

# The Accessible Information Standard: Making it happen

Lessons from a pilot

making a difference community  
understanding specialist local  
together

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# Providing information is same as any other health intervention.

service enthusiastic hope making a difference choice understanding  
respect community trust together quality understanding dedication hope enthusiastic specialis  
decision trust information independence personal community people together help care understanding specialist dedication care local  
service local dependable help equality care choice independence respect community trust toge  
together quality understanding dedication hope enthusiastic specialist compassion safe health service local dependable he

# Identifying needs:

- Identifying patients / service users who have information and / or communication needs. Could include: language; cognitive; reasoning; sensory; literacy; physical access needs.
- Detail of what those needs are. This could include testing results, feedback from previous work and assessment of the role of different staff members.
- Profile - Are we working to someone's strengths?

# Flagging / recording / sharing

- Alert on notes
- Shared across all health agencies primary care, community and acute
- Need to be able to amend/update to reflect evolving understanding and changing needs

# Meeting the needs

## Access to mechanisms for meeting the needs:

- 1:1 interaction just as important as other 'information'
- General provision versus Individualised provision – can't be 'one size fits all'

# Meeting the needs – Information pathway

- Gives structure to ideas – frame of reference – shows a gold standard of what can be expected
- Enables detail at different levels of implementation: –
  - what baseline information is needed,
  - how,
  - share variety of possible resources
- Ensures consistency across organisation
- Enables audit

# Accessibility Passport

## Recording needs in a systematic way

- **Alert** – encourages activation
- **Simple** – Limited content of key details e.g. how, what, when for each person. Can be used in a busy environment.....
- **Relevant** – specific to each patient =- base don screen/feedback
- **‘Other’** – reference to:
  - key individuals who can also support patient –ie agencies/voluntary
  - contact details for signing agencies to support interaction
  - other IT solutions – web sites / skype / Daisy or low- tech - Braille.
- **Review** – details can be amended and updated
- **History** – reference to previous information targets per topic – with dates and medium used.
- **Shared** locally and with partnership organisations – move with patient as required – based on information from variety of sources

# What needs to happen

- Trust working group and working in partnership
- Assessing local situation to prioritise needs
- Resources - Do we share materials?
- Agreeing how Trust as a whole will meet the specifications set out in Accessible Information Standard



# Where next?

- How do we identify trends in patient needs to support provision
- How do we consult with people for future planning - group versus individual
- How do we work with other organisations to share information reliably and reduce individual workloads

# Take home points

**Providing information is same as any other health intervention.**

It requires:

- Planned approach with standards
- Screening or assessment phase
- Implementation phase – personal targets for intervention? – plan – who, what, when , how – patient and/or others?
- Review of success – targets?