

Information for patients, carers and the public policy

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REVIEW DATES AND DETAILS OF CHANGES MADE DURING THE REVIEW

April 2023

Includes section on information in other formats: videos; websites, apps, audio
Role of Assistant Patient Information Librarian
Readers panel
Addition of links to conflict of interest policy;
Archiving of patient information
Change in approval process and Q&S boards
Temporary extensions
Addition of appendices on writing patient information leaflets; producing patient information in video, Easy read, websites, and apps

KEY WORDS

Information for patients; leaflets; consent; translation; accessibility; Health Literacy; YourHealth; videos, apps, websites, easy read, readers panel;

1 INTRODUCTION AND OVERVIEW

This document sets out the University Hospitals of Leicester (UHL) NHS Trust Policy and Procedures for producing accessible information for patients.

In line with our Trust values, we are committed to producing high quality information for patients in clear, understandable language. Good communication and information

is key at all stages in the patient's journey and is vital to enable patients to make informed choices for consent to examinations, procedures or treatments. It is essential our information is of excellent quality; evidence-based and easily available to access online.

The Trust has an agreed process and templates for staff to use when creating or reviewing information for patients and the public. The template and guidance are available on the patient information page of [INsite](#). Templates are used so that information conforms to style guidelines and best practice. All leaflets must be sent to the Patient Information Library service before they are printed and published on our public-facing repository, known as [YourHealth](#).

All UHL information for patients must be produced, reviewed and updated to meet the requirements of this policy.

2 POLICY SCOPE

- 2.1 This policy applies to patient information produced for members of the public by any member of staff (clinical and non-clinical) working within University Hospitals of Leicester NHS Trust (UHL) or in partnership with other organisations. This includes information about conditions, treatments, procedures, examinations and services.
- 2.2 The policy focuses on information for patients in whatever format it is produced: leaflet, digital, audio and video.
- 2.3 **It does not include:**
- information which is personal to patients that would be held in their medical notes;
 - clinical guidelines;
 - patient pathways;
 - protocols or procedures;
 - corporate publications such as annual reports and audits;
 - patient letters or information sheets for consent to take part in research;
 - web pages on Leicester's Hospitals website - as these are managed by each service area. Any patient information added to the website or intranet needs to link to YourHealth. Pdfs of leaflets should not be uploaded.

3 DEFINITIONS AND ABBREVIATIONS

Health Literacy is about people having the knowledge, skills and confidence to use health information, to be active partners in their care and to be able to navigate health systems. Organisations should also recognise their role in enabling patients with different levels of health literacy to understand the information provided to them; reflecting on the systems, processes and organisational culture that can promote and/or impede this.

‘Information for Patients’ and **‘patient information’** may be used interchangeably in this policy. While ‘patient information’ is the more commonly used term, it is also often confused with information *about* patients. In this document, it refers only to information provided *for* patients.

INsite is the intranet/ internal website available to employees of UHL.

YourHealth – An online store of up to date UHL Information for Patients that is publicly accessible via <https://yourhealth.leicestershospitals.nhs.uk/> All content must go through the approval process described in this policy. YourHealth may contain links to patient information videos, or leaflets produced by other organisations providing they also have robust quality assurance processes. YourHealth is managed by the Patient Information Librarian and Library Assistant and is accessible to the public via a subdomain of Leicester’s Hospitals external website. The development and management of YourHealth allows the public to change the format themselves using a screen-reader for audio; or adjusting the screen settings for large print.

Accessible Information Standard - a legal requirement implemented in 2016, mandating that organisations must provide information in a way that is accessible to patients who have communication difficulties or sensory loss, and provide an alternative format where needed.

‘The Alliance’ The Alliance relates to elective work undertaken in community hospitals (day cases and outpatients) and is managed by UHL within the Clinical Support Services Clinical Management Group.

4 ROLES

- 4.1 The Executive Lead with overall responsibility for this policy is the **Medical Director for Health Equalities and Inclusion**.
- 4.2 **All members of staff** should be aware of the policy and develop information in line with it.
- 4.3 The **Consent & Mental Capacity Act Committee** will provide an annual report regarding patient information to the Executive Quality Board.
- 4.4 The **Patient Information Committee** will:
 - 4.4.1 Develop and maintain a Patient Information Policy for Trust-wide implementation.
 - 4.4.2 Ensure the Trust remains up-to-date with best practice related to providing information to patients.
 - 4.4.3 Act as a resource for advice regarding information for patients.
 - 4.4.4 Share best practice in providing information to patients in line with the Trust’s digital strategy.
 - 4.4.5 Provide a forum for discussion and resolution of disagreements.
 - 4.4.6 Obtain and report on whether CMGs have all of their leaflets on YourHealth and have a proactive review process.

4.4.7 Escalate services known not to engage in the process to the Consent Committee or Clinical Directors, as appropriate.

4.4.8 Ensure we are liaising with Equality, Diversity and Inclusion (EDI) and IM & T teams to work towards achieving the Accessible Information Standard.

4.5 The **Patient Information Librarian** will:

4.5.1 Co-ordinate the dissemination, implementation and review of this policy;

4.4.2 Maintain and update the patient information area on [INsite](#) with links, templates, and guidance to support this policy;

4.5.3 Act as patient information advisor for clinical and corporate areas linking in with the patient information lead for each service area;

4.5.4 Offer advice and assistance to authors in developing patient information, which must conform to agreed corporate identity guidelines and best practice in terms of health literacy;

4.5.5 Offer staff training sessions in health literacy, and the process of creating information for patients;

4.5.6 Provide a literature-searching service to authors enabling them to create information for patients that is up-to-date and evidence-based;

4.5.7 Develop and maintain an online store of patient information, known as YourHealth. This will be accessible to both staff and patients via a public-facing website.

4.5.8 Support the Patient Information Library Assistant to upload correctly formatted information to YourHealth and send timely reminders to authors when a review is due.

4.5.9 Report to the Consent & Mental Capacity Act Committee regarding the compliance of this policy and provide an annual report for the Executive Quality Board.

4.6 The **Assistant Patient Information Librarian** will

4.6.1 Deputise for the Patient Information librarian as required.

4.6.2 support the Patient Information Librarian in offering advice to leaflet authors and UHL services.

4.6.3 Maintain the trust's store of patient information

4.6. 4 Offer staff training sessions in health literacy, and the process of creating information for patients;

4.6.5 Support the Patient Information Library Assistant to upload correctly formatted information to YourHealth and send timely reminders to authors when a review is due.

4.7 The **Patient Information Library Assistant** will:

4.7.1 Be responsible for uploading finalised and approved leaflets to the YourHealth online store.

4.7.2 Manage a system to remind leaflet authors when leaflets are due for review.

4.7.3 Support the Patient Information Librarian in offering advice and leaflet authors and UHL services.

4.7.4 Help to create and manage an archive of previous versions of patient information leaflets.

4.7.5 Prepare reports and compliance data for reporting to the Consent & Mental Capacity Act Committee and the Executive Quality Board.

