**Template Report for Governing Body / Board**

# January 2016

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| **Details** | Part 1 | **X** | Part 2 | | |  | Agenda Item No. | | |  | |
| Title of Paper: | Implementing The Accessible Information Standard | | | | | | | | | | |
| Board Member: |  | | | | | | | | | | |
| Author: |  | | | | | | | | | | |
| Presenter: |  | | | | | | | | | | |
| Please indicate: | For Decision | | |  | For Information | | |  | For Discussion | |  |

**Executive Summary**

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| **Summary** | Chief Officer reporting on current issues. | | | | | |
| **Risk** | **High** |  | **Medium** |  | **Low** |  |
| Please indicate **above** the overall level of risk associated with the paper then state here what the risks are and how this paper aims to address them. If the above summary itself is around managing risk etc. state “Included in Summary”. **NB** Risks can include failure to act and lost opportunities. | | | | | |
| **Recommendations** | The Board is asked to:  Note the contents of the report. | | | | | |

**Strategic themes**

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| --- | --- | --- | --- |
| Deliver improvement in outcomes for patients | | |  |
| Deliver service improvement through system redesign in priority areas | | |  |
| Develop organisational capability as *commissioners / service providers* | | |  |
| Deliver through the Health and Wellbeing Board improved population health and reduction in inequalities | | |  |
| *Deliver the CCG element of QUIPP through effective system management and working with partners and stakeholders and ensuring a culture with focus on quality, fostering innovation, improving health outcomes and reducing inequalities.* | | |  |
| Equality Impact Assessed? |  | Supports *organisational* Governance arrangements |  |

**Accessible Information Standard**

1. **Introduction**
   1. With partners, NHS England developed a new ‘Accessible Information Standard’ (SCCI1605 Accessible Information), which was approved in June 2015 and published on 3rd July 2015. The Standard provides direction to the health and care system on accessible informationand communication support for patients, service users, carers and parents with a disability, impairment or sensory loss.
   2. The Equality Act 2010 places a **legal duty** on all service providers to make “reasonable adjustments” to support disabled people, including providing information in “an accessible format”. Service users with communication needs often receive inaccessible information and are not provided with the communication support they need. This has implications for patient choice, safety, and experience.

1.3 **Compliance is mandatory for all organisations that provide NHS funded or adult social care.**

1.4 The Standard required all relevant organisations to produce a plan for implementation by **1 September 2015**. By **1 April 2016** those organisations must identify and record information and communication needs with service users and full implementation required by **31 July 2016** .

**2. Aim of the Standard**

2.1 The Standard establishes a framework and sets a clear direction such that patients and service users who have information or communication needs relating to a disability, impairment or sensory loss receive ‘Accessible information’ and ‘Communication support’ so that they can access services appropriately and independently, and make decisions about their health, wellbeing, care and treatment.

2.2 As a result of the Standard, patients, service users, carers and parents should:

* 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 forms
* Be supported by a communication professional at their appointments if this is needed to enable effective, accurate two-way discussion
* Receive support from health and care staff and organisations to support effective communication.

1. **Implementation and Process**

3.1 Effective implementation will require such organisations to make changes to:

* + Policy
  + Procedure
  + Human behaviour
  + Electronic systems

3.2The Standard sets out a consistent approach to **Identify, Record, Flag, Share** and **Meet** thecommunication needs of service users by carrying out five basic steps:

* **Ask:** identify / find out if an individual has any communication / information needs (relating to a disability or sensory loss) and if so, what they are.
* **Record**: record those needs in a clear, unambiguous and standardised way in electronic and / or paper based record / administrative systems / documents.
* **Alert / flag / highlight**: ensure that recorded needs are ‘highly visible’ whenever the individuals’ record is accessed, and prompt for action.
* **Share**: include information about individuals’ information / communication needs as part of existing data sharing processes (and following existing information governance frameworks).
* **Act**: take steps to ensure that individuals receive information which they can access and understand, and receive communication support if they need it.

1. **Risks of Non-Compliance**

4.1 Whilst there are no plans for NHS England to conduct an audit of the implementation of the Standard in individual organisations, the Care Quality Commission and local Healthwatch organisations will be monitoring progress. There are clearly identifiable risks associated with failure to implement the Standard, most notably the financial and reputational risks arising from potential legal challenge from service users, support groups and charities.

1. **Benefits**
   1. Successful implementation of the Standard will realise a range of benefits to service users and service providers. Service users will:

* have access to the information they need in a format they understand from the services who support them
* be able to make decisions and choices about their own health
* have informed consent to treatment or therapeutic interventions
* be able to work in partnership with health care professionals

Staff will:

* + know what the patient needs and are able to provide it e.g. by integrating into existing shared IT systems
* have easy access to wide range of resources that can be shared across services and professions
* know who and where to go to for help e.g. contact details of interpreters for signing

1. **Lessons learned**

6.1 There have been several pilot sites across a range of organisations in both health and social care settings which have identified some useful tips to help colleagues with implementation. These include:

* Provide access to a specific budget to produce accessible documents and resources
* Use and develop existing systems that people already use
* Explain to staff how it can help them assess and manage patients with additional communication needs
* Ensure the solutions are in place before you roll out the assessment
* Identify an executive director to lead implementation and push to secure resources and a non-executive director / elected member to monitor progress
* Ensure good back up from IT colleagues and software suppliers to change / adapt current systems
* Consult with the full range of teams and work environments to consider how the Standard will apply and tailor flexible arrangements
* Develop training / awareness raising for both staff and external stakeholders
* Consider how compliance will be audited / quality assured
* Be realistic – what can be managed now and how can it be built on
* Make all general information leaflets accessible for everyone and ensure there is a process of approving, storing and reviewing patient information leaflets
* Develop a formal policy on how to assess and manage communication needs within the organisation BUT provide a quick reference guide for staff to know what help to get and how.
* Use terminology that is meaningful to your organisation
* Allow additional time for interactions initially
* Support staff with face to face training / awareness raising.
* Produce information through a collaborative process, involving the person and their circle of support, in the same way that a Communication Passport is made.

1. **NHS England Central Resources**

7.1 NHS England is in the process of publishing and signpost guidance and links to resources as they come available via the NHS England website pages. This includes an e-learning module which will be available from March 2016 to support organisations in implementing the Standard. Whilst this is in development, there is a helpful collection of modules available on the [Disability Matters website](https://www.disabilitymatters.org.uk/totara/program/view.php?id=41)

7.2 Further information is available at [www.england.nhs.uk/accessibleinfo](http://www.england.nhs.uk/accessibleinfo) and interested people can sign up to updates or email queries via [england.nhs.participation@nhs.net](mailto:england.nhs.participation@nhs.net)

7.3 Reports from each of the Pilot sites are available at [www.England.nhs.uk/ourwork/patients/accessibleinfo-2/support/](http://www.england.nhs.uk/ourwork/patients/accessibleinfo-2/support/)