



**Accessible Information – CSP043**

## Policy and Procedure

<b>Document Title</b>	Accessible Information – CSP043
<b>Version number</b>	V1
<b>Version date</b>	21/07/2021
<b>Author Title &amp; Issuing Department</b>	Head of Quality and Compliance – Care and Support
<b>Target Audience</b>	Care and Support staff team

<b>Approved By</b>	
<b>Date Approved</b>	
<b>Review Date</b>	24 months from issue date of approval

<b>Links to Regulatory Standards – Economic/ Consumer Standards</b>	<ul style="list-style-type: none"> <li>• Section 250 of the Health and Social Care Act 2012</li> <li>• The Mental Capacity Act 2005</li> <li>• The Equality Act 2010</li> </ul>
<b>Outcomes for Customers</b>	Every service user should be given full information about care options that affect them and on which they can base their choices, including decisions about consent.
<b>How were tenants, residents and service users involved in the review/development of this document</b>	Service user consultation completed via Community and Engagement team, management consultation and approval completed
<b>Training Provision</b>	<p>The managers of the relevant service areas within Care and Support will be responsible for cascading the policy to their teams.</p> <p>Easy read software in house training Widget software in house training Makaton</p>
<b>Links to the Business Plan</b>	
<b>Links to Key Values</b>	Integrity, Diversity, Openness, Accountability. Clarity and Excellence

## Version Control

Version	Revision Date	Author: Job Title	Change Description
V1			

## 1. Introduction

- 1.1 EMH Care and Support believes that every service user should be given full information about care options that affect them and on which they can base their choices, including decisions about consent. In this context, the organisation recognises that the full and frank provision of information is vital if service users are to live with dignity, autonomy, independence and respect.
- 1.2 The organisation understands its duty under human rights legislation to ensure that information is communicated freely and in good faith and in a format that people can understand. It also recognises its duties under the following legislation:
  - Section 250 of the Health and Social Care Act 2012 requires all organisations that provide NHS services or publicly funded adult social care to follow the accessible information standard by law.
  - The Mental Capacity Act 2005 requires all adult social care organisations to ensure that the rights of those who lack capacity are safeguarded.
  - The Equality Act 2010 requires providers of services to make 'reasonable adjustments' in order to avoid putting a disabled person at a substantial disadvantage when compared to a person who is not disabled.

## 2. Definitions and Scope

- 2.1 This policy applies to all people who receive support from EMH Care and Support.

## 3. Specifics of the Policy

- 3.1 The organisation recognises that effective communication is fundamental to the provision of information. All service users have the right to have their health and social care needs met, including any needs that arise from cognitive or sensory disabilities that affect their ability to communicate.
- 3.2 Where it applies, EMH Care and Support understands that under the accessible information standard adult social care providers must provide adequate information to service users and ensure that they receive appropriate support to help them to communicate if they need it.
- 3.3 In addition to the above, this organisation also understands that communicating information and obtaining consent are key elements in complying with the registration requirements of the Care Quality Commission (CQC). **Appendix 1 – 'CQC regulation and the five key questions test'**

## 4. Implementation

- 4.1 This policy applies to all EMH Care and Support providing support within our services.
- 4.2 All staff should be aware that failure to comply with this policy, including any processes, procedures or arrangements which are put in place under it, will be investigated and may lead to disciplinary action being taken
- 4.3 This policy will be reviewed every 24 months unless there is a legislative change
- 4.4 All new staff will be made aware of the organisation's policies and procedures with regard to the provision of communication support and information during induction.  
Induction will include guidance for all new staff in providing person-centred care with dignity and respect, including the communication of information to service users and the obtaining of consent.
- 4.5 Care staff will be trained to enable the effective implementation of the accessible information standard, including training in the assessment of communication needs and in methods of communication support.
- 4.6 All staff will be trained in the requirements of the Mental Capacity Act.

## 5. Responsibilities

- 5.1 Registered Manager(s), Assistant Manager(s), Team Leader(s) and Care Coordinator(s) shall ensure all staff providing support in our services are aware of and implement this policies contents and supporting procedures.

### 5.2 Management responsibilities

Managers and supervisors in the organisation have a duty to:

- regularly audit the use of this policy
- monitor complaints and compliments relating to information, communication and consent issues, taking action as required and fully investigating any complaints.

### 5.3 Staff responsibilities

Staff in this organisation have a duty to:

- recognise the importance of providing information, of communicating effectively and of obtaining consent, treating these areas as a priority for care and acquainting themselves with the procedures for obtaining consent operated in this organisation
- comply fully with organisational policies on confidentiality, information governance, record-keeping and data protection
- keep their training up to date and attend appropriate training relating to the provision of information to service users and effective communication.