4.7.6 Provide administrative support to the Patient Information Librarian to support various aspects of this policy.

4.8 All **directorates and clinical management groups (CMGs)** must:

4.8.1 Appoint a senior level **patient information lead or leads** to ensure patient information is high quality, easy to understand and accessible. It is essential that each service area have their own Patient Information Lead or Coordinator.

4.8.2 Ensure adequate governance processes are in place to quality assure information for patients. The governance process for approving patient information is to be provided to the Patient Information Librarian.

4.8.3 Monitor and co-ordinate information for patients within their area.

4.8.4 Enable leaflets to be translated into alternative formats or languages on request, as per the [Interpreting and Translation UHL Policy](#) (Reference B30/2015) and the [Accessible Information Standard](#).

4.9 All **patient information leads** should:

4.9.1 Maintain up to date lists of all leaflets currently in use within their area and appropriate web based information. This needs to be submitted to the Patient Information Librarian twice a year (March & September).

4.9.2 Ensure that the patient information in their area is regularly reviewed as per this policy;

4.9.3 Ensure that any patient information created within their area is accessible to staff and the public via YourHealth.

4.9.4 Identify suitable authors to update leaflets in line with their published review dates;

4.9.5 Take reasonable steps to ensure that both electronic and paper leaflets are removed once their review date has passed.

4.9.6 Liaise with staff in their area in order to map the information needs within the patient journey to the information we provide.

4.9.7 Ensure they understand the Trust's obligations under [Accessible Information Standard](#).

4.9.8 Maintain links from their pages on Leicester's Hospitals website to the most up to date version of each leaflet on YourHealth. There is IT training available via <https://uhlhelm.com> to allow staff to edit their own webpages or contact webmaster@uhl-tr.nhs.uk to find out which staff already have editing rights.

4.10 **Patient information authors** are responsible for:

4.10.1 Liaising with the patient information lead for their area to ensure they are aware of leaflets or web based information that is in use.

4.10.2 Keeping an editable electronic copy of the final version of leaflets, stored in a shared drive to enable this to be updated easily in the future.

4.10.3 Attending Health Literacy Awareness training and leaflet workshop before producing patient information. Seek support from the Patient Information Library Service to ensure they understand best practice related to health literacy and accessible information.

4.10.4 Writing the content using the latest evidence. Contact the library service for help with literature searching.

4.10.5 Using the guidance on [Insite](#) to make sure the leaflet meets UHL standards.

4.10.6 Agreeing content with all relevant service and clinical leads.

4.10.7 Making contact with any equivalent services within The Alliance and agreeing content with all relevant clinicians across sites. Where possible, one leaflet should be in use, regardless of which hospital a patient attends.

4.10.8 Obtaining copyright permission to use any images. Authors can contact graphics@uhl-tr.nhs.uk to see if a suitable diagram already exists.

4.10.9 Involving patients who have experience of the subject of the leaflet when creating and updating leaflets. Feedback on the final draft should also be obtained from a wide range of patients.

4.11 **Readers panel**

A Readers panel of volunteers is available to support staff by providing feedback on patient information in its various formats. They will look at the accessibility and readability of patient information. Please contact the patient information service via InformationForPatients@uhl-tr.nhs.uk if you would like to access this service.

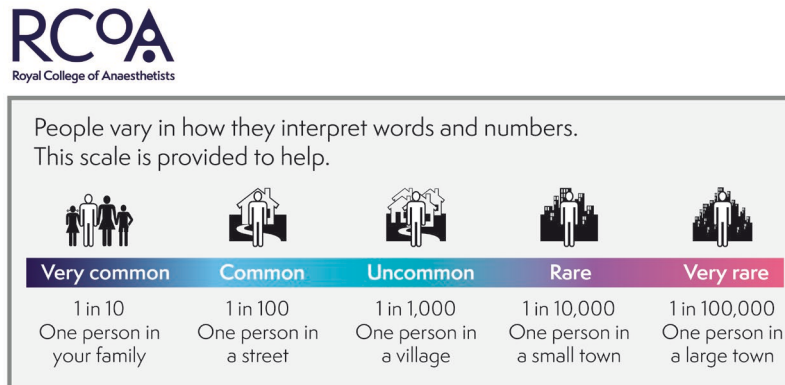
4.12 **Patients consent to be used for illustrative purposes**

Where patients have participated in the production of a leaflet e.g been photographed for illustrative purposes consent forms need to be completed and stored in line with Trust policy.

5. PROCESS FOR PRODUCING PATIENT INFORMATION

A standard process is followed to produce written information for patients and the public. A4 [Templates](#) are used so that information conforms to Trust standards and is consistently produced in the correct format. The templates are available on [Insite](#). Standard paragraphs may be used where appropriate, for example to communicate risk consistently across the Trust for certain interventions.

The Royal College of Anaesthetists scale for communicating risk has been adopted by the Patient Information Committee:



Information for patients should also comply with requirements of the [UHL policy for consent to examination or treatment](#) (Reference A16/2002)

The approval process aims to ensure that our patient information is of high quality; evidence-based and patient-centred using language that is easy to understand.

Where services are provided in partnership with another organisation, such as a neighbouring Trust, patient information should be consistent across the organisations and an agreed joint template may be used. Contact InformationForPatients@uhl-tr.nhs.uk for advice.

Where possible services should work together to produce patient information that works across services to reduce duplication of information.

It is recommended that any authors attend the Health Literacy training before starting any patient information.

5.1 MINIMUM STANDARDS FOR PATIENT INFORMATION

More detailed guidance on producing patient information and the checklists which must be completed and submitted with the patient information are available on Insite and as Appendix 1. In addition to going through the official approval process, all patient information leaflets must:

- 5.1.1 Use a current Trust A4 approved template (see patient information page of [Insite](#) for templates and guidance);
- 5.1.2 Display a unique number assigned by the Patient Information Service;
- 5.1.3 Display a produced date; and a review date that is in the future;
- 5.1.4 Use plain English and avoid use of unnecessary medical terminology;

- 5.1.5 Essential medical terminology must be explained first using patient-friendly language. Medical jargon should be avoided in leaflet titles;
- 5.1.6 Have a readability level of 11 years or under in line with average UK reading age. There are many free online readability checkers such as [SMOG](#) or the [Hemingway App](#), or contact the Patient Information Library service for help with this.
- 5.1.7 Include contact details for relevant department or service.
- 5.1.8 Images and drawings should be used to aid understanding where appropriate but must be sourced correctly without infringing on copyright laws. Images and drawings may be created in-house by contacting photography@uhl-tr.nhs.uk or graphics@uhl-tr.nhs.uk
- 5.1.9 Include information on accessing the leaflet in another format or language e.g., Easy Read, large print (included in the Trust approved template).
- 5.1.10 It is recommended that information is provided that will signpost patients to organisations for further information, support, and guidance. The organisations information needs to meet the trust's criteria around being current, accessible and readable.
- 5.1.11 More detailed guidance on producing patient information and the checklists which must be completed and submitted with the patient information are available from [Insite](#) and as Appendix 1.
- 5.1.12 Conflicts of interest: Staff need to ensure that there is no conflict of interest when producing patient information and that they are familiar with the [Managing of conflicts of interest in the NHS](#) policy (A1/2017).
The mention of commercial branded items or names of companies should not be included in patient information unless it is there to support patient understanding or because the product used is unique. If it is important that the name of a company or product is included in patient information, then staff would need to present their case to the Patient Information Committee. A decision would be made on a case-by-case basis.

