

POLICY TITLE:	Accessible Information (Including Interpreters)
Policy Number:	OP29.1
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Policy Owner:	Director of Quality
Ratified by:	Jackie Bloxham, Head of Safeguarding
Responsible Signatory:	Colin Quick, Chief Quality Officer
Outcome:	<p>This policy:</p> <ul style="list-style-type: none"> • Aims to ensure that the information or communication support needs of adult service users with disabilities and their carers are identified, recorded and met • Ensures that identified needs are shared with other adult care providers (with service user permission) as required • Lists the minimum data set that must be recorded
Cross Reference:	<p>OP29 Service User and Carer Involvement</p> <p>OP05 Mental Capacity</p> <p>OP05.3 Adults with Incapacity (Scotland)</p> <p>OP05.4 Mental Capacity Act (Northern Ireland) 2016 and Deprivation of Liberty Safeguards</p> <p>OP06.2 Child Protection, and Adult Support & Protection (Scotland)</p> <p>OP08.5 Domestic Abuse: Supporting Service Users</p> <p>OP08.6 Safeguarding Children and Adults</p> <p>H47 Supportive Observation and Engagement</p>

EQUALITY AND DIVERSITY STATEMENT

Priory is committed to the fair treatment of all in line with the [Equality Act 2010](#). An equality impact assessment has been completed on this policy to ensure that it can be implemented consistently regardless of any protected characteristics (age, disability, gender identity and expression, marriage or civil partnership, pregnancy or maternity, race, religion or beliefs, sex, sexual orientation), and all will be treated with dignity and respect.

In order to ensure that this policy is relevant and up to date, comments and suggestions for additions or amendments are sought from users of this document. To contribute towards the process of review, email legalandcompliancehelpdesk@priorygroup.com

ACCESSIBLE INFORMATION (INCLUDING INTERPRETERS)

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1 SCOPE

- 1.1 This policy applies to all sites and services across England, Scotland, Northern Ireland and Wales. Where there are differences between nations, this will be clearly highlighted.
- 1.2 This policy applies to all patients, service users, and residents (hereafter referred to as "service users") whom Priory provides care and treatment services for.

2 INTRODUCTION

- 2.1 'Accessible Information' is information which is able to be read or received and understood by the individual or group for which it is intended.
- 2.2 The Equality Act 2010 places a duty on all service providers to take steps or make reasonable adjustments in order to avoid putting a disabled person at a substantial disadvantage when compared to a person who is not disabled. The Act is explicit in including the provision of information in "an accessible format" as a "reasonable step" to be taken. The Health and Social Care Act 2012 also reflects this requirement.
 - 2.2.1 Article 1 of the United Nations Convention on the Rights of Persons with Disabilities has the following definition of disabled people. "Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others." In providing accessible information and meeting communication needs, services will enable service users to engage fully with treatment and care.
 - 2.2.2 In addition, the Care Act 2014 details specific duties for local authorities with regards to the provision of advice and information, this includes the requirement that, "Information and advice provided under this section must be accessible to, and proportionate to the needs of, those for whom it is being provided."
- 2.3 The Accessible Information Standard (The Standardisation Committee for Care Information (SCCI), a sub-group of the National Information Board) and the NHS Scotland Accessible Information policy 2015 set out the requirements agreed for providers of publicly funded services in adult health and social care, to meet the statutory requirements.
- 2.4 All Priory sites caring for adult service users will comply with this standard by identifying and recording the information and communication support needs of service users (and where appropriate, their carers), where these needs relate to or are caused by a disability, impairment or sensory loss.

- 2.5 In addition to robust assessment of information or communication support needs, sites will display posters on site asking service users, carers or families to inform care teams of any communication support they require, that the teams do not already know about, or if those needs have changed or could be improved. The poster, **OP Form: 27A**, should be prominently displayed in reception and other public areas of the site.

