Trust Ref number B27/2022

1. Introduction

The Accessible Information Standard, launched in 2016 states in law that all public funded providers of health or social care must meet the information & communication needs of all those who access public services. Specifically, the information standard requires providers to:

- Ensure communication shared in a fashion that is complaint with an individual's needs.
- Enables the flexible use of different information production (braille, sign, large print).
- Provides additional support for all appointments (such as the presence of interpreters).

One of the ways in which UHL can ensure it is compliant with the standard is to record any additional communication needs a patient may have when registering a patient and to then act upon it.

To record this information,

- Access has been provided on HISS to a function called Record Patient Needs.
- There are several codes / descriptions which support patient communication needs for selection.

2. Scope

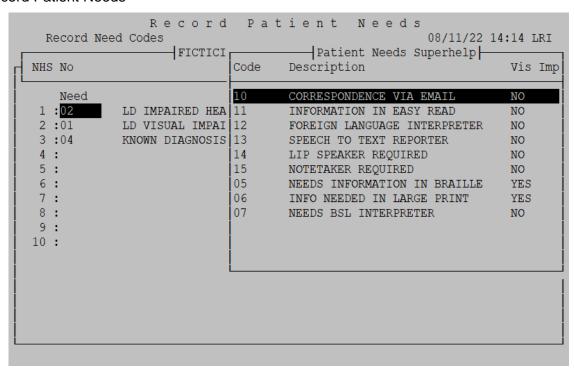
This guideline applies to all staff within UHL who book or manage outpatient attendances on HISS, they have been given access to the Record Patient Needs function to enable them to do this.

3. Recommendations, Standards and Procedural Statements

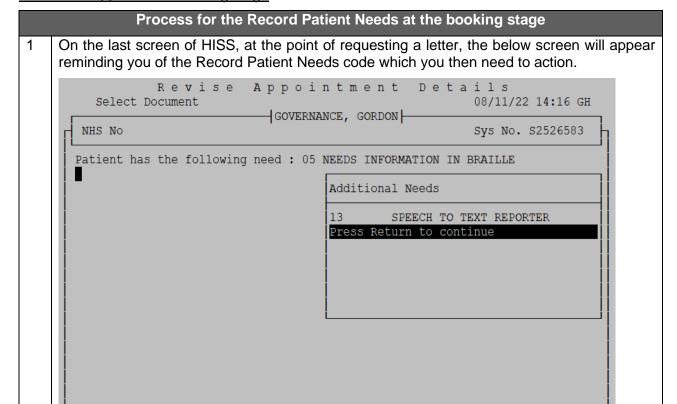
Process at the referral stage

Pr	Process for documenting patient communication needs within the Record Patient Need function on HISS			
1	PRISM form referral received via ERS. The PRISM form has been updated to include sections where additional patient needs are identified.			
2	PRISM form referral is reviewed by the clinician.			
3	Register the patient on HISS and add to the waiting list if applicable and if not already done so.			
4	Additional Information Standard Action - If an additional patient communication need is identified on the referral form – using the Record Patient Needs function on HISS, record the patient need by selecting the code from the super help list, see screen shot below for details. NB – You can record a patient need at any time, for example, if a patient informs you, or you become aware of an additional patient need at any point in their journey it should be recorded.			

Record Patient Needs



Process at appointment booking stage



Once the additional support has been arranged it is important to record in in the appoinment comment field on HISS. If an appoinment is cancelled or changed, then whoever is making the change is aware to change the additional support, for example, change the interpreter, resend the braille letter.

Process for confirming to the patient what actions have been put into place

One of the things that causes patients anxiety about attending hospital is that they often do not know that an interpreter has been booked, or that they will get their information in a format that meets their needs. Therefore, it is important to tell a patient when you have carried out an action.

Process for confirming to the patient that you have carried out the actions

When you have actioned the additional need such as, booked the interpreter, or arranged for the braille letter to be sent out, the patient / relative / carer will need to be informed.

You can do this be either:

- Send a text message using either the ad hoc facility within Envoy which is the Trust system for sending automated reminder texts
- Use the Accuryx system which is widely being used across the Trust for keeping patients informed.

Please note – Patients may not speak the language or have a sight impairment that prevents them from reading a text, however, if they have provided us with a mobile number for the purpose of information then this is taken as consent that we will sometimes communicate to them via that number.

How to arrange the additional requirements for patients

The table below outlines some of the most common types of alternative formats and professional communication support which may be needed by people with a disability, impairment, or sensory loss.

The Trust has a contract with DA languages who can supply most of the needs that fall within the Accessible Information Standards other than British Sign Language which is arranged with 2 other companies. All details regarding interpreting and process are found in the Trust Interpreting and Translation Policy and relevant Insite pages.