5.2 USE OF LEAFLETS PRODUCED BY EXTERNAL ORGANISATIONS OR FROM OTHER SOURCES

Use of high quality leaflets produced by external organisations is encouraged. However, staff have responsibility for quality checking any external leaflets that are used within UHL. They must meet the same standards as the leaflets produced in-house in that they are evidence-based, easy to understand, up-to-date, in A4 format, follow accessibility best practice, (such as font size, colour contrast, use of images and white space). UHL departments remain responsible for the accuracy and suitability of the information that they give out to patients and their carers even if it has been produced by an external organisation. Services must check if permission is needed from the external organisation and should not promote the use of commercially available products or advertising. The exception to this is where

distribution of patient information is guided by legislation or regulation, as in the case of leaflets provided by the manufacturers of medication.

5.3 APPROVAL PROCESS

All patient information leaflets must be sent to the Patient Information Service to be published on YourHealth. Completed leaflets should be sent to InformationForPatients@uhl-tr.nhs.uk

Summary of patient information process

Author plans leaflet, discusses content with other colleagues who use the leaflet (across all sites and the Alliance if used there). Carry out literature search to ensure content reflects best practice and latest evidence (contact library for support).

Author drafts leaflet into A4 Publisher template involving lay people, or patients, and using simple language.
Send draft to Readers Panel for feedback.

Author sends draft leaflet to informationforpatients@uhl-tr.nhs.uk
Leaflet is checked to ensure it meets our policy and health literacy standards. Author advised to make any amendments as needed and resubmit.

Once the Information team and author are happy with final draft this is the ideal point to get governance approval before leaflet is published. This can be from Quality & Standards boards or other service meetings.

After approval, Patient Information Library service assign reference number and publish on YourHealth. Web link is sent to author. Web link to YourHealth (rather than upload of PDF) must be used on own web pages, to order print copies or translations via DA Languages.

Author arranges distribution.
Old versions must be removed from circulation

If leaflet is sent out automatically with outpatient appointments, the new version must be sent to cfhcontentmanager@uhl-tr.nhs.uk

The current version of all leaflets are available on YourHealth and older versions archived.
Out of date leaflets and those not on YourHealth should no longer be used.

5.4 PRINTING AND PUBLISHING LEAFLETS AND VERSION CONTROL

Once the final version of the leaflet has been agreed and published, the web link can be sent to one of the Print Rooms to order copies. The definitive version on YourHealth is the only version that should be printed and distributed. Leaflets should not be printed unless they have been through this process and leaflets displaying an expired review date must not be re-printed or distributed. It is not considered to be good practice to have large quantities of paper copies of leaflets in stock as a new version could be released meaning already printed copies are no longer suitable for use.

All leaflets used must display a reference number and review date assigned by the Patient Information Service.

Leaflets displaying an expired review date must not be sent to Print Room for printing.

These steps are designed to help ensure the most up-to-date versions of leaflets are used as often as possible.

Where possible staff should work together on patient information to reduce duplication of patient information.

If printing internally in a clinic or other location, only print the copy from YourHealth. This will always ensure that you are printing the latest version. Do not save leaflets on personal or shared drives as this could mean patients may not be given the latest version. The published version of the leaflet should not be amended in anyway when printing e.g. reducing the size from A4.

5.5 MAKING LEAFLETS AVAILABLE ONLINE

5.5.1 We have a responsibility to make our patient information available online, via our website in line with our Freedom of Information and Accessible Information Standard obligations. In order to fulfil this, authors are expected to ensure that their leaflet is available on YourHealth. The version on YourHealth will be the current version and all previous paper and electronic versions must no longer be used.

5.5.2 All leaflets are published on YourHealth with an expiry date of a maximum of 3 years. It is the author's responsibility to ensure that their patient information is reviewed in time before this expiry date.

The expiry date can be temporarily extended if there are good reasons such as operational pressures caused by a pandemic. The Patient Information Leaflet (PIL) author or Patient Information Leaflet (PIL) lead need to contact the Information for Patients team to request the extension and a reason for it, a timeframe will need to be discussed to ensure the information will be updated and re-published. Services will be granted an extension of a maximum 6 months before the information will expire from YourHealth.

5.6 TRANSLATING LEAFLETS

We have a legal duty under the Accessible Information Standard to provide information in a format that patients can access in a timely way.

People with a communication difficulty or sensory loss must have access to patient information in a format that they can access. Implementation of this policy enables the translation service to have access to UHL patient information via YourHealth, facilitating a timely turnaround for translations.

Easy Read, Braille and other formats can be ordered via the EDI team.

There is a separate policy, which can be found here: [Interpreting and Translation UHL Policy](#) (Reference B30/2015) or contact equality@uhl-tr.nhs.uk for further advice on translating into other languages. CMGs/directorates are responsible for ordering and funding any required translations.

5.7 REVIEWING LEAFLETS

All patient information will be assigned a review date of 3 years, 18 months if related to a new procedure or to meet external governance rules, for example, Endoscopy are on a 1 year review.

Review dates can be negotiated for clinical reasons with the Patient Information Service. For example, to bring in line with a policy update, or if there is a fast pace of change in that field.

Responsibility lies with the Service Area to review their patient information and update it accordingly before the review period expires.

Where staff are using leaflets owned by another service, they should contact that service to arrange a leaflet review and escalate any issues. It is not acceptable to continue using an expired leaflet, even if it is owned by another service.

5.8 LEAFLETS FOR NEW PROCEDURES

Approval for new procedures is via the New Interventional Procedures Authorisation Committee (NIPAG) and the policy can be found here: [New Interventional Procedures \(NIP\) UHL Policy](#) (Reference B17/2005). As part of this process, applicants are required to submit an accompanying Information for Patients leaflet to support the informed consent process.

5.9 ARCHIVING LEAFLETS

When a patient information leaflet is reviewed and updated the previous edition is archived within YourHealth. This ensures that should there be a request for previous versions of a leaflet, they are available to meet the trust's medico-legal responsibilities.

6 INFORMATION IN OTHER FORMATS

Patient information can be provided in other formats such as Easy Read, videos, websites or apps.

