Sussex and East Surrey
Clinical Commissioning Groups

NHS

Communications Guide

Introduction

Effective information and communication are vital components of a 'patient centred NHS.' Many people who have an interest in the work of NHS England may have difficulty understanding the information provided.

This may be because they are blind, d/Deaf, have a learning disability, or because they have limited or no English. It may be because they need support in terms of reading (limited literacy) or they have a condition which limits their ability to communicate (for example following a brain injury or a stroke). Children and young people have specific communication requirements too. It is also important to remember that the average reading in the UK is about 9 years old. 1.7 million adults in England have literacy levels below those expected of an 11 year old. 1 in 20 adults have a reading age of a 5 year old.

It is important, therefore, that information is presented in an accessible way, and where appropriate in a range of languages and formats that are easily used and understood by the intended audience.

Consideration should be given to the 'target audience' for documents and information, and whether proactive publication in any alternative languages and / or formats is appropriate. Whether or not proactive publication is deemed appropriate, a system and contact point should be identified for the management of requests for translation, transcription or reformatting. This should enable requests to be made via email, post and telephone.

This guide provides advice on how to provide information in an accessible format that as many people as possible understand. The following sections be found in the guide:

- Accessible Information Standard (pages 2 - 3),
- Alternative Formats (pages 2 – 5),
- Making Documents Accessible (pages 5 – 9),
- Timescales (page 9),
- Appendix 1: Helpful Resources (page 10),
- Appendix 2: Checklist for Producing An Easy Read Document (pages 11 – 12),
- Appendix 3: Tips for clear face-to-face communication (page 13).

Accessible Information Standard

The Accessible Information Standard aims to make sure that people who have a disability, impairment or sensory loss get information that they can access and understand, and any communication support that they need from health and care services.

The Standard tells organisations how they should make sure that patients and service users, and their carers and parents, can access and understand the information they are given. This includes making sure that people get information in accessible formats.

The Standard also tells organisations how they should make sure that people get support from a communication professional if they need it, and about changing working practices to support effective communication.

By law (section 250 of the Health and Social Care Act 2012), all organisations that provide NHS care or adult social care must follow the Standard in full from 1st August 2016 onwards.

Organisations that commission NHS care and / or adult social care, for example Clinical Commissioning Groups (CCGs), must also support implementation of the Standard by provider organisations.

Further resources on the Accessible Information Standard can be found in Appendix 1 (page 10).

What does the Standard tell organisations to do?

As part of the Accessible Information Standard, organisations that provide NHS care or adult social care must do five things. They must:

1. Ask people if they have any information or communication needs, and find out how to meet their needs.

2. Record those needs clearly and in a set way.

3. Highlight or flag the person's file or notes so it is clear that they have information or communication needs and how to meet those needs.

4. Share information about people's information and communication needs with other providers of NHS and adult social care, when they have consent or permission to do so.

5. Take steps to ensure that people receive information which they can access and understand, and receive communication support if they need it.

What does the Standard include?

The Standard says that patients, service users, carers and parents with a disability, impairment or sensory loss should:

- Be able to contact, and be contacted by, services in accessible ways, for example via email or text message.

- Receive information and correspondence in formats they can read and understand, for example in audio, braille, easy read or large print.

- Be supported by a communication professional at appointments if this is needed to support conversation, for example a British Sign Language interpreter.

- Get support from health and care staff and organisations to communicate, for example to lip-read or use a hearing aid.

Accessible Information Statement

All NHS England publications and online content should include the 'accessible communication statement' in a prominent position, as follows:

This information can be made available in alternative formats, such as easy read or large print, and may be available in alternative languages, upon request. Please contact [insert contact details].

The statement should be in no less than 16 point, in an immediately obvious place, such as on the front cover page immediately following the 'Information Reader Box'. For longer documents, it would be appropriate to duplicate the statement on the back cover too.

Alternative Formats

Braille and Moon

Braille and moon are tactile (touch-based) communication formats used by some people who are blind, deafblind or have visual loss.

Braille is used far more commonly than moon, however, staff should take care to ask an individual who is blind to self-identify their own preferred format, and avoid assuming that it will be braille. With the advent of increasingly sophisticated 'screenreaders' and other assistive technologies, many people who are blind now identify email / online information as their preferred information format. This increases the importance of ensuring that documents are created accessibly as, if

they are not, NHS England may need to pay for braille transcription or audio file which could have been avoided. Guidance about creating accessible documents is included on the Government Service Design Manual website and NHS England staff should also refer to the internally-published 'Creating Accessible Documents'.

Although only a relatively small number of people who are blind now identify braille as their preferred format, braille remains an important communication format for many people who are blind, particularly older people, and is the only communication format for some people who are deafblind.

Transcription of documents, information or online content into braille should be undertaken by an organisation specialist in production of this format. Braille documents should be handled and stored with care, so as not to damage the transcription by creating unwanted indents or creases. Braille documents should be protected from damage when being posted with protective packaging and a clear 'do not bend' instruction.

