, there are numerous factsheets that can support implementation of AIS and the full implementation guidance to support AIS can be found [here](#).

Further information:

1. Disabled people's experiences and advice for healthcare professionals:

- This [video](#) shows members of Manchester People First talking about what helps them to attend health appointments
- A film about enabling communication with local Deaf people for front-line medical staff can be found [here](#)

In this YouTube clip, Deaf people talk about the importance of front-line staff having some basic sign language skills. The School of Sign Language provides [free](#) introductory resources into understanding British Sign Language (BSL).

2. Alternative format and communication support providers:

- [AbilityNet](#)

Support to ensure websites, apps and other digital services are accessible and compliant with access legislation. AbilityNet also provides guidance to disabled IT users to optimise accessibility to computers and smart phones (My Computer, My Way).

- [BSL Health Access](#)

BSL Health Access was set up by Sign Health. It delivers immediate, on-demand non-emergency access to British Sign Language (BSL) interpreters for communication with Deaf people in health settings free of charge during the current COVID-19 situation.

- [CHANGE People](#)

A human rights organisation led by disabled people. They create bespoke accessible information in easy read and video formats for organisations and much of the content has a health focus.

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- [Hearing Link – Let's Hear Project](#)

Has volunteers, as members of community-based loop groups, who work as loop checkers, visiting public buildings and businesses in their local towns to audit loop availability and quality.

It should be noted, due to COVID-19 restrictions, this service is currently not available.

- Live Transcribe & Sound Notifications [App](#)

This is an app that makes everyday conversations and surrounding sounds more accessible among people who are deaf and hard of hearing, using just a phone.

- [National Registers of Communication Professionals working with Deaf and Deafblind People \(NRCPD\)](#)

NRCPD exists to protect the public by regulating communication and language professionals who work with deaf and deafblind people.

They hold a searchable register of interpreters for d/Deaf and deafblind people and also lipspeakers, notetakers, sign language interpreters, sign language translators and speech to text reporters.

- [Relay UK](#)

Relay UK supports d/Deaf people and people with speech impairments to communicate with anyone over the phone using an app based national relay service.

- [RNIB Business - Transcription Services](#)

RNIB's transcription team takes original copy and transforms it into accessible formats including braille, large and giant print and audio.

- [Breakthrough UK](#)

Breakthrough UK is a Manchester based disabled people's organisation led by disabled people who support other disabled people to work and live independently.

Breakthrough is able to provide training for staff arranged at practice, PCN or CCG level.

- [Inclusive language](#)

Gov.uk (Office for Disability Issues) provides guidance on words to use and avoid when discussing disability.