Any patient information published on websites or apps needs to link to the written patient information available on YourHealth. See the Appendices 2 and 3 for guidance on producing videos, apps and websites.

They still need to meet the trust criteria of being current, reviewed at least every 3 years, readable (reading age of 11 or lower), and accessible under the Accessible Information standard.

For patients who may not have access to smart devices or technology, the information available will need to be provided in a format they can access. Scripts and texts for these formats need go through the patient information review process.

Providing patient information in Easy Read will aid understanding for patients with learning disabilities or communication needs. The Learning Disabilities team can support staff in the production of Easy Read material. See Appendix 4 for further guidance on producing Easy Read patient information.

7 EDUCATION AND TRAINING REQUIREMENTS

The Patient Information Service will offer regular staff training sessions to increase awareness of Health Literacy and support authors in following the approved Trust process for creating and updating leaflets.

Leaflet authors and Patient Information Leads are advised to attend these training sessions, although they are open to all staff.

8 PROCESS FOR MONITORING COMPLIANCE

Element to be monitored	Lead	Tool	Frequency	Reporting arrangements
Monitor number of in-date leaflets across the Trust. All leaflets will have: - a unique number - a published date - a review date -available on YourHealth	Patient Information (PI) Librarian	Run report on YourHealth Safety Walkabouts-check for out of date leaflets Print room alerts us to out of date leaflets when submitted to them for printing Patient Partners to	Twice per year Problems reported to PI Librarian as they arise, who contacts PI Lead to rectify and then monitors.	Report to Consent & Mental Capacity Act Committee

		look for out of date leaflets		
Staff attendance at Health Literacy and implementation of PI policy training.	PI Librarian	Training register	Attendance	Report to Consent & Mental Capacity Act Committee
No leaflets to be visible online outside of YourHealth library.	PI Librarian	Audit with support from Web team	Bi-annually	Report to Consent & Mental Capacity Committee
CMG compliance with this policy	PI Librarian	Using data from the above monitoring CMG asked to provide list of PI leads and governance processes within each service	Annual	Report to Executive Quality Board which feeds into Quality & Outcomes Committee

9 EQUALITY ANALYSIS

- 9.1 The Trust recognises the diversity of the local community it serves. Our aim therefore is to provide a safe environment free from discrimination and treat all individuals fairly with dignity and appropriately according to their needs. As part of its development, this policy and its impact on equality have been reviewed and no detriment was identified.
- 9.2 The requirements for the Trust to comply with the Accessible Information Standard have been included in the policy. The leaflet template will include a statement inviting patients who require the leaflet in alternative formats to contact the Trust.

10 SUPPORTING REFERENCES, EVIDENCE BASE AND RELATED POLICIES

[Interpreting and Translation UHL Policy](#) (Reference B30/2015)

[New Interventional Procedures \(NIP\) UHL Policy](#) (Reference B17/2005)

[UHL policy for consent to examination or treatment](#) (Reference A16/2002)

[Managing conflicts of Interest in the NHS](#) (Reference A1/2017)

The Accessible Information Standard

<https://www.england.nhs.uk/ourwork/accessibleinfo/>

Patient Information Forum – Best practice <https://www.pifonline.org.uk/pif-resources/best-practice/>

11 PROCESS FOR VERSION CONTROL, DOCUMENT ARCHIVING AND REVIEW

This policy will be reviewed and updated in 3 years by the Patient Information Librarian, following appropriate consultation.

APPENDICES

Appendix 1 Guidance and checklist for submitting a leaflet (April 23)

Appendix 2 Guidance on producing patient information in video format

Appendix 3 Guidance on producing patient information: apps and websites

Appendix 4 Guidance on producing patient information in Easy read format

Appendix 1: Notes and guidance for producing patient information leaflets (updated April 2023)

All patient information is published on YourHealth:

yourhealth.leicestershospitals.nhs.uk/

Leaflet template: Our leaflet template is A4 to meet the Trusts digital strategy; the rollout of eConsent; and to help us meet the Accessible Information Standard. Leaflets will still always be available in paper format but should be designed to work better on-screen.

A Publisher template should be downloaded from [Insite](#) each time you create a leaflet so that you use the most up-to-date version of the template.

Check there isn't already a leaflet on this topic: We have too many leaflets across the Trust; make sure your proposed leaflet (and title) isn't repeating/duplicating another already in circulation. You can search the online store [YourHealth \(https://yourhealth.leicestershospitals.nhs.uk\)](https://yourhealth.leicestershospitals.nhs.uk/).

If this leaflet is relevant to other service areas, consult with colleagues in your area and across the Trust to ensure consistency of information and avoid duplication.

You could also use a leaflet produced by another organisation or charity as long as they are

- good quality,
- evidence-based,
- in-date, and
- meet accessibility standards.

Check there isn't one you could use instead of re-inventing the wheel! If it doesn't quite meet your needs, many organisations are happy for you to use their content in our format if you acknowledge them. You will need to get permission for this.

Map the journey that patients go through, including before and after they meet your service. Are they getting the right information, in the right amount at the right time? Discontinue any leaflets which are not needed.

Titles: Choose a short title that clearly reflects the content. Titles must be patient-friendly using plain English. Essential medical jargon can be used in brackets. It doesn't matter if this condition/ treatment is familiar to the patient or not. It doesn't matter if it will be explained verbally, these are not reasons to use medical jargon.

Staff and patients need to be able to tell from the title which part of the body the leaflet is for, so they can find it if they have lost paper one or know instantly if a leaflet is not for them.

Imagine you are a patient: from your consultation you know you are having a catheter inserted but have lost your paper leaflet. You search the online store YourHealth on Leicester's Hospitals website and get these results, but have no idea which one is correct for you, as there are too many other medical words:

- Having a suprapubic urinary catheter
- Cardiac catheterisation
- Indwelling catheter

- Caring for your foley catheter
- Having a nephrostomy catheter inserted
- Peripherally inserted central catheter

Good titles tell everyone what the leaflet is about, not just those who know what they are looking for. A more detailed explanation, including the 'official' title of the procedure, can be given in the introduction. The plain English explanation is first with medical words/terms in brackets, not the other way around.

How to choose your Service Area: You can select from the drop-down list on YourHealth. Go to the library <https://yourhealth.leicestershospitals.nhs.uk/library> and then within the CMG categories are Service Areas. Please let us know if you think there are errors or if your service isn't listed we may be able to create a new one.

Reducing language levels:

The average reading age of an adult in this country is 11 years of age. In Leicester, it is lower than that at 9.

- Take out formal language and put essential medical jargon in brackets.
- For health literacy best practice, use 'active' rather than passive sentences and straightforward words that someone with a reading age of 11yrs can understand. Imagine talking to someone this age when formulating sentences.
- Don't use a formal writing style. Use a simple, personal tone as if you were talking to the patient. Say 'happen' rather than 'occur'; 'before' rather than 'prior to'; 'needed' rather than 'required'; 'about' rather than 'approximately'; 'after your surgery' rather than 'post-operative'. Think about words that could be medical jargon without us realising – words like 'acute' are meaningless to many patients.