3 REQUIREMENTS

- 3.1 There are five requirements that must be met:
- (a) Identify information and communication support needs.
 - (b) Record those needs in a consistent way.
 - (c) Highlight the needs in the service user record and clearly explain how they are to be met.
 - (d) Share the information with other care providers (following consent requirements).
 - (e) Ensure that needs are met by providing accessible information and communication support as required.
- 3.1.1 **Identify information and communication support needs** – On or prior to admission the information and communication support needs of service users, and their significant others that are directly involved in their care, will be assessed. Best practice is to identify such needs on first contact with a service user. For existing service users any information and communication needs will be identified at the next CPA/MDT meeting or other service user review and updated regularly thereafter. (See flowcharts at **Appendices 1 & 2**).
- 3.1.1.1 The primary method of identifying information or communication support needs is to ask the service user, their carers and parents, or a nominated representative so that their needs are self-defined. If the service user lacks the capacity to understand the information being given, every effort must be made to assist following the processes in OP05 Mental Capacity.
- 3.1.1.2 Assessment questions may include:
- (a) Do you have any communication needs?
 - (b) Do you need a format other than standard print?
 - (c) Do you have any special communication requirements?
 - (d) How do you prefer to be contacted?
 - (e) What is your preferred method of communication?
 - (f) How would you like us to communicate with you?
 - (g) Can you explain what support would be helpful?
 - (h) What communication support should we provide for you?
 - (i) What is the best way to send you information?
 - (j) Do you have difficulty hearing, or need hearing aids, or need to lip-read what people say?
 - (k) Do you have difficulty with memory or ability to concentrate, learn or understand?
 - (l) Do you have difficulty speaking or using language to communicate or make your needs known?
- 3.1.2 **Record those needs in a consistent way** – information or communication support needs will be identified under four categories:
- (a) Communication support.
 - (b) Specific method of contact.
 - (c) Communication professional.
 - (d) Specific information format.
- OP Form: 27** is available to record the needs, unless there is an alternative consistent arrangement provided in the divisional record keeping system. This record must be updated regularly following a review of needs.
- 3.1.2.1 It is the self-defined needs and not the person's disability or condition which should be recorded. There is a clear rationale for this, in that the aim of the Standard is to ensure that an individual receives information in a format that they have specified as being able to understand and any support which they specifically need to communicate. Recording that a

person is 'deaf', for example, does not explain whether they are able to read written English, if they use British Sign Language (BSL) or are a lip reader and/or hearing aid user. Assumptions about communication support or alternative formats required, or any recording of needs, must not be made without consultation with the individual themselves and/or, where appropriate, their carer, parent or nominated representative. The service user should be aware of the information that is being recorded.

- 3.1.3 **Highlight the needs in the service user record and clearly explain how they are to be met** – If information or communication support needs have been identified as being required, this will be highlighted in the service user records to alert all colleagues of the requirements and the method in which the needs will be met.
- 3.1.3.1 The record of a service user's or carer's information or communication support needs must be 'highly visible' to relevant staff and professionals. This means it must be obvious and overtly apparent to all colleagues caring for the service user and if the records are passed to a different care team any information or communication support needs must be specifically pointed out as part of the handover process, for example on discharge or transfer:
- (a) For paper records it must be visible on the cover, title and / or 'front page' of a document and highlighted in some way to draw attention to the information as being of particular importance, for example in a larger or bold font, and / or a different colour
 - (b) For electronic records, CareNotes, it must be visible in the Alert section of the header banner on every page.
- 3.1.4 **Share the information with other care providers** – As a routine part of referral, discharge and handover processes, any new service provider must be alerted to a service users information and communication support needs using existing data-sharing processes. A consistent format of this information will be provided in line with **OP Form: 27**. As with any personal information, the service user should be asked to consent to share it, but if they do not have the capacity to consent, a best interests decision should be taken (refer to OP05 Mental Capacity).
- 3.1.5 **Ensure that needs are met** – Processes are to be put in place to meet the communication and information needs for service users and their carers as identified by the assessment. Communication support, professional communication support and information in alternative formats must be provided promptly and without unreasonable delay. All colleagues caring for or treating the service user must familiarise themselves with the requirements. For further information see section 3.

