

## TRUST-WIDE POLICY DOCUMENT

# SERVICE USER AND CARER INFORMATION

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Recommending Committee:	Standing Committee
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Lead Executive Director:	Executive Director of Corporate Governance & Communications
Lead Author(s):	Information Lead

## TRUST WIDE POLICY DOCUMENT

2018 – Version 3

Striving for perfect care for the people we serve

## TRUST-WIDE POLICY DOCUMENT

# SERVICE USER AND CARER INFORMATION

### Further information about this document:

Document name	<b>SERVICE USER AND CARER INFORMATION SA24</b>
Document summary	<b>This document provides a framework to ensure the development and review of written information for service users and carers and applies to all staff involved in the production, review and dissemination of information for service users and carers.</b>
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Published by Copies of this document are available from the Author(s) and via the trust's website	<b>Mersey Care NHS Foundation Trust V7 Kings Business Park Prescot Merseyside L34 1PJ  Trust's Website <a href="http://www.merseycare.nhs.uk">www.merseycare.nhs.uk</a></b>
To be read in conjunction with	
<b>This document can be made available in a range of alternative formats including various languages, large print and braille etc</b>	
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### Version Control:

		Version History:
2015 version 2	Policy Group	October 2015
2018 version 3	Policy review no significant change, updated to reflect current service lines, job roles, local and national guidance.	October 2018

**SUPPORTING STATEMENTS** – this document should be read in conjunction with the following statements:

### **SAFEGUARDING IS EVERYBODY'S BUSINESS**

All Mersey Care NHS Trust employees have a statutory duty to safeguard and promote the welfare of children and adults, including:

- being alert to the possibility of child/ adult abuse and neglect through their observation of abuse, or by professional judgement made as a result of information gathered about the child/ adult;
- knowing how to deal with a disclosure or allegation of child/adult abuse;
- undertaking training as appropriate for their role and keeping themselves updated;
- being aware of and following the local policies and procedures they need to follow if they have a child/ adult concern;
- ensuring appropriate advice and support is accessed either from managers, *Safeguarding Ambassadors* or the trust's safeguarding team;
- participating in multi-agency working to safeguard the child or adult (if appropriate to your role);
- ensuring contemporaneous records are kept at all times and record keeping is in strict adherence to Mersey Care NHS Foundation Trust policy and procedures and professional guidelines. Roles, responsibilities and accountabilities, will differ depending on the post you hold within the organisation;
- ensuring that all staff and their managers discuss and record any safeguarding issues that arise at each supervision session

### **EQUALITY AND HUMAN RIGHTS**

Mersey Care NHS Foundation Trust recognises that some sections of society experience prejudice and discrimination. The Equality Act 2010 specifically recognises the *protected characteristics* of age, disability, gender, race, religion or belief, sexual orientation and transgender. The Equality Act also requires regard to socio-economic factors including pregnancy /maternity and marriage/civil partnership.

The trust is committed to equality of opportunity and anti-discriminatory practice both in the provision of services and in our role as a major employer. The trust believes that all people have the right to be treated with dignity and respect and is committed to the elimination of unfair and unlawful discriminatory practices.

Mersey Care NHS Trust also is aware of its legal duties under the Human Rights Act 1998. Section 6 of the Human Rights Act requires all public authorities to uphold and promote Human Rights in everything they do. It is unlawful for a public authority to perform any act which contravenes the Human Rights Act.

Mersey Care NHS Trust is committed to carrying out its functions and service delivery in line with a Human Rights based approach and the FREDA principles of **F**airness, **R**espect, **E**quality **D**ignity, and **A**utonomy

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## 1 PURPOSE AND RATIONALE

- 1.1 Purpose** – This policy applies to all written information produced that relates to all aspects of care, treatment and services provided for patients, service users and carers.
- 1.2 Rationale** – It is essential that patients, service users and carers are provided with accurate, up to date information about the services and care and treatment provided by the Trust. This information can help them to understand their care and treatment, conditions and medication and can aid recovery by supporting people to make informed decisions and choices.