Make sure content follows the [NHS content style guide](#) before submitting.

Written information also has to function well as a 'stand-alone' piece. We have no way of knowing which information people have understood/ processed/ remembered after a verbal discussion. For informed consent patients have to be able to understand what they have read.

Accessibility: patient information needs to be accessible for people who have a variety of needs including using a screen reader.

- We don't use Title case in titles or headings. Unnecessary capital letters should be removed
 - Incorrect: Caring For A Child When They Have A Fever
 - Correct: Caring for a child when they have a fever
 - Incorrect: Are There Any Side Effects Or Risks?
 - Correct: Are there any side effects or risks?
- We use sans serif fonts as they are easier to read. Arial is used for the main text and Franklin Gothic for the main title.
- Don't use e.g or i.e – screen readers can mis-read these. Use for example/such as and that is

- *Italics* and BLOCK CAPITALS should not be used as they are difficult for people to recognise and read and for screen readers to read. If something needs to be stressed use **bold**. Be careful not to overuse it as it can be difficult to read.
- The 12 hour clock is used as that is easier to read e.g. opening times are 8.00am to 5.00pm not 8.00am to 17.00pm. 12.00midday not 12.00pm
- Numbers should be used instead of words e.g. 2 days **not** two days
- Underlining should not be used – difficult for screen readers.
- Patients have the right to access information in a format that best meets their needs. The Accessible Information Standard is our legal responsibility to provide information in the format the patient wants. AIS applies to people who are blind/visually impaired; deaf/hard of hearing; have a learning disability/neurodivergent.
- Large print leaflets can be created by staff from the editable version we send back to the author. These can be uploaded to YourHealth to ensure that they are available to all

Layout:

- Headings and sub-headings should be clear. Avoid uninformative and vague headings like 'Pain', 'Emotions', 'Sensitivity', 'Eating and drinking', 'Stockings': These headings are better:
 - How will I manage pain after surgery?
 - Dealing with your emotions before surgery
 - Exercises to help improve sensitivity
 - When can I eat after my procedure / Getting your appetite back after?
 - Reducing your risk of a blood clot after surgery
- There should be a space after every heading - normally size 12 (can be less if needed). Space before/after subheadings should be less to indicate it belongs under the earlier heading.

Inclusivity

- Gender references – remove gender references if not needed. Better to use women/men rather than female/male in most cases.

Keep it short and to the point: Patients constantly tell us to make leaflets shorter or they don't read them. Long leaflets can be costly when printing/ translated into other languages (**approximately 9 pence per word**). Patients don't need to know every detail – talk to real patients about what information they want/ need.

- Abbreviations should be written in full the first time they are used, and then can be used alone.
- Be consistent with terms used to avoid confusion.
- Sentences should be **short** – no longer than 20 words.
- Use question and answer format and bullet points wherever possible, sectioned into subheadings to make it easier to read.
- Leaflets should have plenty of 'white space'.

Evidence-based: Do you have the most up-to-date evidence and best-practice information available to put in the leaflet? You can contact one of the libraries for

help carrying out a literature search. The author should keep a reference list of the sources of evidence used.

Informed consent: If your leaflet is about treatment or a procedure you need to make sure any risks, complications, or side effects are clearly explained. This protects you and the trust from potential litigation and is also an important human right for the patient to be fully aware of all benefits, risks, alternative treatment options, and the consequence of choosing not to have the treatment or procedure (BRAN). With the rollout of e-consent patients will be sent information electronically. They have to confirm that they have read and understood the information so the information must be understandable and accessible for all.

The information in the leaflet should match the consent form/ sticker exactly. The possibility of risks/ complications should be backed up with evidence from studies.

The use of words such as ‘rare’/ ‘common’ etc. should match the scale used by the Royal College of Anaesthetists (RCoA) when communicating risks. See [here](#)

Include:

- Information about what will happen, written in chronological order.
- Will patients be asked to sign a consent form? Encourage them to ask questions to make sure they feel fully informed.
- Things to do/prepare before investigation or treatment. Instructions should be explained so patients know why it is important to follow them.
- How long will it last and what does it feel like? What sedation and/or pain relief will be offered?
- Length of stay in hospital. Considerations for going home – if can they drive or need someone to accompany them home.
- Recovery period and aftercare.
- Evidence-based benefits, risks and alternatives including the likely outcome of a ‘no treatment’ option (BRAN). Give statistics in a simple way and be specific.
- Side effects should be quantified (i.e weeks, months).
- What can go wrong? What symptoms should they look for afterwards and how to seek appropriate medical help.
- Contact details for further help and further sources of information (check telephone numbers, website, and email addresses to ensure they are still correct).

Peer review: Include other clinical experts in the development of your leaflet and ensure it is peer-reviewed by at least one suitably qualified colleague.

Talk to your service users: Plan how you will involve your patients, carers, and/or service users in the development of your information. All leaflets should have input from patients and should be checked for readability. Non-expert patients can also check that the language is easy to understand.

Patients should be involved in the writing of leaflets from the beginning. If this hasn't happened, at a minimum they should be allowed to give feedback on all new leaflets

and every 3 years when the leaflet is reviewed. A readers panel is available to provide feedback on patient information. Please contact the Information for Patients Team if you would like to have your leaflet reviewed by the panel before you make your final submission.

Measure the impact: Monitor the usefulness and impact of all leaflets. This should feed into the review process when leaflets are updated or inform your decision to archive the leaflet because it is no longer needed.

Copyright for images/ diagrams: Make sure you have copyright permission to use any images. Even if this is a leaflet you have been using for some time, unless you know where images came from, if you don't have permission to use it, it should be taken out.

Images available on the internet and by searching tend to be copyright protected unless they tell you otherwise. Some websites declare that you can use their images, they may display a creative commons licence or label them as open access. Otherwise, you will need to contact the owner and ask for permission, just acknowledging the source isn't enough.

You can use the image library on Insite to source images where possible. Images from the NHS photo library may be used. Graphics@uhl-tr.nhs.uk may be able to provide you with a drawing from their database or they can produce one for you. Or contact Photography@uhl-tr.nhs.uk if you would like photos to be taken.

Pictures, diagrams, and images are helpful to patients and should be used to help explain concepts. However, images shouldn't be used to add general interest. They should be used to aid understanding e.g. of body parts, procedures. They should be of appropriately high quality for printing or copying.

Checking content with Alliance Hospitals: If there is an equivalent service offered in the **LLR Alliance hospitals**, one leaflet should work for UHL and Alliance. Patients should receive the same information no matter where they are seen (small differences in practice can be described if needed). Contact details on the back page should reflect **all** hospitals sites that carry out the procedure.

