

The Accessible Information Standard in Lewisham

Following the introduction of the NHS Accessible Information Standard (AIS) on 31st July 2016¹, Healthwatch Lewisham embarked on a project to assess the impact on local patient experience, and to assess local implementation of the standard.

The aim of the AIS is to ensure that people with a disability or sensory loss are given information in a way they can understand. It is now the law for the NHS and adult social care services to comply with the standard.

This report summarises the findings of experience of local patients in the relation to the AIS. To collect experiences, Healthwatch Lewisham conducted focused engagement with organisations supporting people with sensory loss, people with learning disabilities and representatives of those groups. In total, we spoke to 76 people and engaged with eight organisations and community groups including: SELVIS, Headlines, Headway SELNWK, Wheels for Wellbeing, Feeling the Noise, Socialeyes, Lewisham Deaf Community Association, Action for Hearing Loss and Lewisham Speaking Up.

Healthwatch set out to:

- Engage with people with additional communication needs to identify their experience in relation to the Accessible Information Standard.
- Assess implementation of the standard by local providers.
- Raise local providers' awareness of the standard.



¹ <https://www.england.nhs.uk/ourwork/accessibleinfo/>

Findings

- Many people with additional communication needs may not have the confidence to assert their needs or ask for help. Many may not be aware of patient choice or have access to relevant information.
- People, especially those with long-term conditions requiring frequent contact with services, feel they often repeat themselves to the same providers and need to re-explain their communication needs. A system that flags up their communication needs at a point of contact, as suggested by the AIS, would help to improve their experience and enable easier communication.
- Many disabled people are continuing to be contacted by means that are not accessible for them, such as small print letters for people with sight loss and using the telephone to contact deaf people. Some people with sight loss rely on other people to read out letters for them which may result in missed appointments and cause a delay of treatment. Provision of the accessible communication between patient and the service is vital in ensuring equity of access.
- People with sensory loss or learning difficulties reported that the process of getting to their appointment from the reception area posed a great barrier. Many felt lost and confused, especially in larger waiting areas shared by many clinics and services and had difficulty orientating themselves.
- People would value large print information provided on medicines with a minimum of font size 18. This would benefit people with sight loss and people with learning disabilities to better self manage their health and prevent any safeguarding concerns.
- Many people with sight loss appreciated emails and texts instead of receiving letters.
- Deaf people reported difficulties in accessing Sign Language interpreters, for example during social care assessments or during medical appointments. A system where a deaf person receives a confirmation of the interpreter being booked would be helpful, as well as fast-track appointments if the cancellation was due to lack of an interpreter.
- People born deaf may have low literacy skills and especially require the presence of a Sign Language interpreter. Alternative methods such as using pen and paper to communicate in writing or typing using computers may depend on the individual's literacy skills and may not be suitable.
- People with sight loss experienced difficulties in University Hospital Lewisham around food and medicine. Some of the issues reported were being unable to read the menu or not knowing whether their food or drink had arrived. They also explained that they were not being made aware when medicines were being delivered to them.
- People with severe communication needs rely on carers support and value help in supporting their communication.

In their own words:

“You feel lost. It is confusing when nurses call your name. You don’t know which way to go or who to follow. Even the most capable people feel disempowered and anxious.”

“We had an appointment to see consultant, however it was postponed twice because of poor management with Language Line.”

“I feel asking for a longer appointment time or an interpreter would be too much to ask for. People don’t like to ask.”

Key Recommendations

Healthwatch Lewisham recommends that providers and commissioners within Lewisham incorporate the following recommendations:

- Offering assistance to people with sensory and learning disabilities to physically guide them to the consultation rooms from the reception would improve patients’ experience. Special emphasis on supporting disabled patients to the appointments should be made in busy waiting rooms.
- Routinely asking patients with sensory and learning disabilities if they require alternative communication methods and recording those in a set manner would ensure people’s communication needs are met.
- Introducing a flagging system to alert NHS and social care staff about a disabled patient’s alternative communication needs would be beneficial.
- Provision of alternative communication methods such as large print (18 size font), text message, email, easy-read and Sign Language interpreters for people would ensure equity of access.
- Provision of sight and hearing loss awareness training for front line staff would improve patient experience.
- Sign Language interpreters to be booked routinely for patients that require them with confirmation sent to patients for their reassurance.
- Provision of large print (minimum 18 size font) on medicines would ensure people with sight loss and with learning disabilities can read information on their medicines and accurately and safely manage their health.

January 2018