4 MEETING INFORMATION OR COMMUNICATION SUPPORT NEEDS

- 4.1 Colleagues must ensure that information or communication support needs are met using resources within the locality, but if the needs cannot be met then this should be recorded on **OP Form: 27** with details of action to be taken to ensure the need is met and the requirement must then be escalated via the line management structure for further action to be taken until the need is met. For consistency of record keeping, the following categories of communication support will be used across the Group as below:
- 4.1.1 **Verbal communication support** – If the service user requires support when receiving information every effort will be made to assist by involving a preferred colleague, family member, carer or nominated representative. Familiarity with the nuances of a particular colleague's dialect, accent and manner of speaking can assist a service user with a disability, impairment or sensory loss to communicate effectively. If necessary more time must be allowed for appointments/sessions.
- 4.1.2 **Specific method of contact** – Service users will be asked whether they prefer to be contacted by telephone, email or letter and where possible the request will be adhered to. For many people with a disability, impairment or sensory loss, email is a highly effective, quick

and economical communication format or contact method. The Caldicott Information Governance Review (2013) acknowledges that email is not secure, but concluded that personal confidential data can be shared with individuals via email when the individual has explicitly consented and they have been informed of any potential risk. Therefore, if this is the stated preferred contact method for a service user, personal information may be transferred to one specific agreed and recorded address provided that the security risks have been explained to the recipient, and they understand and agree. (**LE Form: 07, 07A and 07B** are available for this purpose).

- 4.1.3 **Communication professional** – If professional interpreting services are required, a list of approved interpreters is available from the Intranet at [Central services/Purchasing/Supply arrangements/Translators](#).

NB: In situations where there are concerns about abuse or neglect (especially 'Honour Based Abuse') is suspected; relatives, friends, community leaders and neighbours should not be used as interpreters in case they are linked to the group suspected of carrying out the abuse – professional interpreting services must be utilised.

- 4.1.4 **Specific information format** – Written information will be provided in a different language (a list of approved translators is available from the Intranet at [Central services/Purchasing/Supply arrangements/Translators](#)), Easy read format, Braille or large print if required. (If this cannot be provided locally, or available from the Priory Intranet, contact legalandcompliancehelpdesk@priorygroup.com for further assistance).

5 REFERENCES

5.1 Legislation

Care Act 2014
Equality Act 2010
Health and Social Care Act 2012

5.2 Guidance

NHS England (2015) SCCI 1605 Accessible Information: Specification
NHS England (2015) Accessible Information: Implementation Guidance
NHS Health Scotland (2015) Accessible Information Policy 2015
http://www.healthscotland.scot/media/1137/5893-accessible_information_policy_2015.pdf

6 ASSOCIATED FORMS

- 6.1 **OP Form: 27** [Record of Information or Communication Support Needs](#)
OP Form: 27A [How do you Communicate?](#) (Poster)

7 EQUALITY IMPACT ASSESSMENT

How is the policy likely to affect the promotion of equality and the elimination of discrimination in each of the groups?			
Protected Characteristic (Equality Act 2010)	Impact Positive/ Negative/ None	Reason/ Evidence of Impact	Actions Taken (if impact assessed as Negative)
Age	Positive	Access to any accessible information and translation services is key to supporting people to effectively access treatment and	