Medicines: If there is information about medication or drugs, a pharmacist should check it.

Translating leaflets: You should consider translating any leaflet that may be useful for people who do not speak English. Our usual policy is to wait for a request, but if you know this leaflet might be relevant or would not be able to wait 2 weeks for the translation to arrive, please consider doing this now.

Please send us the translated version so we can also upload this to YourHealth too, for future use.

Likewise, if people with communication or learning difficulties may need this information you should consider creating an EasyRead version. This is also currently done through DA Languages.

Submitting your draft with a completed checklist:

- Send your completed draft following all of the above guidance, with one of the **checklists** below, to: InformationForPatients@uhl-tr.nhs.uk
- If your leaflet comes under Cancer or Haematology send it to: cancerinfo@uhl-tr.nhs.uk

The Patient Information Librarian will return this to you if standards are not met. Leaflets will be catalogued and assigned a corporate reference number before being published on UHL's store of patient information ([YourHealth](#)). You will then be able to use this online link to place orders of your updated leaflet with the print room or DA Languages for translations.

This team also maintains version control of all published UHL leaflets.

Checklist for submitting a leaflet to the Patient Information Library Service

Service areas are responsible for the content of their leaflets and should make sure they comply with the Patient Information policy before submitting. Please email InformationForPatients@uhl-tr.nhs.uk for queries and final submission

	Please complete/confirm below:
Is your leaflet: 1) Brand new 2) Update of an expired leaflet If the older one is/was on YourHealth please provide leaflet number. (If you need to make an amendment mid-review to a published leaflet on YourHealth, we can provide the correct editable version on request)	
Have you checked if there is a suitable leaflet produced nationally by a professional body or organisation which can be used instead (if so, use weblink checklist below):	
Author or lead reviewer:	
Patient Information Lead/ Co-ordinator: Or person we can contact if author is no longer available	
CMG:	
Service Area: Please select from drop-down list under the CMG category on https://yourhealth.leicestershospitals.nhs.uk/library	
Version number: If an expired leaflet didn't have a version number you can call the updated one version 1 or 2	
Previous reference number: On old-style A5 leaflets normally found on the last page – please state if none	
e-Consent: is this leaflet used in consent? Does it need to be uploaded to the e-Consent platform?	
Happy with 3 year review period:	
Confirm there is no jargon in the title (medical terms can be introduced in content): Title should describe purpose e.g. surgery, treatment, aftercare.	
Confirm language level is appropriate for national average reading age (less than 11 years):	
Includes contact number for patients with clinical queries: Avoid staff names as this makes the leaflet out of date when someone leaves	
Confirm you have checked the latest evidence/ NICE guidance etc.: Library can provide a literature search on request.	
Confirm it has been through appropriate review with colleagues and any CMG governance process: Draft leaflets for a procedure that is new to the Trust must be submitted and approved by NIPAG (New Interventional Procedures Authorising	

Group), before giving us the go-ahead to publish the leaflet. (We can check a leaflet before it is submitted for any formal governance/ NIPAG approval – please let us know).	
Confirm you have attempted to get patient feedback or involvement when creating this version:	
Confirm you have copyright permission for any images/ diagrams: If any images/diagrams were not produced in-house, even if they appeared in older booklets, you will need to confirm that you have permission to use them or they are copyright-free (just acknowledging the source isn't enough). Images/diagrams should be sharp and not blurry. If the diagram has any text, this must be of a satisfactory size for reading. Contact Graphics Team for help.	
Is this service available in an Alliance hospital? The leaflet must be sent to the Alliance contact/dept directly for their input (we can provide contact names if needed). Confirm this has been done: Our legal team confirms there should be one leaflet that works for UHL and Alliance. Patients should receive the same information no matter where they are seen (small differences in practice can be described if needed). Contact details on the back page should reflect all hospitals sites that carry out the procedure.	
If the leaflet includes information about drugs/ medication, you need to consult with an appropriate pharmacist (contact us if you don't know your CMG pharmacist). Confirm this has been done:	
Keywords: For your leaflet to be easily found from YourHealth, provide any keywords which may be used in a search, which don't appear in the title . We will add these against the upload entry created.	

To meet standards and avoid delays check the items below before submission:

- Have you used plain English throughout? Medical terms are in brackets after the plain English explanation
- Check font is consistent.
- Is there plenty of white space? Have you used bullet points to chunk information?
- Are headings understandable?
- Gender references – remove gender references if not needed. Better to use women/men rather than female/male in most cases.
- Keep sentences short where possible. Break long sentences into 2 where possible.
- Do not capitalise names of conditions/diseases unless they are written with a capital letter – have a look at how it is written mid-sentence on the NHS website.

- Do not capitalise generic drug names (unless it is a brand/trade name). For example, these drugs are not capitalised: paracetamol, ibuprofen, aspirin, methotrexate.
- Job titles should be lower case, and don't use plurals e.g. 'the Doctors or Nurses will tell you' should be 'the doctor or nurse will tell you'.
- Use an active voice. Try to use words like 'our' and 'we' where possible instead of talking in the third person e.g. 'We will let you know when', 'You can contact our service on,'
- Avoid using 'University Hospitals of Leicester NHS Trust' in full and instead use more informal 'Leicester's hospitals. Don't use UHL, LRI, LGH, or GH (these are internal abbreviations are not suitable for the public).
- Do not underline text (except weblinks).
- Do not use italics – not compatible with screen reading software.
- Do not put words/sentences in block capitals (only if needed for an abbreviation) - not compatible with screen reading software. Make bold to emphasise instead.
- Avoid hyphens/dashes e.g. '3-6 days' should be '3 to 6 days'.
- Use numbers instead of words e.g. 2 days (not 'two days').
- Don't use the 24-hour clock e.g. 09:00 to 16:30 should be written 9am to 4.30pm.
- Check for typos before submitting. Any corrections requested after publishing can take several months to action

Checklist if you wish to link to an external source instead of creating a UHL leaflet

You can use high-quality information produced by external organisations (such as reputable charities and professional bodies) instead of creating your own UHL version. A link to the leaflet/ information will still need to go on our open-access online store of information for patients at Leicester's Hospitals: [YourHealth](#). To create an entry for a web link, please complete the checklist below.

	Please complete/confirm below:
Name of organisation:	
Weblink title (you may want it to appear simply as the organisation name or another leaflet style title):	
Please provide the exact link you wish to redirect to here:	
Confirm terms & conditions of the organisation that allow you to link to this specific page on their site (you may need consent if linking to anywhere other than the homepage): <i>(Link to a webpage rather than uploading a pdf document from the organisation).</i>	
Lead reviewer from UHL (person who has reviewed and approved content):	
Patient Information lead (or person we can contact if above is no longer available):	
When will the information from the link need to be reviewed (is there a review date on information being linked to?):	
Confirm information meets UHL patient information policy e.g. it is evidence-based, up to date, uses patient-friendly language, and so on:	
Confirm it has been through appropriate review with patients, colleagues, and any governance arrangements within your service or CMG:	
CMG:	
Service Area: (please select from drop-down list under the CMG category on https://yourhealth.leicestershospitals.nhs.uk/library)	
e-Consent: is this information used in consent? Does it need to be added to the e-Consent platform?	
Keywords: for this entry to be easily found from YourHealth, provide any keywords which may be used in a search, which don't appear in the title.	

