

**THIS POLICY IS CURRENTLY UNDER REVIEW**

# **Adult Social Care Accessible Information Policy**

<b>Document reference:</b>	<b>GCC-ASC-POL-016</b>
<b>Version:</b>	<b>2.0</b>
<b>Ratified by:</b>	<b>Adult Senior Management Team</b>
<b>Date ratified</b>	<b>27 April 2020</b>
<b>Originator/author:</b>	<b>Policy Review Officer</b>
<b>Responsible committee/individual:</b>	<b>Adult Social Care</b>
<b>Executive lead:</b>	<b>Joint Commissioner for Health and Social Care</b>
<b>Date issued: (New policy)</b>	<b>30 November 2016</b>
<b>Reviewed:</b>	<b>March 2020</b>
<b>Next review date:</b>	<b>By March 2023</b>

## **THIS IS A CONTROLLED DOCUMENT**

**Whilst this document may be printed, the electronic version maintained on the GCC intranet is the controlled copy.**

**Any printed copies of this document are not controlled.**

**It is the responsibility of every individual to ensure that they are working to the most current version of this document.**

## Adult Social Care Accessible Information Policy

Section	Contents	Page
1	Introduction	3
2	Purpose	4
3	Scope	4
4	Definitions	4
5	Legal context	4
6	Associated policies	5
	<b>Five mandatory requirements</b>	
7	1. Requirement to identify information and communication needs	5
8	2. Recording requirements	6
9	3. Requirement for the record to have a highly visible flag or alert	6
10	4. Requirement to include recorded data about information and / or communication needs within existing data sharing processes	6
11	5. Requirement to meet information and / or communication needs	7
12	Commissioned services	7
13	Dissatisfaction / complaints	7
14	Implementation	8
15	Monitoring and review	8
<b>Appendix</b>		
1	Exclusions	9
2	Definitions	10

## **1. Introduction**

- 1.1 The Equality Act 2010 creates a duty for all service providers to take steps or make reasonable adjustments to avoid putting disabled people at a substantial disadvantage when compared to people who are not disabled. This duty is the primary legal framework for the NHS Accessible Information Standard (the AIS) which was introduced in July 2016.
- 1.2 The AIS is mandatory for all providers across the NHS and publicly funded adult social care services. This includes care homes, nursing homes and day care as well as providers of adult social care from the voluntary and community or private sectors.
- 1.3 AIS requirements are intended to ensure that people who need to have information in a particular format and / or support to communicate because of a disability or sensory loss receive:
  - information in a form that they can access and understand, and
  - any support that they need to communicate with adult social care / NHS staff
- 1.4 The AIS is of particular relevance to people who:
  - are blind or have some visual loss,
  - are deaf or Deaf, have some hearing loss, or are deafblind,
  - have a learning disability;
  - have aphasia,
  - have autism
  - have a mental health condition which affects their ability to communicate.
- 1.5 There are five mandatory AIS requirements for meeting the information and / or communication needs of people with a disability or sensory loss:
  - to identify needs
  - to record needs
  - to flag needs so that they are highly visible within the record
  - to share information about needs
  - to take steps to meet needs

## **2. Purpose**

- 2.1. The purpose of this policy is to set out how Gloucestershire County Council (the Council) will implement the five mandatory AIS requirements across Adult Social Care Services.

## **3. Scope**

- 3.1. AIS requirements described in this policy apply to:

- Council staff involved in any way with Adult Social Care services.
- any individual or body to whom the Council has delegated its authority for carrying out its adult social care duties and functions.
- anyone using adult social care services who has information or communication needs relating to a disability, impairment or sensory loss who is:
  - an adult in need of care and support
  - the carer of an adult in need of care and support
  - the parent of a service user under 18, for example a young person in transition.

- 3.2 Specific exclusions from AIS requirements are listed at Appendix 1

- 3.3 Council staff responsible for commissioning services which are subject to the AIS will ensure that service providers are aware of the need to comply with AIS requirements. Staff will seek assurance and evidence from providers that demonstrate their compliance with the standard. (Section 8 AIS specification)

## **4. Definitions**

- 4.1 Definitions of specific terms used within this policy are provided at Appendix 2.