## 2 OUTCOME FOCUSED AIMS AND OBJECTIVES

- 2.1 This document provides a framework to ensure the development and review of written information for patients, service users and carers and applies to all staff involved in the production, review and dissemination of information for service users and carers.
- 2.2 Information should be given in a variety of ways and at various times to enable patients, service users and carers to make informed decisions and choices. The information should be co produced with service users and carers and the relevant service area.

## 3 SCOPE

- 3.1 This policy applies to all staff responsible for the production, dissemination and evaluation of information for service users and carers.
- 3.2 All practical and appropriate steps must be taken to enable patients, service users and carers to access information and make informed decisions and choices about care and treatment. Access to accurate and appropriate information in a format that is accessible to the person is essential to deliver this.
- 3.3 Information must be given in the easiest and most appropriate form for the person concerned. A person must be assumed to have the capacity to understand information and make decisions unless it is established that they lack the capacity to do so.

### 3.4 NHS Brand Guidelines

The following guidance is available to support and assist in the production of information to ensure effective communication that is compliant with NHS guidance.

<http://www.nhsidentity.nhs.uk/tools-and-resources/patient-information>

Information is an important part of the patient journey. It is central to the overall quality of each patient's experience of the NHS.

The NHS puts patients at the centre of service design and delivery. By providing good quality information, we can help to ensure that patients have greater power, protection and choice in key aspects of their healthcare.

By providing good patient information, we can:

- help to make sure that patients arrive on time and are properly prepared for procedures or operations;
- remind patients what their doctor or nurse has told them if, due to stress or language difficulties, they are unable to remember;
- enable people to make informed decisions, giving them time to go away, read the information that is relevant to them, and think about the issues involved;
- involve patients in their condition and their treatment (research has shown that good information can improve medical outcomes and reduce patient anxiety, and that patients want access to it);
- give patients confidence, improving their overall experience of the NHS

Information for patients can take the form of:

- leaflets;
- booklets;
- single sheets;
- posters

When writing information for patients, remember the following points:

- **Try to write from the patient's point of view**  
Put yourself in the place of someone who may have little or no knowledge of what you are talking about. The exception here is the 'expert patient'; someone who has a long-term medical condition and is very knowledgeable about it – for more information go to [Communicating with different patient groups](#).
- **Use everyday language**  
Use plain, everyday language to make your information easier to understand. Avoid jargon and acronyms at all times. Remember, as many as seven million people (roughly one in five adults) in England have difficulties with basic literacy and numeracy<sup>1</sup>, so you need to keep their communications needs in mind. Equally, don't use overly simple or childish language, as this may appear patronising.
- **Use patient-friendly text**  
Use personal pronouns such as 'we' and 'you', as this will help to create a sense of inclusion and trust. Avoid using language that may cause alarm. Phrases such as 'electrodes will be put on your chest', for example, could frighten patients and deter them from pursuing further treatment. If you have to use medical terminology, such as 'nuclear medicine', explain clearly what these terms mean.
- **Be relevant**  
Make sure your information is relevant to and appropriate for the patient group it is aimed at.
- **Make sure information is consistent**  
Your information should reflect and reinforce other information received by patients, such as letters, leaflets, appointment materials and all information delivered at local clinics.
- **Explain all instructions**  
When asking a patient to do something, such as 'don't eat anything for six hours before an operation', always explain why you are making this request. This will help patients to understand treatment processes.
- **Be helpful**  
Help people to make decisions by giving them the facts: facts about the benefits, risks and side-effects of treatment options or medical interventions.

- **Don't confuse people**  
You should avoid discussing several different treatments and conditions in the same leaflet. Too much information on different subjects could cause confusion. Try to limit your leaflet to one or two subject areas and associated issues.
- **Signpost additional resources**  
Always let patients know about other sources of information and support.
- **Be up to date**  
Make sure that all the information you provide is evidence-based and up-to-date. You should also provide the most recent contact details for clinics, practices and hospitals.
- **Highlight alternative formats**  
Let patients know if the information you are providing is available in other formats, for example in Braille or on audiotape.