## 6. Associated Documents

- ▶ Gaining consent policy
- ▶ Mental capacity policy
- ▶ Data protection policy
- ▶ Complaints policy
- ▶ Support Planning, Risk Assessment and Review
- ▶ The Mental Capacity Act 2005
- ▶ Section 250 of the Health and Social Care Act 2012
- ▶ The Equality Act 2010
- ▶ Mental Capacity and Best Interest form CSF408

## 7. Policy

### 7. Accessible communication for the people we support

- 7.1 EMH Care and support believe in meeting the communication needs of its service users, carers and relatives, and providing them with accessible information in a format that they can understand.
- 7.2 Meeting the communication needs of our service users is regarded as a key priority in the provision of safe, effective care which enhances people's dignity and independence. In this respect the organisation will take every action necessary to achieve and maintain compliance with the accessible information standard.
- 7.3 Service users' information and communication needs will be identified and recorded as part of their need's assessment, both at the first interaction or registration with the service and as part of on-going routine interaction and reviews with service users.
- 7.4 Information and communication needs will be flagged in service users' documentation so that they are prominent. They will be made 'highly visible' in care plans so that it is clear to all care staff how the needs should be met.
- 7.5 The information and communication needs of carers and relatives will be identified, recorded, flagged, shared and met wherever necessary.
- 7.6 Staff should take every opportunity to provide service users with adequate information about their care and treatment and to support their communication needs in line with their care plan.
- 7.7 Where required, professional communication support should be sought or information presented in alternative formats, such as braille or large type, for service users with visual disabilities. This should be provided promptly and without unreasonable delay.
- 7.8 Full support will be provided to service users with sensory, cognitive or physical disabilities that affect their ability to communicate and access information.

- 7.9 A range of aids, equipment, specialist support and advocacy are available for service users and staff to use as resources to enhance communication.
- 7.10 Service users should be provided with information about any proposed care or treatment in an accessible way, and in formats that they can understand, as part of the process of obtaining informed consent. Sufficient information will be provided to ensure that they can give informed consent if they wish to.
- 7.11 Information about care or treatment should be provided by a person who has sufficient knowledge about the service user and about the care, treatment and support options they are considering, in order that the service user can ask questions if they wish to.
- 7.12 The information provided to the service user about the care or treatment should include information about the risks, benefits and alternative options as well as information about how they can withdraw consent if they so wish.
- 7.13 Service users should always be given enough time to absorb information, which should be provided in an unhurried and patient way using all relevant forms of communication.
- 7.14 Where a service user is suspected of lacking the capacity to make an informed decision relating to a consent issue then a 'best interests' decision may have to be made for them – in such cases the full provisions of the Mental Capacity Act 2005 should be followed. The fact that they have not been able to give their valid consent should be fully recorded using an appropriate form.
- 7.15 Where a service user is found to lack the capacity to give their consent over one particular care or treatment option, it should never be assumed that this applies to all decisions.  
  
Further appropriate attempts should be made to inform them about treatment options and to obtain informed consent.
- 7.16 A service user must be assumed to have capacity unless the contrary is established and should not be treated as unable to make a decision unless all practical steps have been taken without success to help them take the decision.
- 7.17 Advocacy will be provided or sought for any service user who might require it.

## **8. Ongoing monitoring, information sharing and compliance**

- 8.1 When they have consent or permission to do so, and where it is compliant with data protection and information governance policies, staff should share details about a service user's communication or information needs with other NHS, local authority and adult social care providers where necessary.
- 8.2 Feedback from surveys, inspections, complaints and from service users themselves will be used to identify areas of improvement in meeting people's information and communication needs and in meeting the accessible information standard.
- 8.3 Quality assurance mechanisms will be in place to ensure that the organisation is meeting the information and communication needs of people. This will include regular audit and the inclusion of information and communication needs in annual service reviews.

- 8.4 Service users, carers, relatives and advocates should be encouraged and supported by staff to make a suggestion for improvement or complaint if they feel that the organisation is in any way failing to effectively support people with information or communication needs.
- 8.5 EMH Care and Support has a clear complaints procedure in place, and information about this should be communicated to all service users in various formats. Wherever a person needs additional information or help to make a complaint or raise a concern or pass on feedback, this should be supported by staff.
- 8.6 The provision of adequate levels of information and communication support will be included as a standing item in surveys and feedback questionnaires for service users and relatives.

## Appendix 1

### **CQC regulation and the five key question test**

#### *Fundamental standards requirements*

The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 apply to adult social care service providers. The regulations include the fundamental standards, below which care must not fall. They are enforced by the CQC through inspection and registration.

With respect to consent to care, the following regulations apply:

- Regulation 9: Person-centred care states that the care and treatment of service users must be appropriate, meet their needs and reflect their preferences.
- Regulation 11: Need for consent states that the care and treatment of service users must only be provided with the consent of the relevant person.

*Guidance for providers on meeting the regulations*, published by CQC in March 2015, provides information on how service providers should comply with the regulations.

The guidance states that:

- Each person using a service, and/or the person who is lawfully acting on their behalf, must be involved in an assessment of their needs and preferences as much or as little as they wish to be.
- When a person is asked for their consent, providers should give them relevant information and support when they need it to make sure they understand the choices available to them.
- Where they lack capacity, service users must be assessed and care planned according to the best interests principles of the Mental Capacity Act 2005.
- Discussions about consent must be held in a way that meets people's communication needs. This may include the use of different formats or languages and may involve others, such as a speech and language therapist or independent advocate.