Appendix 2: Guidance on producing patient information in video format

The **first** question to ask is **who is your audience?** Is it patient or staff? **Do not** combine the two as they have very different needs and experience of the health situation you may be covering.

1. Equality Impact Analysis

Complete an Equality Impact Analysis. An EIA is a tool to ensure that the project does not discriminate against anyone and promotes quality of opportunity. Contact equality@uhl-tr.nhs.uk for advice and the paperwork.

All the following need to be considered when producing a video :

2. Strategy:

How will you create the film?

- Ensure you have a project manager to coordinate and manage the process
- Logistics,
- Location,
- Who is involved?
- Budget, deadlines, objectives
- Review period – how long will this video be used? When will you look at updating to be sure it is still relevant?

3. Production brief:

- What are the aims & objectives of the video?
- Who is the target audience: If it is for patients – who are they? Adult/child/culture all need to be considered.
- What is the key message of the film?
- How long will the video be – too long and people may switch off. How are you going to capture their attention and ensure they watch the video to the end?

4. Commission production company:

- Meet at least 2 to discuss vision and see what they suggest with regards to making the film
- There is a video recording suite available at the Clinical Education department based at Glenfield Hospital

5. Planning and scheduling:

- Once you have the go ahead think about who is going to be involved in the film – what is the staff availability?
- Where are you going to film?
- Length of time to film- it always takes longer than you think
- What is the location like with regards to sound, light, background noise?
- Check the background noise as this can change depending on the day/time. Have a contingency/back-up plan.

6. Accessibility

- How are you going to make the film accessible to all patients? It may be better to produce a series of short videos on a topic than one long one (chunking the information). This would be of real benefit for anyone with a learning disability or Deaf.
- Book interpreters (BSL) – there will be an additional cost for this which will need to be included in any budget. Details can be found on Insite <http://insite.xuhl-tr.nhs.uk/homepage/corporate/equality-diversity-and-inclusion/communication-support-and-interpreting/interpreting-and-translations>
- Use closed captions?
- Will a transcript be available? *
- Think about the title of the video it needs to be accessible and understandable to all patients

*Transcriptions and captions present the spoken content as written text. Providing the written text for the audio is important for people who:

- Cannot hear well or at all
- Speak English as a second language. Will you arrange for a translation of the text to be available so that people can watch the video and read the text in their own language?
- Want to grasp the content more quickly and efficiently
- Need to hear the content over distracting sounds wherever they are listening.
- People often prefer to watch videos with the sound off

Be mindful of the fact that for deaf patients written English is a 2nd language and therefore, may not be easily accessible for them.

7. Script and content:

Script should be

- engaging,
- interesting,
- emotive,
- natural,
- short, concise,
- simple, easy to understand.

Think about the language you use. Make it as natural and inclusive as possible – the language should not be overly formal. EDI can advise on terms to use if you are unsure. It should not use medical jargon or terms. Example: Don't use words like *prior to* – they would not be used in everyday conversation.

Think about using 'real people in real scenarios rather than a didactic delivery of information' (Arunangsu Chatterjeea, 2021)

Make sure the visual content matches script.

Script and content should be signed off in advance to ensure smooth running

8. Filming:

- Allow lots of time
- Have consent from everyone (GDPR). How long is your GDPR paperwork valid for?
- Reassure other people they are not being filmed.
- Check surroundings/background for anything you don't want in it.
- Have breaks!

9. Post production:

- Allow lots of time for editing, think about branding, music, voiceovers, subtitles, transcripts, accreditations, acknowledgements
- Signpost patients to further information. For leaflets there should be a signpost to [YourHealth](#), the trusts store of patient information
- How will patients be able to give feedback on the video?

10. Publishing and promoting:

- Have full sign off, if a private film how will patients access it?
- If a public film how will you promote it to patients, staff, public so they can find it easily without having to do too many clicks on a website.
- What site will it sit on? Consideration should be given to which site is used (e.g YouTube/vimeo) and can the target audience access it i.e. it will not be blocked?
- What other videos may be linked to it – will it look like we are endorsing them? Is the information in those videos correct?

11. Evaluation & success:

- Schedule and evaluation. Has it met the objectives? Check viewing figures and viewers' feedback

Sign off to ensure meets trust standards? CMG board? PI service? PIC?

BIBLIOGRAPHY

Arunangsu Chatterjeea, *. G. S. E. M. M. M.-I., 2021. The use of video for patient information and education: A scoping review of the viability and effectiveness of interventions. *Patient Education and counselling*, 104(-), pp. 2190-7.

Checklist for submitting a video to the Patient Information Library Service

Service areas are responsible for the content of their information and should make sure they comply with the Patient Information policy before submitting.

	Please complete/confirm below:
Video title:	
Please provide exact link you wish to re-direct to here:	
Patient Information Lead/ Co-ordinator: Or person we can contact if author is no longer available	
Confirm information meets UHL patient information policy e.g. it is evidence-based, up to date, uses patient friendly language and so on:	
Have you completed an Equality Impact Assessment?	
CMG:	
Service Area: Please select from drop down list under the CMG category on https://yourhealth.leicestershospitals.nhs.uk/library	
Version number:	
What is the review period? For written information it is 3 years	
Confirm there is no jargon in title:	
Confirm language level is appropriate for national average reading age (less than 11 years):	
Includes contact number for patients with clinical queries: Avoid staff names as this makes the information out of date when someone leaves	
Have you signposted to further written information available on YourHealth in the video: Provide the link to the information:	
If you are signposting to further information from an external organisation confirm terms & conditions of organisation allow you to link to this specific page on their site (you may need consent if linking to anywhere other than homepage):	
Confirm you have checked the latest evidence/ NICE guidance etc. (library can provide a literature search on request):	
Confirm it has been through appropriate review with colleagues and any CMG governance process:	
Confirm you have asked for patient feedback or involvement in the video production	
Confirm you have copyright permission for any images/ diagrams: If any images/diagrams were not produced in-house, even if they appeared in older booklets, you will need to confirm that you have	

<p>permission to use them or they are copyright-free (just acknowledging the source isn't enough)</p>	
<p>Is this service available in an Alliance hospital? The information must be sent to that department directly for their input. (We can provide contact names if needed). Confirm this has been done: Our legal team confirm there should be one leaflet that works for UHL and Alliance. Patients should receive same information no matter where they are seen (small differences in practice can be described if needed). Contact details on back page should reflect all hospitals sites that carry out the procedure.</p>	
<p>If the video includes information about drugs/ medication, you need to consult with an appropriate pharmacist (contact us if you don't know your CMG pharmacist). Confirm this has been done:</p>	
<p>Keywords: For your video to be easily found from YourHealth or online, provide any keywords which may be used in a search, which don't appear in the title.</p>	

Appendix 3: Guidance on producing patient information in apps and websites

The **first** question to ask is **who is your audience?** Is it patient or staff? **Do not** combine the two as they have very different needs and experience of the health situation you may be covering.