Format / Type	Description	Patient Group	Availability
Email	Information whether letter, leaflet etc can be sent via email as there is software available that enables it to read documents aloud	Sight impaired	Record email address in comments field on HISS – a temporary measure whilst awaiting EPR
Audio	Information recorded from speech or synthetic (computer-generated) speech onto cassette tape, CD (compact disc) or as an electronic file such as an MP3.	Information in an audio format is needed by some people who are blind, deaf and blind or have visual loss. It can also be an accessible format for some people with a learning disability.	Audio formats available from DA languages
Braille	Tactile reading formats. Readers use	Braille is used by	Braille
	their fingers to "read" or identify	some people who	transcription

	raised dots representing letters and numbers.	are blind, deaf and blind or have visual loss. It is estimated that between 4-5% of registered blind people in the UK read braille.	available to order direct from DA languages request as translation
Easy Read	Written information in an "easy read" format in which straightforward words and phrases are used supported by pictures, diagrams, symbols and / or photographs to aid understanding and to illustrate the text.	"Easy read" information is primarily aimed to support people with a learning disability; however, it can also support people with other needs	Easy Read document production available from DA Languages – request as translation service
Large Print Documents	Printed information enlarged or otherwise reformatted to be provided in a larger font size. Accessible font (or point) sizes range from point 14 up to point 28, and individuals should be asked to specify.	Large print documents are needed by a range of different people, including some people with visual loss and / or who have a learning disability, and people with communication needs following a stroke.	Request letter as normal in HISS - Letters requested will be sent in large print by the external letter company CFH as long as the relevant RPN code is recorded.
British Sign Language (BSL) face to face	BSL is a visual-gestural language; it has its own grammar and principles, which differ from English.	BSL is the first or preferred language of some deaf people and some deaf and blind people.	Support from BSL interpreter may be arranged from – Action deafness – and Inet. Send request form as per Trust translation policy.
BSL video remote interpreting (also known as video interpreting, remote interpreting, or virtual interpreting)	An online service in which a BSL interpreter interprets via video software. It enables a direct connection to an interpreter so that the deaf person can sign to them what they want to say. The interpreter then speaks this to the hearing person (via video link) and signs back their (spoken) reply.	BSL video remote interpreting may be appropriate / accessible for communicating with some BSL users (as above), especially in an emergency or urgent situation.	Support from BSL interpreter may be arranged from - Action deafness - and Inet. Send request form as above.
Note Tracker	In the context of accessible information, a notetaker produces a set of notes for people who are able to read English but need communication support, for example	A notetaker may be needed by someone who is deaf or someone who has hearing loss.	Support from a professional notetaker may be arranged from DA languages – order

	because they are deaf.		as translation service.
Speech To Text Reporter (STTR)	A STTR types a verbatim (word for word) account of what is being said and the information appears on screen in real time for users to read. A transcript may be available and typed text can also be presented in alternative formats.	A STTR may be needed by a person who is Deaf or has hearing loss. Alternatively, an STTR may support someone with visual loss (who is using screen-reader or other communication device).	Support from an STTR may be arranged from DA languages.
Lip Speaker	A person who repeats the words said without using their voice, so others can read their lips easily.	A lip speaker may be used to support someone who is deaf or has hearing loss to communicate.	Support from a professional lip speaker may be arranged from DA languages.
Foreign Language Interpreter	Foreign language interpreters will interpret in the patient's preferred language either face to face or via teleconference.	Any patient who requires foreign language interpretation, family members should not be used unless in an emergency.	Organise interpreters via DA languages – in advance for F2F and on the day for phone interpreting.

Process for requesting and managing different document types

	HISS Outpatients sent externally via CFH	HISS Locally Printed Letters	Other Outpatient Clinical e.g., Dict3	Inpatient Discharge Summaries
Email	The letter will be automatically stopped, and	Print letter and action alternative	As for HISS local print.	As for HISS local print.
Audio	PDF returned to the sender / requestor for further action	format with DA languages		
Braille	with DA languages.	direct.		
Easy Read				
Large Print Documents	Letter automatically sent in large print as long as the RPN code is recorded correctly (leaflets will still be normal print currently).	Generate in word and print in large font.	As for HISS local pint.	As for HISS local print.

4. Education and Training

A programme of communication will ensure all CMGs are made aware of this guideline document and its content to raise awareness

All relevant staff members have been provided with access to the Record Patient Need function on HISS. This function has been sited within the appointment function set that all staff booking clinic appointments will have access to.

This guideline sets out the reasoning and the processes for recording and actioning on patient communication needs.

If a communication need has been identified, it should be recorded and actioned upon in the process set out in this guideline.

5. Monitoring and Audit Criteria

The booking centre will receive a daily report of all patients with an appointment booked in 14 days' time with an additional need identified. The team will check each patient to ensure that the appropriate support has been put in place according to the patient need.

Key Performance Indicator	Method of Assessment	Frequency	Lead
Communication needs recorded on HISS using the RPN function.	Review of data from HISS	Daily	DW and booking centre
Monitor actions put in place when a communication need is identified and recorded on HISS.	Review of data from HISS	Daily	DW and booking centre

6. Supporting Documents and Key References

If applicable

NHS England » Accessible Information Standard

7. Key Words

Patient needs, additional needs, record patient need, interpreter, booking, BSL, braille.

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This table is used to track the development and approval and dissemination of the document, and any changes made on revised / reviewed versions

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Author / Lead Officer:			Job Title: General Manager			
Reviewed by:	Accessib	le information standard	stakeholder group attend	dees		
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