### **Engage your audience**

To make your text engaging and easy to read, use the following where possible:

- **Short sentences:** in general, no more than 15 to 20 words long.
- **Lowercase letters:** are easier to read, although uppercase is always required for the first letters of names and sentences.
- **Present and active tense:** will make your text more direct and engaging. For example: 'your appointment is on...', rather than 'your appointment has been made for...'
- **Question and answer format:** will help you to divide up your text.
- **Bulleted or numbered points:** will help you to break down complicated information, and will help patients to digest it.
- **Small blocks of text:** long paragraphs can look daunting on the page; use headings and paragraph breaks to divide your information up.
- **White space:** makes information easier to read.
- **Large bold font:** very useful for highlighting and emphasising text, whereas uppercase letters, italics and underlining can make text more difficult to read.
- **Numbers as words:** from one to nine, numbers are easier to read if they are written as words. From 10 onwards, they should be represented as numbers.
- **Font size of at least 12 point:** any smaller than this, and text becomes difficult to read.
- **Diagrams and pictures:** can be very effective for illustrating and enhancing text. Make sure that all imagery you use supports our communications principles. You should clearly label all individual pictures and diagrams, but avoid printing over them. And never use clip-art, as this can detract from our professional reputation.

You should also ensure that your materials express our [core values and principles](#) and follow our [main brand guidelines](#) closely.

<http://www.legislation.gov.uk/ukpga/2012/7/part/9/chapter/1/enacted>

### 3.5 NHS England Accessible Information Standard

<http://www.england.nhs.uk/ourwork/patients/accessibleinfo-2/>

On 24 June 2015, the new 'accessible information standard' was approved by the Standardization Committee for Care Information (SCCI). The standard is known officially as SCCI1605 Accessible Information. An update has been published along with the Specification for the standard and supporting documents. The official Information Standards Notice (ISN) has also been published on the Health and Social Care Information Centre website.

An Information Standard is a formal guidance document which health and social care organizations must follow by law.

The accessible information standard tells organisations how they should ensure that disabled patients / service users and, where appropriate, carers and parents, receive information in formats that they can understand, and that they receive appropriate support to help them to communicate.

#### ***What does the accessible information standard tell organisations to do?***

As part of the accessible information standard, organisations that provide NHS 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.

**Accessible Information** [www.rnib.org.uk/professionals/accessibleinformation](http://www.rnib.org.uk/professionals/accessibleinformation)

Written information is not always the most accessible format to communicate in and consideration needs to be given to the needs of some individuals and groups. Other formats such as Braille, audio or easy read versions should be considered and made available on request.

There are some key principles in producing written information that improve the accessibility for people with low vision or moderate impairments'

- text should be black on a white or pastel background
- the quality of the paper should be sufficient that it does not show text printed on the other side
- glossy paper should not be used as reflections interfere with clarity
- the text should be left aligned
- the text should not be distracted by graphics
- the text should be no smaller than point 12 and should preferably be point 14
- posters and display information should have an increased font size.



- do not overcrowd the page leave white spaces to separate text.
- for web pages try to avoid moving images as these cause distraction and are difficult to view, use static images
- web pages can use the function to increase font size and Browse Aloud

### 3.6 Care Quality Commission, essential standards of quality and safety 2009 (CQC) <http://www.cqc.org.uk>

It is essential that service users and carers are provided with appropriate information and support relating to their care and treatment. Information will be provided that supports people who use services or others acting on their behalf to make decisions about their care, treatment and support and include the risks and benefits and their rights to make decisions.

Information about choices should be discussed in a way they understand, respecting their right to take informed risks whilst balancing the need for preference and choice with safety and effectiveness ensuring that the risks, benefits and alternative options are discussed. Service users and carers should be given the relevant information to encourage them to change lifestyle behaviours that are placing their health at risk so they can make informed choices about whether they wish to lead a healthier lifestyle.