Equality Impact Assessment

Complete an Equality Impact Assessment. An EIA is a tool to ensure that the project does not discriminate against anyone and promotes equality of opportunity. Contact equality@uhl-tr.nhs.uk for advice and the paperwork.

All the following need to be considered when producing a website/app:

Strategy:

- Project manager needed?
- How will you create the app/website?
- Who is involved?
- Budget, deadlines, objectives
- Review period – how long will this app/site be used? When will you look at updating to be sure it is still relevant?

Production brief:

- What are the aims & objectives of the app/site?
- Who is the target audience: If it is for patients – who are they? Adult/child/culture all need to be considered.
- What is the key message of the resource?
- How are you going to capture their attention and ensure they use the resource?

How are you going to produce the resource?

- Website address, host, tech support

Planning and scheduling:

- Once you have the go ahead think about who is going to be involved in the resource – what is the staff availability?

Accessibility

- How are you going to make the resource accessible to all patients? Are videos included? If so see the video guidance document.
- Will it use the Browse Aloud accessibility software the Trust website uses
- Are there larger text formats / easy read formats available

Be mindful of the fact that for deaf patients written English is a 2nd language and therefore, may not be easily accessible for them.

Content:

Content should be

- engaging,
- interesting,
- short, concise,
- simple, easy to understand.

Think about the language you use. Make it as natural and inclusive as possible – the language should not be overly formal. It should not use medical jargon or terms. Example: Don't use words like *prior to* – they would not be used in everyday conversation. Content should be signed off in advance to ensure smooth running.

Post production:

Allow lots of time for editing, think about branding, accreditations, acknowledgements Signpost patients to further information. For leaflets there should be a signpost/links to [YourHealth](#), the trusts store of patient information.

Publishing and promoting:

- Have full sign off
- How are you going to promote it? Marketing.

Evaluation & success:

Schedule and evaluation. Has it met the objectives? Check viewing/download/access figures and users feedback.

Review

- How is the website going to be reviewed and maintained to ensure it remains current?
- Who will check that links work and how often will this be done?
- Apps need regular updates especially when new operating systems are developed. Who will do this? Is there a cost involved in this?
- Will the app be available for both Apple and Android devices?
- What tech support is available for the website/app/server if there is a problem?
- Is there a system for reporting a problem?
- For those patients who may not be able to use/have access to a device for websites and/or apps how will alternatives to this information be provided?

Signoff – who will signoff to ensure it meets trust standards

Checklist for submitting a website/app to the Patient Information Library Service

Service areas are responsible for the content of their information and should make sure they comply with the Patient Information policy before submitting.

	Please complete/confirm below:
Video title:	
Please provide exact link you wish to re-direct to here:	
Patient Information Lead/ Co-ordinator: Or person we can contact if author is no longer available	
Confirm information meets UHL patient information policy e.g. it is evidence-based, up to date, uses patient friendly language and so on:	
Have you completed an Equality Impact Assessment?	
CMG:	
Service Area: Please select from drop down list under the CMG category on https://yourhealth.leicestershospitals.nhs.uk/library	
What is the review period? For written information it is 3 years	
Confirm there is no jargon in title:	
Confirm language level is appropriate for national average reading age (less than 11 years):	
Includes contact number for patients with clinical queries: Avoid staff names as this makes the leaflet out of date when someone leaves	
Have you signposted to further written information available on YourHealth: Provide the link to the information:	
Signposting to external information: If you are signposting to further information from an external organisation confirm terms & conditions of organisation allow you to link to this specific page on their site (you may need consent if linking to anywhere other than homepage):	
Confirm you have checked the latest evidence/ NICE guidance etc. (library can provide a literature search on request):	
Confirm it has been through appropriate review with colleagues and any CMG governance process:	
Confirm you have asked for patient feedback or involvement in the resource production	
Confirm you have copyright permission for any images/ diagrams: If any images/diagrams were not produced in-house, even if they appeared in older booklets, you will need to confirm that you have permission to use them or they are copyright-free (just acknowledging the source isn't enough)	
Is this service available in an Alliance hospital? The information must be sent to that department directly for their input. (We can provide contact names if needed). Confirm this	

<p>has been done: Our legal team confirm there should be one leaflet that works for UHL and Alliance. Patients should receive same information no matter where they are seen (small differences in practice can be described if needed). Contact details on back page should reflect all hospitals sites that carry out the procedure.</p>	
<p>If the leaflet includes information about drugs/ medication, you need to consult with an appropriate pharmacist (contact us if you don't know your CMG pharmacist). Confirm this has been done:</p>	
<p>Have you a process in place to check currency and relevance? E.g checking for broken links etc</p>	
<p>Keywords: For your leaflet to be easily found from YourHealth, provide any keywords which may be used in a search, which don't appear in the title.</p>	

APPENDIX 4: GUIDANCE ON PRODUCING PATIENT INFORMATION IN EASY READ FORMAT

The Accessible Information Standard (2015) defines easy read information as ‘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.’

The following should be considered when creating easy read information:

1. **What is the necessary information?**

This is different to the relevant information. Including all relevant information could be overwhelming or cause confusion, try to keep to the key points that the reader needs to take from the document.

2. **How will it be formatted?**

Ideally, there should be an image to represent each point. Images should always be on the left and text on the right. Make sure it is clear what picture goes with what text. It can be useful to use a table to give clear boundaries for this. If you are not using a table, ensure there is white space between different points.

Make sure you have the rights to the images used. Taking pictures yourself is a great way of doing this. The Learning Disabilities Team and Patient Information Team have a photosymbols license; contact them if you are looking for specific pictures.

Text should be in a large font, at least size 14, and clear to read. Avoid italics or cursive fonts. We recommend Arial. Avoid design elements as these can distract from the information provided.

3. **How will it be worded**

Break down information into short, simple sentences, avoid jargon or complicated words. Any necessary complicated words or terms should be explained in simple language (i.e. Temperature is how hot or cold you are).

The Learning Disability Team are happy to support areas to develop easy read material and can be contacted on learningdisabilities@uhl-tr.nhs.uk

Where possible, Easy Read information should be reviewed by an expert by experience. UHL does not currently have a pathway for doing this, but the Learning Disability Team can help signpost staff to community groups who may be able to help.