British Sign Language (BSL)

British Sign Language (BSL) is the first, only, or preferred language of many people who are d/Deaf. It is a visual-gestural language which bears little resemblance to English. The production of a BSL video version of a document or online content will ensure that it is accessible to people who are d/Deaf who use this language. BSL videos should be commissioned from an organisation specialist in their production, as skill is required in interpreting the information and in interpreting 'to camera.' BSL videos should also include subtitles or closed captions as standard.

More information about BSL may be found on the Action on Hearing Loss and SignHealth websites.

Easy read

'Easy read' refers to information which is written using simpler words and phrases, supported by images, symbols or photographs. Consequently, it should be easier to understand than standard documents. Its primary and target audience is people with a learning disability. The Office for Disability Issues states that, "The easy read format was created to help people with learning disabilities understand information easily." It can also be useful for other people too, for example people with low literacy levels and / or English as a second language, people who have had a stroke or people with dementia.

The publication of easy read information should primarily be a way of ensuring that documents and messages are accessible to people with a learning disability. However, it is also recognised that easy read may be helpful for people with lower literacy or a limited ability to read English. Staff should refer to the Learning Disability Engagement team's pages on the NHS England website for up-to-date and detailed guidance about production and publication of easy read information.

Simple text

This is the basis for easy read. Not everyone with a learning disability wants easy read. For example, some autistic people might find images distracting. It is similar to 'plain English', but uses simpler, shorter words and sentences.

Alternative Languages

People with limited or no English may need information translating into an alternative community language. Note that not everyone who speaks a particular language will be able to read it, and some languages in particular are largely oral / verbal. Proactive publication / availability in alternative languages is unlikely to be appropriate for the vast majority of publications and information.

The exception would be where information and documents are targeted at particular communities or particularly high-profile, critical campaigns which require the public to take action. The focus with alternative language provision therefore should be on ensuring that any requests can be received and handled promptly, effectively, fairly and consistently.

Advice about translated or transcribed information:

- Prior to submitting any information for translation, it must be spell-checked, the accuracy of all content, including any contact details verified, and assurance must be given that the content is up to date and without errors.
- The variant or dialect of a language for translation must be established. If in any doubt this should be confirmed with the individual requiring the translated information.
- Consideration should be given to the layout and length of the translated information, for example whether it is appropriate for double-sided printing, and whether the use of headings or images needs to be amended. A plain text document may be more suitable to use for translation.
- Be clear to consider and stipulate:
    - format the translation is to be provided in, for example, paper copy and / or electronic file;
    - delivery method for the translation, for example email, internet, post (consider file size limits for documents shared via email); o delivery deadline for the translation;
    - delivery location for the translation, for example directly to the individual or via the commissioning team;
    - express or special delivery requirements, for example express post, recorded or special delivery;
    - that ownership of the document, content and copyright remains with the CCGs (unless otherwise agreed);
    - whether the translator is expected to proof-read the translated version.

Making Documents Accessible

It is important that documents and information published are accessible and inclusive. Wherever possible, printed documents should follow these guidelines:

1. Think about the purpose of the document

Identify the main message of the document – what is the purpose of the text?

2. Keep the language simple

Write in language that's as simple as possible.

Make sure that the information appears in a logical order.

Simple language makes your document accessible to people with cognitive impairments and learning disabilities. Research shows that everyone prefers simple language, including specialist audiences. Because it allows them to understand information as quickly as possible.

Avoid using jargon, whether in the form of specific words or in an overly complex sentence structure.

Where you need to use technical terms, abbreviations or acronyms, explain what they mean the first time you use them.

If you need to use technical terms throughout the document include a glossary or "list of useful words" where you explain the meaning of each word, rather than repeatedly explaining the concept.

When you use a longer word (8 or 9 letters), users are more likely to skip shorter words that follow it (words of 3, 4 or 5 letters). Use longer, more complicated words, and readers will skip more so try where possible to use shorter words.

Write in facts. Do not write using abstract language like metaphors.

Have one idea or action per sentence.

Be consistence with use of language – keep using the same word throughout the document.

Keep your sentences short and to the point (about 15 words is good).

Use simple punctuation, for example question marks, exclamation marks, commas and full stops. Avoid using colons, semi colons, dashes and brackets.

Do not use too many commas. It is often better to spilt a sentence into two rather than use a comma.

Words have to be appropriate and not too vague or they can lead to misrepresentation.

3. Keep the document simple

Keep sentences and paragraphs short.

Use a sans serif font like Arial. Use a minimum size of 12 points, preferably 14.

The colour of text and paper has an impact on text readability for people with and without learning difficulties. Background colours such as Peach, Orange and Yellow are beneficial for readability for people with learning difficulties, whilst cool background colours such as Blue, Grey, and Green decrease text readability. It is best to use a black text.

Do not use *italics*, <u>underlining</u> and CAPITALS as they change the shape of the written word making it harder for people to read.

