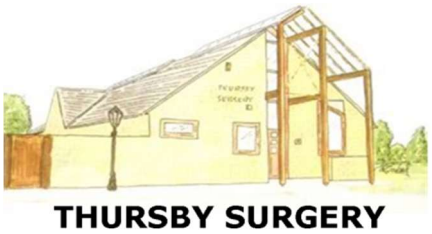

Accessible Information Standard (AIS) Policy

Document Control

Date	Version Created By:	Comments
03.08.26	Thursby Surgery	Introduced Policy

Accessible Information Standard (AIS) Policy

1. Policy Statement

Thursby Surgery is committed to ensuring that all patients receive information in a format they can understand and any communication support they need to access our services. We recognise that patients with disabilities, impairments or sensory loss may require information or communication support and are committed to meeting our obligations under the NHS Accessible Information Standard (AIS), the Equality Act 2010 and the Health and Social Care Act 2012.

The practice will identify, record, flag, share and meet the communication and information needs of our patients to ensure equitable access to healthcare.

2. Purpose

The purpose of this policy is to:

- Ensure compliance with the NHS Accessible Information Standard (SCCI1605).
- Reduce barriers to accessing healthcare.
- Promote equality, dignity and inclusion.
- Ensure staff understand their responsibilities.
- Improve communication with patients, carers and representatives.

3. Scope

This policy applies to:

- All permanent, temporary and locum staff.
- GPs.
- Nurses.
- Healthcare Assistants.
- Reception and Administration staff.
- Practice Management.
- Contractors working on behalf of the practice.

4. Definition

The Accessible Information Standard is a legal requirement for all NHS organisations to ensure that patients with disabilities, impairments or sensory loss receive information they can access and understand and any communication support they require.

This includes patients with:

- Hearing loss or deafness.
- Visual impairment.
- Learning disability.
- Autism.

- Dementia.
- Speech or communication difficulties.
- Other communication needs related to disability.

5. Practice Responsibilities

The practice will:

- Ask patients if they have any communication or information needs.
- Record these needs on the patient's clinical record.
- Highlight communication needs so staff can easily identify them.
- Share communication needs appropriately when referring patients to other NHS providers.
- Provide information in accessible formats whenever reasonably practicable.
- Make reasonable adjustments to support patients accessing our services.

6. Identifying Communication Needs

Staff will ask patients about their communication needs:

- When registering with the practice.
- When booking appointments.
- During consultations.
- When communication difficulties become apparent.
- When notified by another healthcare provider or carer.

Patients may require:

- Large print correspondence.
- Easy Read information.
- British Sign Language (BSL) interpreter.
- Spoken language interpreter.
- Lip reading support.
- Email communication.
- Text message reminders.
- Communication through a nominated representative where appropriate.

7. Recording Communication Needs

Communication needs will be recorded using the appropriate clinical codes and alerts within the practice clinical system.

Examples include:

- Preferred language.
- Interpreter required.
- Hearing impairment.
- Visual impairment.

- Requires large print.
- Requires Easy Read.
- Requires BSL interpreter.
- Requires communication via carer or advocate.

Communication needs will be reviewed regularly and updated whenever necessary.

8. Meeting Communication Needs

Where reasonably practicable, the practice will provide:

- Large print letters.
- Easy Read documents.
- Telephone interpreter services.
- Face-to-face interpreters.
- British Sign Language interpreters.
- Written communication where appropriate.
- Email communication where suitable and secure.
- Longer appointments where communication needs require additional time.

Patients should be asked how they prefer to receive information.

9. Sharing Information

Where patients are referred to another NHS provider, relevant communication needs will be shared appropriately to ensure continuity of care.

Information will only be shared in accordance with UK GDPR and Data Protection legislation.

10. Reasonable Adjustments

The practice will make reasonable adjustments to enable patients to access healthcare.

Examples include:

- Longer appointments.
- Ground floor consultation rooms.
- Wheelchair accessible rooms.
- Quiet waiting areas where possible.
- Flexible appointment arrangements.
- Alternative communication methods.
- Home visits where clinically appropriate.

11. Interpreter Services

Professional interpreters should be used whenever possible.

The practice will arrange:

- Telephone interpreters.
- Face-to-face interpreters.
- British Sign Language interpreters.
- Video Consultations

Family members or friends should only interpret where appropriate and with the patient's agreement, except in emergencies.

12. Staff Responsibilities

Practice Manager

Responsible for:

- Implementing this policy.
- Monitoring compliance.
- Arranging staff training.
- Reviewing complaints and feedback.
- Completing annual accessibility audits.

Reception Team

Responsible for:

- Identifying communication needs.
- Recording communication requirements.
- Arranging interpreters.
- Informing clinicians of communication needs.

Clinical Staff

Responsible for:

- Confirming patients understand information.
- Using accessible communication methods.
- Recording any new communication needs identified during consultations.

13. Staff Training

All staff will receive training on:

- Accessible Information Standard.
- Equality and Diversity.
- Reasonable Adjustments.

Training records will be maintained.

14. Monitoring Compliance

Compliance will be monitored through:

- Annual Access Audit.
- Patient Participation Group (PPG) feedback.
- Friends and Family Test.
- Complaints and compliments.
- Clinical record audits.
- Staff training compliance.
- CQC inspections.

15. Patient Feedback

Patients are encouraged to tell us if they experience any barriers to accessing information or communicating with the practice.

Feedback will be reviewed regularly and used to improve services.

16. Equality and Diversity

The practice is committed to promoting equality and eliminating discrimination in accordance with the Equality Act 2010.

No patient will receive less favourable treatment because of disability, age, race, religion, sex, gender reassignment, sexual orientation, pregnancy or any other protected characteristic.