Accessible Information

An update report, November 2022

healthwatch York

Contents

Contents 1

Accessible Information: Update Report 2

Responses received 3

Conclusions 21

Accessible Information: Update Report

Background

The Accessible Information report was a joint report from Healthwatch North Yorkshire and Healthwatch York. Within the report, we provided feedback about whether people received information in a format that they can access and understand. This feedback came from surveys, focus groups and conversations. In the report we developed a series of principles and actions based on this feedback.

The Accessible Information Standard has been a legal requirement for six years, and builds on legislation dating back to 1995. Despite this, we found that for many people things have not improved. They still do not receive information in a format that is accessible to them.

The report provided guidance on how organisations can make sure that their information is always provided in a format that is accessible to everyone. The responses to the report are detailed verbatim below.

Responses received

North Yorkshire Police Response

"I have been asked on behalf of our Chief Constable Lisa Winward to respond to the recommendations in the Accessible Information Report. North Yorkshire Police (NYP) do not have a policy on accessible information and, in the main, do not currently comply with the recommendations in the report. However, this is something that we recognise. We have already taken steps to review the report and assess our current position.

I have arranged to meet with the Chair of our Diversity, Equality and Inclusion Board, ACC Elliott Foskett, to consider the recommendations and determine a way forward for NYP.

To support NYP develop and provide improved Accessible Information to our communities, we will review the best practices of HMICFRS, the College of Policing and other Police Forces.

Please find below information relating to each of the nine recommendations.

1. Ensure there is a policy of asking every person if they have a communication need as part of a wider accessible information policy or strategy and action plan: We do not currently have a policy in place to do this. Where a reporting person raises, or NYP identify, a communication need during public interaction, this will be recorded and met where possible.

2. Promote the accessible information policy and ensure that it has champions at every level and a regular agenda item for appropriate meetings: We do not have a specific Accessible Information Policy, our website holds information about the various formats available and

complies with the Web Content Accessibility Guidelines (v2.1). Where possible, any gaps are clearly highlighted. NYP will give consideration regarding champions and an appropriate meeting structure to govern the accessibility of information.
3. Ensure a person's information needs are clearly recorded on a person's record and that all staff are aware of this and know where to find the information: NYP does not currently have a consistent way of recording this information within a person's record.

4. Ensure information is shared across the organisation, either through a central IT system or another means so that a person only needs to tell you their information needs once: This is not currently undertaken on our systems.

5. Ensure your accessible information policy and action plan includes ways to find solutions if these do not already exist. Ensure the organisation will not condone an answer of 'that is not possible' without exploring a range of alternatives: NYP do not have a current Action Plan to address the needs of accessible information.

6. Make sure you offer and can deliver a range of alternatives, and this is clear to service users and staff and staff know how to access the formats: NYP offer a range of solutions to provide information in different formats based on individual needs such as hearing and sight impairments. Further detail can be supplied if required.

7. Identify someone to take the role of central contact for accessible information and ensure they have all the support, training and information they need to deliver this. Ensure the rest of the organisation knows about the role and works with them: NYP currently do not have a role in the organisation that would meet this requirement.

8. Identify and learn from good practice and what is not working. Share information across organisations and between organisations: This is not an activity that is routinely undertaken, however when national initiatives are launched that support NYP, this would be communicated to our staff.

We have recently adopted some services to assist the public in communicating with NYP.

9. Regularly review your policy and action plan to ensure things are improving. Update your policy and action plan to reflect changes and improvements: This is not currently undertaken; however, our website statement is updated as required.
Please let me know if you wish to be updated on our progress and please do not hesitate to contact me should you require any further assistance.

Yours sincerely
Inspector 1019 Mark PROCTOR
Force Control Room
North Yorkshire Police"

NHS
York and Scarborough Teaching Hospitals
NHS Foundation Trust

York Hospital Response

"Thank you very much for sharing the Accessible Information Report and the opportunity to attend the launch event and meet your contributors. We recognise the value of focussing on peoples' lived experiences in the report as well as the principles and recommendations you have identified, for us to consider.

We welcome this report and we recognise that there is much to do in this area. We can see this from the information in your report and from feedback from patients and families who use our service, where we have seen an increase in concerns about accessible information during the pandemic period.

We have processes in place to support staff in meeting patient requirements including a transcription service which can put information into a variety of formats and video tablets to support BSL interpreting. We recognise these systems are not fully embedded across all parts of our organisation.

The trust is committed to ensuring that we communicate with patients in their chosen format and accessible information continues to be a key priority in our equality objectives 2020-24.

Equality objectives

The trust has three key equality objectives for 2020-2024, one of which is implementing the Accessible Information Standard. However, our response to your report will support us in achieving each of our objectives. Work also continues in relation to our built environment access plan, including items which support accessible communication e.g. hearing loops and signage. Our annual patient Equality, Diversity and Inclusion report (due to be published this autumn) sets out our progress against our equality objectives since 2020, including progress towards implementing the Accessible Information objective to date. It will also indicate those actions where review and restart are needed.