Information should be available to service users and carers about the services provided. This should include the aims, objectives and purpose of the service, the facilities that are available for their care, treatment and support and how their care, treatment and support is reviewed.

Information should be provided about what peoples rights are and details of local advocacy services and how to raise a concern or complaint about the services and how it will be dealt with.

### 3.7 NICE [www.nice.org.uk](http://www.nice.org.uk)

Patients and carers have a right to information on their condition and treatment so that they can discuss treatment choices on an informed basis with their clinicians. This information needs to be unbiased, authoritative and intelligible, without being patronizing. They also have a right to information on the basis of recommendations adopted by NICE which could affect the treatment options open to them. NICE will need to consider how best to meet these objectives, working with patient groups and with bodies such as the Centre for Health Information.

- Ensure that comprehensive written information about the nature of, and treatments and services for , their mental health problems is available in an appropriate language or format including any relevant 'Understanding NICE guidance' booklets
- Ensure that comprehensive information about other support groups, such as third sector, including voluntary organizations, is made available.

### 3.8 Trust Guidance

All information relating to care and treatment must include;

- Risks
- Benefits
- Alternatives

All information must be;

- Dated
- Indicate review date

- Archived

### **Brand Guidelines/House style guide**

<http://nww.portal.merseycare.nhs.uk/Documents/Brand%20Book.pdf>

### **Translated Information**

Information should be made available in other languages as requested, this translated information should then be stored on 'share point' to enable it to be accessible as required and ensure best use of resources.

## **4 DUTIES**

### **Lead Executive Director**

The Executive Director of Corporate Governance and Communications is responsible at Board level for ensuring that the Trust meets the internal and external requirements regarding the development and distribution of information for patients, service users and carers.

### **Policy Lead**

The Policy Lead has operational responsibility for ensuring the policy is up to date and reflects current guidance and legislation.

### **Service responsibility**

Services will be responsible for production, maintenance, monitoring, audit and evaluation of the effectiveness of the information produced within their respective services and ensure that patients, service users and carers are involved throughout the process

Services will ensure that they have processes in place to ensure that information produced for patients, service users and carers is compliant with this policy.

This policy applies to clinical leads, service leads and all staff involved in the production and dissemination of information for service users and carers.

It is the duty of the authors of the information to ensure compliance with this policy

## **5 PROCESS / PROCEDURE**

- 5.1 Services will establish procedure and process for the development, review and dissemination of information for patients, service users and carers' that ensures compliance with statutory, non statutory standards and with NHS and Trust guidance.

This will include;

- Identifying the need for information for patients, service users and carers
- Ensuring that the information produced meets the required standards
- Ensuring that patients, service users and carers are involved in the design of the information
- Ensuring that the appropriate professionals or leads are involved in the production of the information
- Document when information has been given to support care and treatment
- Include risks, benefits, alternatives
- Regularly review the information and document the process
- Ensure that information reflects the Trust values
- All information must be dated or issue numbered
- All previous information must be archived

- Can be made available in different languages or formats

## 6 CONSULTATION

- 6.1 This policy was originally developed in 2007 and reviewed in 2012 and 2018 with reference to National guidance, consultation with service users and carers, clinical services and the communications department.

## 7 SUPPORTING DOCUMENTS

### List of Supporting Documents

Ref No	Name	Purpose
	NHS Identity	NHS Brand Guidelines
	Accessible Information	NHS England Accessible Information Standard
	Trust Guidance	Brand Guidelines, House Style Guide

## 8 MONITORING

- 8.1 The divisions will ensure that information provided to patients, service users and carers is compliant with this policy.
- 8.2 The divisions will utilize feedback from patients, service users and carers to monitor and update information
- 8.3 Information will be monitored by the divisional Experience meetings.

