AIS
accessible information standard FAQs

From 1 April 2016 healthcare professionals should, as a matter of normal routine, ask patients about any communication needs they may have and ensure that you record that information in your records.

This FAQ list has been prepared as part of an information pack for community pharmacies across Greater Manchester

This FAQ list covers the key learning points.

Find out about other planned AIS learning events.

Make sure you're ready for the 31 July deadline.

FAQS:
ABOUT THE AIS - THE ACCESSIBLE INFORMATION STANDARD
TOPICS COVERED:-

1. Which organisations does the Standard apply to?

2. What are the timelines for implementing the Standard?

3. Which patients are affected by the Standard?

4. How is information about the Standard being shared?

5. What impact will implementing the Standard have?

6. What is the impact if we don't follow the Standard?

7. Is there a requirement to report adherence to the Standard?

8. How do we implement the standard for existing patients?

9. How should we go about implementing the Standard?

10. Are there any 'quick wins' we could start doing now?

11. What advice and support is available and where can I find it?

12. How can I inform my patients about the Standard?

FAQS:
ABOUT THE AIS - THE ACCESSIBLE INFORMATION STANDARD

1. Who does the Standard apply to?

All organisations that provide NHS or adult social care must follow the Standard. This includes NHS Trusts and NHS Foundation Trusts, independent contractors, such as Community Pharmacies, Optometrists, GPs and Dentists alongside other care providers from the private and voluntary sectors.

2. What is the timescale for introducing the Standard?

• Organisations that provide NHS care are now preparing for implementation of the Standard, including through assessing their current systems and processes, and developing and commencing roll out of a local implementation plan.

• By 01 April 2016 organisations must have made necessary changes such that they routinely identify and record the information and communication needs of their patients or service users (and where appropriate their carers or parents) at first registration or interaction with their service.

• From 01 April 2016 services must identify the communication or information support needs of their existing registered or known patients or service users (and where appropriate their carers or parents) during routine appointments or interactions with the service.

• By 31 July 2016 all organisations that provide NHS care must be fully compliant with all aspects of the Standard.

FAQS:
ABOUT THE AIS - THE ACCESSIBLE INFORMATION STANDARD

3. Which patients are covered by the Standard?

The Standard applies to patients and service users who have information or communication needs relating to a disability, impairment or sensory loss.

It also applies to parents and carers of patients or service users who have such information or communication needs, where appropriate. Individuals most likely to be affected by the Standard include people who are blind or d/Deaf, who have some, hearing or visual loss, people who are deaf blind and people with a learning disability.

4. How is information about the Standard being shared?

NHS England has published an Implementation Plan and a Communication Plan to support implementation and awareness about the Standard.

There will be local training events for primary care healthcare professionals and all the documents regarding the Standard will be hosted on CPGM website and the CHL website.

Briefing materials have been shared with local Healthwatch organisations.

For patients, voluntary and community sector organisations including: Action on Hearing Loss, CHANGE, the RNIB, Sense and SignHealth are raising awareness with their members and networks both nationally and locally.

5. What impact will implementing the Standard have?

Implementation of the Standard aims to lead to improved outcomes and experiences, and the provision of safer and more personalised care and services to those individuals covered by the Standard.

It should lead to improvements in patient satisfaction and experience, patient safety, outcomes, for example, by providing greater concordance with medicines and greater understanding of self-care.

The Standard should lead to some specific and significant benefits, including, for example:

• Improvement in the effectiveness of care due to reducing barriers to communication.

• Improved patient safety due to greater understanding of information regarding care and treatment, including medicines management and follow-up advice.

• More appropriate use of services by patients in affected groups and reduction in urgent and emergency care usage.

• Improved health and wellbeing amongst patients in the key affected groups due to improved ability to participate in medication decision-making concordance along with increased take-up of early intervention and prevention opportunities as part of national programmes (for example NHS Health Checks and 'flu vaccination).

• Improvement in patient experience and satisfaction, and reduction in complaints and litigation associated with failure to provide accessible information and communication support.

FAQS:
ABOUT THE AIS - THE ACCESSIBLE INFORMATION STANDARD

6. What is the impact if we don't follow the Standard?

As compliance with the Standard is a legal duty (section 250 Health and Social Care Act 2012), organisations that do not comply with the Standard would be leaving themselves open to legal challenge. Non-compliant organisations should also be aware of the risk of complaints, investigation and negative media coverage.