Trust Equality Objectives 2020-2024;
Objective 1
To engage with patients, carers, governors, and local stakeholders and organisations, including Humber and North Yorkshire Integrated Care Board and Healthwatch, to listen and understand the needs of our patients.
Objective 2
To engage internally with services to discuss the needs of patients to ensure the reduction in health inequalities, that discrimination is eliminated, and patients and staff are supported with appropriate tools.
Objective 3
To achieve compliance with the Accessible Information Standard 2016.

Our response to your report

As a starting point, we have taken steps to engage services across the organisation to share the key messages from the report. We were very pleased to have Healthwatch support us in presenting the key messages at the trust Fairness Forum (chaired by our Chief Executive) and Patient Experience Steering Group (chaired by our deputy Chief Nurse) in July. This allowed colleagues from across the organisation to hear some powerful

examples of lived experience and the barriers and negative impact faced by people who require information in different formats. These discussions also highlighted a number of practical steps service areas can take now to help us improve - for example, ensuring staff are aware of the existing processes for getting letters and leaflets transcribed into different formats; the importance of providing an email as well as a telephone contact on letters; encouraging staff to share good practice, take part in e-learning, consider accessibility when making improvements and changes and to log problems.

We have also been considering information from patient complaints, concerns and other patient feedback which can help us understand where we need to do better. We have seen an increase in complaints and concerns about accessible communication during the pandemic. We recognise that many disabled people who have made a complaint or concern, are likely to have experienced repeated problems with accessing information in their preferred format from a variety of health and care providers. We also know we need to get better at asking people about their accessible communication needs and in using the information we already hold.

As you will know from your involvement in our Fairness Forum and Patient Experience Steering Group, we have a range of challenges, projects and areas for development as well as key opportunities over the next 12-18 months to build improvements on accessible information into our work. This includes making changes as part of our transformation programmes – building better care.

We are also strengthening how we involve patients in our work more widely. We would like to develop better links with people with specific accessible communication needs. We are learning from the examples in your report and we would like to explore ways to involve people with accessibility needs in the work below, as part of our patient and public engagement and involvement strategy.

We will continue to engage colleagues from across the organisation in these issues.

Next steps

We anticipate our key opportunity to deliver more accessible communication in 2022-2023 will be through our outpatients transformation work, which will impact on accessible communication across the organisation;

- Accessible outpatient letters
  As part of our outpatients transformation programme, we will implement a new system for generating hospital letters. Over the next 18 months, we expect this to improve the number and type of patient letters we can automatically generate in the appropriate format e.g. large print. This work is beginning with the Ophthalmology department in Autumn 2022 and will be extended to all services who use our central patient record system. We have discussed some of the examples in your report and we would like to engage people with a visual impairment to help inform and test our approach.

There are a number of other areas for improvement, which will be developed through other parts of the transformation programme. For example, we know we need to get better at asking people about their accessible communication needs and in flagging and using the information we already hold. We need to consider how to improve reminders, two-way communication and patient information leaflets. We must also consider those services who generate patient letters which do not use our central patient record system (e.g. radiology and diagnostics). In coming months, we will continue work towards our access plan, including items which support accessible communication e.g. hearing loops and signage. We will also be reviewing our arrangements for interpreting (including for British Sign Language); looking at how we can support staff with tools and skills to support accessible communication, including when working with patients and families in response to incidents and concerns. We would welcome your support in engaging people with access needs in this work.

Over the next two years to 2024, we anticipate the actions set against our equality objectives will evolve as the needs of our communities change, as services are developed and technology changes following the pandemic. We intend to build consideration of accessible information and communication into our future ways of working. We can use Equality Impact Assessment work aligned to our transformation programme as a key tool to stimulate change and hope to work with our system partners, to achieve our equality objectives.

We will continue to monitor progress against our equality objectives, via the Fairness Forum and our trust Board and via our transformation programmes.

We will keep you updated on our progress and as our next actions develop.

We welcome your continued support as we develop our work in this area together with feedback and suggestions on how Healthwatch may be able to support us as we move forward."

City of York Council Response

"Introduction

1. A Joint Report from Healthwatch North Yorkshire & Healthwatch York: Accessible Information was presented to Health & Wellbeing Board (HWBB) on 20th July 2022, highlighting some of the barriers people experience when accessing health and care services. The report contained nine recommendations to make information more accessible. The Board welcomed the report and organisations represented at the HWBB agreed to respond to Healthwatch. The Board asked the manager of Healthwatch York to bring back a further report that detailed the responses they had received. The Council's

Management Team (CMT) have considered this report and requested a council response to be drafted.

2. CMT was then asked to consider and have approved the responses to the nine recommendations as outlined below. This is within the context that the council welcomes the report and its recommendations, however being a multi service complex organisation not single service presents a unique set of challenges for the council in responding in a coherent way. This necessarily means that the council is 'working towards' in a number of areas outlined below.
3. Agreed Responses to Recommendations

- Ask what helps and do something about it. Put the user first.

What do we do now?

