



## V-IG 703 Accessible Information Standards Policy

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This Vocare document is applicable to

All Vocare

Or the following regions, services and areas:

Code      Regions/Service/Area/Premises

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Vocare

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## 1. Document control

### 1.1 Document History

Version	Release Date	Originator	Notes
1.00	16 <sup>th</sup> November 2016	Karen Taylor	New Policy

### 1.2 Document Approval

Vocare Group Authorisation	
Name & Title	Authorising Signature
John Harrison Chief Executive	
Dr Michael Harrison Clinical Executive	

### 1.3 Distribution

This document will be made available on Vocare's Intranet link.

Controlled copies will be produced, distributed and maintained in accordance with Vocare's ISO Quality Standards.

### 1.4 Master Copy

The master electronic copy of this document is held by

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## **2. Scope**

This policy applies to all Vocare staff and applies to the premises and locations from which the service is delivered within the areas covered by Vocare. This involves the out of hours provision, the urgent care centres as well as practices and any other service that Vocare is responsible for including NHS 111.

## **3. Introduction**

NHSE has published the 'Accessible Information Standard' which came into force in July 2016. It directs and defines a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of patients, service users, carers and parents, where those needs relate to a disability, impairment or sensory loss. The Standard applies to service providers across the NHS such as Vocare and within the adult social care system. It is recognised that effective implementation will require such organisations to make changes to policy, procedure, human behaviour and, where applicable, electronic systems. Therefore it is anticipated that successful implementation will lead to improved outcomes and experiences, and the provision of safer and more personalised care and services to those individuals who come within the Standard's scope.

## **4. Aim**

Vocare's aim is to meet the information and communication support needs of disabled people. As an applicable organisation, we have a legal duty to follow this standard. The standard directs and defines a specific, consistent approach to accurately and appropriately identifying, recording, flagging, sharing and meeting individuals' information and communication support needs by the organisation. This will thus support the reduction of inequalities, enhanced personalisation and choice, greater empowerment of service users as equal partners in their own care with concomitant improved transparency and access to information.

This is in reference to the Accessible Information: Specification 2015 and Accessible Information: Implementation Guidance 2015, and noting the Equality Act 2010, Care Act 2014, the Data Protection Act 1998, the NHS Constitution and EDS2.

## 5. Related Policies

The following Vocare policies are relevant

- V-IG P149 Clinical Risk Management Policy [IT]
- V-IG P 47 Information Governance Framework IG policy
- P14 Confidentiality Policy
- V-G P 240 Consent to Examination or Treatment Policy
- V-G P 225 Privacy, Dignity and Respect Policy
- V- C -P241 Chaperone Policy
- V-IG P35 Communications Strategy
- V-G P30 Vocare Patient and Client Engagement Policy

## 6. Operational aspects

In terms of the organisation, the service has been broken down into

- Electronic/telephonic access
- Face to face
- Public facing printed and internet communications

## **6.1 Electronic health records and telephonic access**

Noting the HSCIC document, 'Standards for the clinical structure and content of patient records', electronic health records must support safe, high quality care, delivered in partnership between the patient and professionals, but in addition to supporting the care of the individual, there are many other uses of the data recorded in clinical records. These include clinical audit, management, planning, policy, commissioning and research. For all uses, the data must be fit for purpose and the necessary information governance and consent properly addressed

### **6.1.1 Identification of needs**

- A consistent approach to the identification of patients', service users', carers' and parents' information and communication needs, where they relate to a disability, impairment or sensory loss. This is via pathways system and will rely on pragmatic application of the system.

### **6.1.2 Recording of needs**

- consistent and routine recording of patients', service users', carers' and parents' information and communication needs, where they relate to a disability, impairment or sensory loss, as part of patient / service user records and clinical management / patient administration systems.
- Use of defined clinical terminology and English definitions indicating needs.
- Recording of needs in such a way that they are 'highly visible'.

### **6.1.3 Flagging of needs**

- Via special patient note system, with patient consent where appropriate

### **6.1.4 Sharing of needs**

- Via special patient note system, with patient consent where appropriate

### **6.1.5 Meeting of needs**

- To ensure that the individual receives information in an accessible format and any communication support which they need.

### **6.1.6 Governance**

- Vocare has reviewed our current patient administration and record systems, platforms, processes and documentation so that patients can access our systems in as easier manner as possible. For example, in the generic use of ‘Interpreternow’ and ‘typetalk.’
- Our SIRO and IRO and IS leads have reviewed our systems to confirm that they are fully IG compliant.
- Training is being implemented, especially with regard to a general awareness of communications needs so that we ask the right questions in the most appropriate manner.
- These elements are all auditable as part of our organisational annual audit cycle

### **6.2 Face to face**

#### **Identification of needs**

- A consistent approach to the identification of patients’, service users’, carers’ and parents’ information and communication needs, where they relate to a disability, impairment or sensory loss. This will rely on pragmatic application of the system.

#### **6.2.2 Recording of needs**

- consistent and routine recording of patients’, service users’, carers’ and parents’ information and communication needs, where they relate to a disability, impairment or sensory loss, as part of patient / service user records and clinical management / patient administration systems.
- Use of defined clinical terminology and English definitions indicating needs.
- Recording of needs in such a way that they are ‘highly visible’.

#### **6.2.3 Flagging of needs**

- Via special patient note system, with patient consent where appropriate

#### **6.2.4 Sharing of needs**

- Via special patient note system, with patient consent where appropriate

#### **6.2.5 Meeting of needs**

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To ensure that the individual receives information in an accessible format and any communication support which they need, e.g. hearing loops, lip reading training for staff, placing seating in optimum position for patients for pragmatic communication.

### **6.2.6 Governance**

Adherence to good practice as defined in Accessible Information: Implementation Guidance 2015. Again training is being implemented so that we ask the right questions in the most appropriate manner. Vocare additionally has close liaison with local British Sign Language provision via the National Register of Communication Professionals working with Deaf & Blind People.

### **6.3 Public facing printed and internet communications**

Information is given to patients in a language and format that is understandable.

We aspire to using plain English.

Trebuchet 12 point house style is our chosen format for letters, unless large print format is suggested.

If necessary, we provide information in audio format, e.g. complaint responses.

Pictorial information leaflets are provided where possible, e.g. complaints & chaperone leaflets, posters and internet information.

We have access to a Braille translation company [ISO 27001; ISO 9001 compliant] for necessary correspondence and use Unified English Braille.

## **7. Overall Governance**

- Elements are all auditable as part of our organisational rolling annual audit cycle.
- These will include IG issues, transfer of records, complaints and incidents management.
- Establishment of information sharing agreements with third parties
- Monitoring of information sharing agreements with third parties.



## **8. Equality and Diversity Statement**

The management of Vocare are committed to providing equality of opportunity, not only in its employment practices but also in the services for which it is responsible. As such, this document has been screened, and if necessary an Equality Impact Assessment has been carried out on this document, to identify any potential discriminatory impact. If relevant, recommendations from the assessment have been incorporated into the document and have been considered by the approving committee.

Vocare also value and respect the diversity of their respective employees and the communities they serve. In applying this standard operating procedure, they will have due regard for the need to:

- Eliminate unlawful discrimination
- Promote equality of opportunity
- Provide for good relations between people of diverse groups

For further information on this, please contact the Vocare Assurance Department or Human Resources Department.

## **9. Associated legislation**

Equality Act 2010

Care Act 2014

Health & Social Care Act 2012

## **10. References**

SCCI1605 Accessible Information: Specification

EDS2 Equality Delivery System 2' 2013

Standards for the clinical structure and content of patient records: HSCIC 2013