# Equality and Human Rights Analysis

**Title: SA 24 Service User and Carer Information**

**Area covered: Local Division Clinical Service Based Policy**

**What are the intended outcomes of this work?**

**This policy applies to all written information produced that relates to all aspects of care, treatment and services provided for service users and carers.**

**It is essential that service users and carers are provided with accurate, up to date information about the services and care and treatment provided by the Trust. This information can help them to understand their care and treatment, conditions and medication and can aid recovery by supporting people to make informed decisions and choices.**

**Who will be affected?**

**All staff**

## **Evidence**

**What evidence have you considered?**

**The policy**

**The previous equality and human rights analysis.**

**Disability inc. learning disability**

**Service Users with Different Communication Needs**

**The Trust acknowledges the need to ensure adequate provision is made for those service users/carers with additional communication needs . A range of disability**

<b>communication mediums included.</b>
<b>Sex</b> See cross cutting below.
<b>Race</b> Information should be made available in other languages as requested, this translated information should then be stored on 'share point' to enable it to be accessible as required and ensure best use of resources.
<b>Age</b> See cross cutting.
<b>Gender reassignment (including transgender)</b> See cross cutting.
<b>Sexual orientation</b> See cross cutting
<b>Religion or belief</b> See cross cutting also see Race above.
<b>Pregnancy and maternity</b> See cross cutting.
<b>Carers:</b> See cross cutting.
<b>Other identified groups</b> No other groups identified .
<b>Cross cutting :</b> Information should be given in a variety of ways and at various times to enable service users and carers to make informed decisions and choices. The information should be co produced with service users and carers and the relevant service area. <b>Trust Equality and Human Rights proforma included.</b>

<b>Human Rights</b>	<b>Is there an impact?</b> <b>How this right could be protected?</b>
<b>Right to life (Article 2)</b>	<b>No issues identified within discussions.</b> <b>Supports human rights based</b>

<b>Right of freedom from inhuman and degrading treatment (Article 3)</b>	<b>approach.</b>
<b>Right to liberty (Article 5)</b>	<b>No issues identified within discussions.</b>
<b>Right to a fair trial (Article 6)</b>	<b>No issues identified within discussions.</b>
<b>Right to private and family life (Article 8)</b>	<b>No issues identified within discussions.</b>
<b>Right of freedom of religion or belief (Article 9)</b>	<b>No issues identified within discussions.</b>
<b>Right to freedom of expression Note: this does not include insulting language such as racism (Article 10)</b>	<b>This article not engaged.</b>
<b>Right freedom from discrimination (Article 14)</b>	<b>This article not directly engaged.</b>

### Engagement and involvement

**This policy was originally developed in 2007 and reviewed in 2012 with reference to National guidance, consultation with service users and carers, clinical services and the communications department.**

### Summary of Analysis

**Eliminate discrimination, harassment and victimisation**  
**A wide range of equality focused actions/objectives included in**

**this policy.**

**The aim is to make all information for service user and carers accessible.**

**Advance equality of opportunity**

**N/A**

**Promote good relations between groups**

**N/A**

**What is the overall impact?**

**Positive in relation to disability and Race.**

**Addressing the impact on equalities**

**N/A**

**Action planning for improvement**

**N/A**

**For the record**

**Name of persons who carried out this assessment (Min of 3 ):**

**George Sullivan Equality and Human Rights Advisor**

**Collette Irving People Participation**

**Kim Guy PALS**

**Date assessment completed:**

**20.11.2015**

**Name of responsible Director: Director of communications and engagement**

**Date assessment was signed: November 2015**

# Action plan template

This part of the template is to help you develop your action plan. You might want to change the categories in the first column to reflect the actions needed for your policy.

<b>Category</b>	<b>Actions</b>	<b>Target date</b>	<b>Person responsible and their Directorate</b>
<b>Transparency (including publication)</b>	<b>This equality and human rights analysis to be attached to this policy and placed on the Trust website.</b>	<b>2016</b>	<b>Kim Guy</b>