



Adult Social Care & Health

Accessible Information Policy

Version 1.2

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What is the Standard?

From 31 July 2016 all NHS and Adult Social Care services are expected to follow the Accessible Information Standard (Section 250 of the Health and Social Care Act). The legal context is set out in the [Equality Act 2010](#), the [Care Act 2014](#) and the [Health and Social Care Act 2012](#).

The aim of the Accessible Information Standard is to make sure that people who have a disability, impairment or sensory loss are given information in a way that they can access and understand, and any communication support that they need is identified and provided. This is to ensure that they are not put at a substantial disadvantage in comparison with people who are not disabled, when accessing NHS or adult care services.

The Standard explains that we need to make sure that people, carers and family/relatives can access and understand the information they are given. This includes making sure that people get information in the different formats that they need such as, braille, large print, easy read or via email.

This policy is applicable to all Derbyshire County Council adult care services. Commissioners must ensure that their actions, especially through contracting and performance arrangements, enable and support provider organisations from which we commission services to implement and comply with the requirements of the Standard.

The scope of the Standard extends to people and their carers, who have information and/or communication support needs which are related to, or caused by disability, impairment or sensory loss. This includes the need for: information in 'non - Standard', alternative or specific formats; use of specific or alternative contact methods; arrangement of support from a communication professional (for example a deafblind manual interpreter or British Sign Language interpreter and support to communicate in a different or particular way or to use communication aids (for example to lipread or use a hearing aid).

The Standard is of particular relevance to individuals who have other communication disabilities such as aphasia, autism or a mental health condition which affects their ability to communicate. People and carers with any form or type of disability or impairment which affects their ability to read or receive and understand information, and/or to communicate, are within the scope of the Standard.

The Standard includes an individual's need for support from an advocate to help them to communicate effectively. More information about advocacy can be found on the council's [website](#).

Exclusions

The following aspects are explicitly outside of the scope of this Standard:

- Individuals' preferences for being communicated with in a particular way, which do not relate to disability, impairment or sensory loss, and as such would not be considered a 'need' or 'requirement' (for example a preference for communication via email, but an ability to read and understand a standard print letter).

- Individuals who may have difficulty in reading or understanding information for reasons other than a disability, impairment or sensory loss, for example due to low literacy or a learning difficulty (such as dyslexia), as distinct from a learning disability. As a matter of principle, we treat these as minimum standards and as good practice we should make information as accessible as possible.
- Foreign language needs/provision of information in foreign languages – i.e., people who require information in a non-English language for reasons other than disability.
- Matters of consent and capacity, including support for decision-making, which are not related to information or communication support.

How we meet the standard

As part of the Accessible Information Standard, we must do the following five things:

1. Ask people if they have any information or communication needs and find out how we can meet their needs.
2. Record those needs clearly in a set way.
3. Highlight or flag the person's record on their Mosaic record, so that it is clear that they have information or communication needs and how we meet those needs.
4. Share information about people's information and communication needs with other providers of NHS and adult social care services, when we have consent or permission to do so.
5. Take steps to ensure that people receive information which they can access and understand and receive communication support if they need it.

Ask people and carers if they have information or communication needs, and find out how to meet their needs

People and carers should be asked if they have any communication/information needs relating to a disability, impairment or sensory loss, and if so, what are they.

New people should be asked, at referral stage and as part of the adult contact process (Call Derbyshire), what communication/information needs they have and how these can be supported.

The communication/information needs should be discussed again by the allocated worker if the person is referred for an assessment.

Existing people whose records pre- dated the Accessible Information Standard requirements should be asked if they have any communication or information needs when they next come into contact with the service (e.g., at reviews).

There is no legal requirement for a retrospective trawl of all records to identify people who have communication / information needs.

People should be asked to self-define their communication/information needs and it is these needs, which should be recorded and not the disability.

Record those needs in a set way

Any identified needs should be recorded on the Mosaic record under Current Communication Needs – Add, Date, Category and Sub-category. If reviewed and needs to be updated, end date applied and add new category. Multiple categories can be added to the record.

Highlight information or communication needs and explain how to meet those needs

Any communication and information needs identified must be made 'highly visible', such that they are seen and acted upon.

Share Information about a person's needs with other NHS and Social Care Providers when they have consent to do so

We need to ensure that information on a person or carer's information/communication needs is included as a routine part of any referral, review, discharge or handover.

Make sure that people get information in an accessible way and communication support if they need it

Persons wishing to contact us, can do so through our [website](#). Through Call Derbyshire (01629 533190) or, by email (contactcentre@derbyshire.gov.uk), by text (86555), by fax (01629 533295), or Minicom (01629 533240).

Where information/communication needs are identified (e.g., correspondence), these must be provided for in one or more accessible formats (e.g., non-Standard print). The Standard dictates that the adjustments made should be reasonable – but this does not mean that persons must always receive information in their preferred format.

Where required, appropriate professional communication support must be arranged i.e. interpreters and other communication professionals (e.g. British Sign Language (BSL) interpreters – details of how to access this service are on [our website](#)). There is also a range of British Sign Language (BSL) videos available on our [YouTube channel](#).

It is also possible to produce information in a range of different formats such as Braille, audiotape and large print.

The Information Team provide a range of information in easy read format. These are available on our [easy read information page](#). New material can also be produced as required.

You may wish to consider using tools such as ['This is me plan'](#) or an [autism passport](#) when supporting people.

Complaints and Feedback

The Standard also specifically supports the response to the tragedies at Mid - Staffordshire NHS Foundation Trust and Winterbourne View Hospital, where patient and carer voices were not heard – to devastating effect.

“A key theme running through the Francis Report was the observation that patients, their carers and families were not listened to during and after care...This is a particular concern for older people and other groups whose voice can sometimes be harder to hear and where we need to listen more carefully” (Secretary of State for Health 2013: 51).

“The patients at Winterbourne View were not listened to or believed when they told people about abuse. Their families were often not involved in decisions about where they were sent, parents and siblings found it increasingly difficult to visit and families’ concerns and complaints were not acted on” (Department of Health (2012:21).

We have an [easy read complaints policy](#) to help ensure that individuals who wish to make a complaint, raise a concern, or pass on feedback, can do so easily. The full version of the complaints policy is available on the council’s [website](#).

The Care Quality Commission has also stated that they will, “...look at evidence of how services implement the Accessible Information Standard when we make judgements about whether services are responsive to people’s needs”. This will form part of their inspection process, report and rating.

References

- Department of Health (2012) [‘Transforming care: A national response to Winterbourne View Hospital Department of Health Review: Final Report.’](#) Department of Health, London.
- Secretary of State for Health (2013) [‘Patients First and Foremost: The initial Government Response of the Mid Staffordshire NHS Foundation Trust Public Enquiry’,](#) Department of Health, London.

Useful Resources

- British Medical Association – [Following the Accessible Information Standard webpage](#)
- UK Government (2018) - [Making your service accessible: an introduction](#)
- UK Government (2018) - [Accessible Communication Formats](#)

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Approval and Authorisation History

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Authored by	Dawn Nash	January 2017
Approved by	Sharon O'Hara	January 2017
Authorised by:	Quality Assurance Group	January 2017

Change History

Version	Date	Name	Reason
Version 1	January 2017	Dawn Nash	New policy
Version 1.1	April 2019	Sharon O'Hara	Review
Version 1.2	February 2024	Lisa Holford	Review