## **5. Legal Context**

- 5.1 Acts and guidance of particular relevance to the AIS:

- The Equality Act 2010: section 149 Public Sector Equality Duty
- The Health and Social Care Act 2012: section 250 Powers to publish information standards
- Data Sharing Code of Practice (2011) issued by the Information Commissioner's Office under section 52 of the Data Protection Act 1998

- 5.2 Acts which underpin Adult Social Care functions include but are not limited to:

- The Care Act 2014
- The Mental Health Act 1983
- The Mental Capacity Act 2005

## **6. Associated policies**

6.1 Council policies relevant to the application of the AIS within adult social care include but are not limited to:

- Assessment and Eligibility policy
- Personal budgets planning and review policy
- Direct payments policy

## **7. Requirement to identify information and communication needs**

7.1. The AIS applies to all users of Adult Social Care:

- adults in need of care and support
- carers of adults in need of care and support
- a parent of a service user under 18, for example a young person in transition.

In some instances both an adult in need of care and support and their carer may have particular needs for information and communication.

7.2 At first contact or if this is not practicable at the next interaction with the individual, the individual will be asked to identify whether they have any information and / or communication needs related to a disability or sensory loss.

7.3 Where needs are confirmed, the individual will be asked what information format and / or communication support is required to meet those needs.

7.4 Enquiries will be directed to the individual except in exceptional circumstances where it is impracticable to do so. In these circumstances, information will be sought from someone who knows the individual well, for example a family member or carer.

7.5 It will not be assumed that an individual who had no needs at a previous contact continues to have no needs, or that identified needs remain unchanged.

7.6 Information and communication needs will be reviewed during subsequent contacts, for example when a support plan is reviewed, to ensure that information reflects current needs.

## **8 Recording requirements**

8.1 Where needs are identified, the individual's social care record will include:

- the type of support required
- how needs are to be met
- where information was provided by anyone other than the individual concerned, the name of the person who provided the information and the reason why.
- where relevant, confirmation that the individual has given their specific consent to communication support being provided by a family member or any other person who is not a registered communication professional.

8.2 Information and communication needs will be recorded in the support / carer plan.

8.3 The social care record and plan will be amended when it is identified that information and / or communication needs have changed.

## **9 Requirement for the record to have a highly visible flag or alert**

9.1 An electronic flag (or equivalent alert for paper based records) will be placed on the individual's social care record to ensure that any identified needs are highly visible to anyone accessing the record.

9.2 The flag / equivalent alert will be amended when it is identified that information and / or communication needs have changed.

## **10 Requirement to include recorded data about information and / or communication needs within existing data sharing processes**

10.1 Recorded data about an individual's information and/or communication support needs will be shared with other providers where this is necessary to ensure that the individual's care and support or health needs can be met. Examples of routine data sharing include but are not limited to referral or handover processes or when responsibility for meeting social care needs is transferred to another local authority.

10.2 All personal information will be shared in line with existing legislation and treated with respect in accordance with the Data Protection Act 2018.

## **11 Requirement to meet information and / or communication needs**

- 11.1 Identified needs will be met in an appropriate way and without unreasonable delay, i.e. the individual will receive:
- information in an alternative format which they are able to access, and
  - the support they need to communicate with staff.
- 11.2 Individuals who require an interpreter or other communication professional will be offered a suitably skilled, experienced, appropriately qualified and screened professional.
- 11.3 If the individual wishes to receive communication support from anyone other than a professional as described at paragraph 11.2, their wishes and explicit consent must be documented in their record.

## **12 Commissioned services**

- 12.1 Providers of commissioned services which are subject to the AIS will be made aware of the need to comply with AIS requirements and will be asked by commissioners to evidence their compliance with each of the five mandatory requirements.

## **13. Dissatisfaction / complaints**

- 13.1. As a first step, the Council encourages individuals who are dissatisfied with Adult Social Care services or with an Adult Social Care decision to:
- discuss their concerns with the staff member they are dealing with or
  - ask to speak to the staff member's manager instead

The Council will try to resolve concerns quickly or explain why this is not possible.

- 13.2 If the concern is not resolved, or if preferred, individuals may use the Council's complaints procedure to make a complaint.
- 13.3 Any individual who wishes to make a complaint will be provided with information about how to do so. Information will be provided in an accessible format. Communication support will be provided if the person has identified communication needs.

## **14. Implementation**

14.1. The requirements of this policy will be communicated:

- to staff
- to any external person or organisation authorised to carry out assessment, support planning and / or review processes on behalf of the Council.
- to providers of independent and third sector providers commissioned to provide adult social care on behalf of the Council.

14.2 Policy will be published on the Council's website.

## **15. Monitoring and Review**

15.1. This policy will be monitored through:

- manager/senior practitioner oversight of adult social care processes
- internal audit of adult social care records
- such processes as have been agreed with external persons or organisations authorised to carry out assessment, support planning and review on behalf of the Council.
- routine contract monitoring activities by commissioners.