You could use **bold** to highlight important words but remember that some people may not notice that text is in bold.

Make sure the text is left aligned, not justified.

Documents with single, continuous columns of text are easier to make accessible than documents with a more complex layout.

Only use tables for data. Keep tables simple: avoid splitting or merging cells.

Do not use colour alone to get across meaning.

Avoid footnotes where possible. Provide explanations inline instead.

Ensure the images match the text.

Insert images on the left.

If you're using images, think about how you'll make the content accessible to people with a visual impairment. Two options are:

- make the same point in the text of the document (so people with visual impairments get the information they need - the image is there as an extra for people who are able to see it)
- give the person converting or uploading the document for you alt text ('alternative text') for the image

3. Give the document a structure

Break up your document to make it more readable. Use bullet points, numbered steps and subheadings.

Do not use bold to mark up subheadings.

Use styles to create a hierarchy of headings: 'heading 1', 'heading 2' and so on.

If printing double-sided ensure that the paper is of sufficient thickness to avoid text showing through from the other side.

Ensure plenty of "white space" on documents, if appropriate add a double-space between paragraphs.

Use page numbers.

For long documents include a contents page.

4. Forms, complex documents and other office formats

If you're creating another type of office document (for example a spreadsheet or presentation), there's guidance on how to make it accessible on the Accessible Digital Office Document Project website.

Additional points to consider if you are writing in an Easy Read style:
Use active and personal language for example "I", "you", "we". If you use "we", you should be explicit about who "we" means.

Use numerals instead of words.

Start and finish a sentence on the same page.

Avoid using percentages and fractions. Say "few" instead of "7%", and "most people" instead of "3,409 out of 4,001 people".

A document is not in Easy Read style if it is too long – documents should be no more than 22 pages long.

Timescales

Making accessible information takes time. If your document is for a meeting, make sure it is given to participants in good time to help them prepare. This should be at least two weeks before the meeting (unless agreed with participants).

Appendix 1: Helpful resources

This is a list of resources which can help you develop accessible as well as easy read materials:

- [NHS England Accessible Information Communications Policy](#)
- [NHS England Accessible Information Standard](#)
- [CHANGE](#). How to make information accessible
- [Department of Health](#). Making written information easier to understand for people with learning disabilities
- [European standards for making information easy to read and understand](#)
- [Mencap](#). Am I making myself clear?
- [NHS England The Accessible Information Standard](#)
- [The plain English campaign](#)

Appendix 2: Checklist for Producing An Easy Read Document

Ask yourself these questions when working on easy read documents

1. Have you left enough space for your pictures (at least 8cm) and are they big enough and of good quality?

2. Have you arranged the pictures so it is easy to see which part of text they belong to?

3. Do the pictures reflect what the text is saying?

4. If you have used photos, are they of a good quality and easy to see? Will they look good in black and white if the document is photocopied?

5. Have you chosen a clear, easy to read font that is at least 14pt big? Could the text be made 16pt big?

6. Have you broken your text up into smaller chunks by using bullet points and sub-headings?

7. Have you added extra space between the lines of text? ◯

8. Have you written your information in short, easy read sentences? Are there any hard words, jargon words, abbreviations or symbols left in the text? ◯

9. Could you add a toned background behind the text to reduce glare from the whiteness of the paper and help people with dyslexia? ◯

10. Have you chosen a suitable size and format for your document? Is the paper too reflective or too thin? ◯

11. Do your pages look cramped, cluttered or too busy? Maybe the layout could be simplified. ◯

12. Has your work been checked by people with learning disabilities? Have you used their experience and knowledge to make sure your document is truly accessible? ◯

Appendix 3: Tips for clear face-to-face communication

- Make sure you have the person's attention before trying to communicate with them. If they do not hear you, try waving or tapping them lightly on the shoulder.
- Identify yourself clearly. Say who you are and what you do – it may be more relevant to explain your reason for seeing the person rather than your job title.
- Check that you are in the best position to communicate, usually this will be facing the person, but consider whether seated or standing is more appropriate. Communication at eye level is usually easiest so if you are speaking to a wheelchair user consider sitting down if possible.
- Find a suitable place to talk, with good lighting and away from noise and distractions.
- Speak clearly and a little slower than you would do usually, but do not shout.
- Keep your face and lips visible – do not cover your mouth with clothing, a hand or your hair. If a member of staff is concerned about religious expression they should discuss this with their manager in advance.
- Use gestures and facial expressions to support what you are saying.
- If necessary, repeat phrases, re-phrase the sentence or use simpler words or phrases.
- Use plain, direct language and avoid using figures of speech such as 'it's raining cats and dogs' or euphemisms such as 'expecting the patter of tiny feet'.
- Check if the person has understood what you are saying. Look for visual clues as well as asking if they have understood.
- Encourage people to ask questions or request further information. Ask if they would like anything in writing as a reminder or reference.
- Try different ways of getting your point across. For example writing things down, drawing or using symbols or objects to support your point.