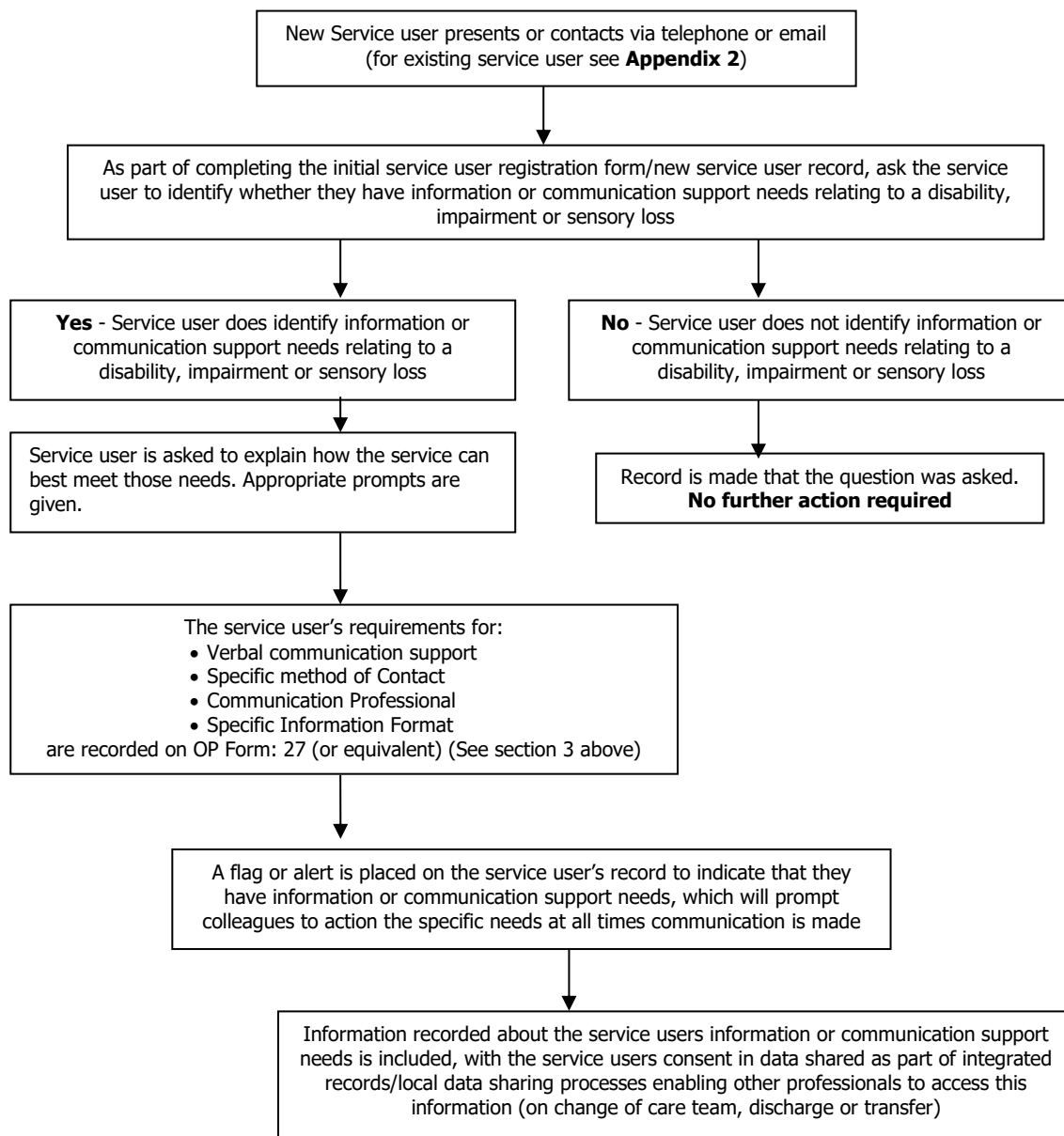
		engage with their wider care needs	
Disability	Positive		
Gender identity and expression	Positive		
Marriage or civil partnership	Positive		
Pregnancy or maternity	Positive		
Race	Positive		
Religion or beliefs	Positive		
Sex	Positive		
Sexual orientation	Positive		
Other, please state:			
EIA completed by:			
Name:	Colin Quick		
Role/Job Title:	Chief Quality Officer		
Date completed:	07/02/2024		

8 APPENDICES

- 8.1 **Appendix 1** – New Service User Registration
Appendix 2 – Existing Service User repeat Contact

APPENDIX 1

NEW SERVICE USER REGISTRATION



APPENDIX 2

EXISTING SERVICE USER REPEAT CONTACT