15.2. Policy will be reviewed by 31 March 2023.



## Appendix 1– Exclusions

The following exclusions are reprinted from section 5.6 of the NHS England DCB1605

*Accessible Information: Specification v 1.1* which is available in full at this link:

<https://www.england.nhs.uk/wp-content/uploads/2017/08/accessilbe-info-specification-v1-1.pdf>

### 5.6.1 Key aspects determined to be out of the scope of this standard

The following aspects, which may be considered relevant to improving the accessibility of health and social care, are explicitly out of scope of this standard:

- The needs or preferences of staff, employees or contractors of the organisation (except where they are also patients or service users (or the carer or parent of a patient or service user)).
- Recording of demographic data / protected characteristic strand affiliation.
- Recording of information or communication requirements for statistical analysis or central reporting.
- Expected standards of general health and social care communication / information (i.e. that provided to individuals without additional information or communication support needs).
- Individuals' preferences for being communicated with in a particular way, which do not relate to disability, impairment or sensory loss, and as such would not be considered a 'need' or 'requirement' (for example a preference for communication via email, but an ability to read and understand a standard print letter).
- Individuals who may have difficulty in reading or understanding information for reasons other than a disability, impairment or sensory loss, for example due to low literacy or a learning difficulty (such as dyslexia) (as distinct from a learning disability).
- Expected standards, including the level of accessibility, of health and social care websites.
- 'Corporate' communications produced / published by organisations which do not relate to direct patient / service user care or services, and do not directly affect individuals' health or wellbeing.
- Implementation of the Equality Act 2010 more widely, i.e. those sections that do not relate to the provision of information or communication support. This exclusion includes other forms of support which may be needed by an individual due to a disability, impairment or sensory loss (for example ramps or accommodation of an assistance dog).
- Foreign language needs / provision of information in foreign languages – i.e. people who require information in a non-English language for reasons other than disability.  
**Note:** the Council will meet foreign language needs within its AIS duties.
- Matters of consent and capacity, including support for decision-making, which are not related to information or communication support.
- Standards for, and design of, signage.

## Appendix 2– Definitions

Term	Definitions
Accessible information	Information which is able to be read or received and understood by the individual or group for which it is intended.
AIS	The NHS Accessible Information Standard
Alternative format	Information provided in an alternative to standard printed or handwritten English, for example large print, braille or email.
Aphasia	A condition that affects the brain and leads to problems using language correctly. People with aphasia find it difficult to choose the correct words and can make mistakes in the words they use. Aphasia affects speaking, writing and reading.
Autism	A condition that someone is born with that affects their ability to communicate and interact with the world around them. Autism covers a wide range of symptoms and affects people in different ways. Some people need much more help and support than others.
Carer	Someone who provides unpaid support to a partner, family member, friend who is ill, struggling or disabled and could not manage without this help. This is distinct from a care worker who is paid to support people or does so under a voluntary contract.
d/Deaf	<p>A person who identifies as being <b>deaf</b> with a lowercase d is indicating that they have a significant hearing impairment. Many deaf people have lost their hearing later in life and as such may be able to speak and / or read English to the same extent as a hearing person.</p> <p>A person who identifies as being <b>Deaf</b> with an uppercase D is indicating that they are culturally Deaf and belong to the Deaf community. Most Deaf people are sign language users who have been deaf all of their lives. For most Deaf people, English is a second language and as such they may have a limited ability to read, write or speak English.</p>
Disability	The Equality Act 2010 defines disability as follows, “A person (P) has a disability if — (a) P has a physical or mental impairment, and (b) the impairment has a substantial and long-term adverse effect on P’s ability to carry out normal day-to-day activities.”

Disabled people	Article 1 of the United Nations Convention on the Rights of Persons with Disabilities has the following definition, "Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others."
Flag	<p>A way of highlighting a record so that information is obvious to anyone accessing the record. This is usually:</p> <ul style="list-style-type: none"> <li>• an electronic message on a database record or</li> <li>• some way of highlighting a paper record - like using different coloured or larger / bold type, or by using a sticker.</li> </ul>
Learning disability	A term that is used to describe a brain impairment that may make it difficult for someone to communicate, to understand new or complex information, or to learn new skills. The person may need help to manage everyday tasks or live independently. Learning disability starts in childhood and has a lasting effect on a person's development. It can affect people mildly or severely.
Transition	The process by which young people with health or social care needs move from children's services to adult services. It should be carefully planned, so that there are no gaps in the care young people receive. Young people and their families should be fully involved in the planning process.