There is significant interest in, and support for, the Standard from a range of voluntary sector organisations, including large national charities such as Action on Hearing Loss and the RNIB, who have committed to actively supporting and pushing for, implementation of the Standard locally as well as nationally.

The Standard should make a significant impact to the outcomes and experience of patients who need information in a different format or communication support, as well as improving patient safety and clinical effectiveness. For example, access to information in a format they can understand should help patients to manage their conditions better and to access services more appropriately.

We are confident therefore that community pharmacies will recognise the significant benefits to their patients and service users of implementing the Standard, and accept that compliance is in line with commitments to equitable, high quality, accessible and personalised care.

7. Is there a requirement to report adherence to the Standard?

There is no requirement for organisations to report on their adherence to the Standard (and no national audit tool is being created), the Standard includes requirements for organisations to publish or display an accessible communications policy which explains how they will follow the Accessible Information Standard, and an accessible complaints policy. The inclusion of these requirements is intended to support ease of compliance assessment by interested organisations, and to ensure that people with information and communication support needs are able to provide feedback to organisations about their experiences.

Commissioners must support providers to comply with the Standard, through contracts, frameworks and performance-management arrangements. Commissioners must also seek assurance from providers in this regard.

8. How do we implement the standard for existing patients?

You are not required to retrospectively trawl records to identify patients who may have information and communication needs.

Identification of patients with needs (and recording of how those needs should be met) must take place as patients first interact with services and for current patients opportunistically as they contact the service.

9. How should we go about implementing the Standard?

Implementing the Standard will vary according to the current position of each care provider; however, the following advice is provided with a view to assisting you to effectively implement the Standard.

• Think carefully about how to identify individuals with information and communication needs when they contact you. Who will ask, when, and how?

This is most likely to be the role of 'first point of contact' staff, for example pharmacy counter assistants, GP practice reception staff.

It can be helpful to agree on a 'standard question' which staff feel comfortable asking to patients and service users – the most appropriate question is likely to vary locally and depending on the nature of the service or patient group – services are advised to consult with relevant patient groups if possible.

• Brief staff about the Standard preferably via a face-to-face session (particularly for those most directly involved in its implementation), and follow-up with email information about what it will entail.

Include information about or signposting to local policies and procedures for arranging the production of information in alternative formats and communication support.

• Inform patients and service users about the Accessible Information Standard – via posters or onscreen information in waiting and reception areas. Encourage patients and service users to inform staff of their communication needs.

The posters and additional resources hosted on the CPGM website will help you with this.

• What training have individuals and teams had previously around disability-awareness or communication?

Consider if any individual staff are best placed to support people with particular or complex communication needs. Some patients and service users with communication needs may have particular difficulty communicating with some members of staff. Individuals with communication needs may request to see a particular member of staff who they know they can understand more easily.

• Identify which communication formats can be used. For example, email and text message (for people who are d/Deaf as an alternative to telephone and for people who are blind as an alternative to printed information), and large print.

• Can you easily provide labels in alternative formats which are easy to read and braille?

Consider any practical steps that staff will need to take to use or access these methods, for example, which printers can be used to produce large print labels and what email address should be used for emailing patients.

• You may wish to review the reports from organisations that piloted the draft Standard; these are available on the NHS England website.

Further advice and guidance will also be made available by NHS England, including case studies and tools to support implementation, during 2015/2016.

FAQS:
ABOUT THE AIS - THE ACCESSIBLE INFORMATION STANDARD

10. Are there any 'quick wins' we could start doing now?

To kick-start implementation of the Standard, and to begin to raise awareness amongst staff and patients or service users, some initial actions which could be taken include:

• Amending labelling and forms so that they are more accessible and include a question or section about information and communication needs

• Adding a statement prompting patients or service users to inform the service if they have any information or communication needs to letters and leaflets

• Displaying posters and information in different formats encouraging patients and service users to inform the service if they have any information or communication needs

• Checking to see if there is an induction loop system available (to support hearing aid users) and, if so, checking that it works and that staff know how to use it

• Engaging with local patient groups to seek their support for implementing the Standard – they may also have contacts into local voluntary groups with relevant expertise

• Review existing policy around use of email and text message to communicate with patients; these can be quick, cheap and convenient ways of contacting lots of people who have hearing or visual loss.