There are a variety of methods by which users can contact the council in respect of all age information about our adults and childrens services (phone/email/letter/visit to request any specific requirements they may need). When setting up meeting we ask if there is accessibility requirements to ensure it is suitable, when asking if someone wants to be on a mailing list (eg Age Friendly York) we provide the opportunity to receive this by post not just email. If someone wants a printed version of information from Live Well York they can request this in printed format and there is a large print option.

From a corporate perspective users can access the wider customer service in the same methods described above (with the exception of letters as these tend to be handled directly by service areas or business support). Currently, we do not ask if they would like information in a different way.

There is not a cross council approach to issuing letters which invites the user to contact us if they require the communication in a different format (for example, council tax letters or parking) and so the Customer Service passes such requests of this nature directly to the service area such as Parking.

What more can we do?

As part of the council's style guide standard include standard accessibility wording for all proactive written communication in relation to how to contact the council to request information in a different format. Target date: December 2022

Recommendation: Make Accessible Information an organisational priority from the top down and make sure everyone knows why it is important. Have understanding, committed staff championing this at all levels.

What do we do now?

In those key services such Family Information Service, Live Well York, Customer Services (including Web Services) and Communications accessibility is considered as a priority. Our corporate style guide covers the standards we follow and the accessibility section is shown below:

Document **accessibility**

Our audience is diverse, not only in culture, gender and age but also in the way they're able to interact with us. We believe our communications should be inclusive and used by all. This means designing for our audiences from the start.

UK laws state that we must make online information accessible and user-friendly, especially for people with disabilities. To comply with the law we must meet level AA of version 2.1 of the Web Content Accessibility Guidelines (WCAG), which includes producing compliant online documents.

Writing in plain English and using our corporate templates (available via the intranet) help to ensure the documents we publish follow PDF accessibility techniques, and information can be translated to different languages or formats.

Contact our Communications Team if you need an alternative template.

Accessible PDFs

Characteristics of an accessible PDF include, but are not limited to:

- Searchable text
- Fonts that allow characters to be extracted to text
- Interactive labeled form fields
- Hyperlinks and navigational aids
- Document title and assigned language
- Logical reading order
- Use of document structure tags
- Alt text for non-text elements
- No images with text
- Not relying on colour alone to convey information
- Suitable colour contrast (page 11)

The Adobe website also provides information on creating and checking PDF Accessibility.

The Style Guide should be used as the basis for all communications and design work. This includes guidance on making PDFs accessible online using the correct colour contrast between text and background and using the appropriate Font Size.

The Style guide also gives examples of use for both digital such as social media, webcasting and website, and print documents such as letters, posters, flyers and adverts.

For consultations printed copies are made available for those not online so people are not digitally excluded. We use a mix of communications methods including media, printed publications, e-newsletters and social media to get information to as wide a group as possible.

One way we communicate with our residents is via ward communications. There are several different ways to do this, ward twitter accounts, ward meetings and ward newsletters and ward posters for noticeboards or sharing on social media. Templates are available from the Communications Team.

Web Services are responsible for all web services offered by CYC. All sites (unless exempt) must comply with the 2018 UK Public Bodies Accessibility Regulations. We have provided a range of options to support people access our services digitally such as;

1. ReachDeck. ReachDeck can help with reading support or if someone prefers to listen to information instead of reading. ReachDeck can also translate our web pages into 78 languages. Translated text can also be spoken out loud, if a 'matching' voice is available (there are currently 35 voices for languages).
2. The publication of an accessibility statement and, a process whereby the individual can request information in an accessible format.
3. A BSL interpreting service
4. People can also adjust their settings when visiting the website such as font, letter spacing, colour and size.

There are dedicated pages on the main CoYC website to inform users about accessibility:

https://www.york.gov.uk/accessibility
https://www.york.gov.uk/translation
https://www.york.gov.uk/AccessibilityStatement#accessibleformat
Also on additional Council led websites:
Live Well York Accessibility Statement
Yor-OK (Family Information Service) Accessibility Statement

We have also faced significant challenges with suppliers who do not always meet the statutory regulations and do not need to if they are not identified as a public body. CYC should be procuring web services via suppliers who are committed to meeting the regulations. Our procurement process includes questions about this.

Customers calling our customer service team can access telephone interpreters to have their call translated to the language of their choice via language line. We also offer BSL video interpretation services for people who access our services face to face.

Live Well York as a partnership community website has been designed as compliant with the international standard Web Content Accessibility Guidelines 2.1 (WCAG) – Level AA.

We have a tool used across the Council run websites (Silktide) which checks the accessibility of pages to enable continual improvement.

What more can we do?
Review and strengthen style guide standards in line with accessibility standards including use of colour across both web and print, standardising our writing style and consistency when using 'easy read' Target date: March 2023

Find alternatives to PDF or having accessibility as a default of using them needs to be embedded across the organisation better. Target date: March 2023

Incorporate accessibility standards and our design guide into equalities training modules. Target date: May 2023

Promote Accessibility Training across the council that covers both print and web accessibility. As a first step bring in a specialist trainer in to train the Communications team for a day. We could offer this up to partner communications teams too to get best practice across the city Target date: March 2023

Develop a 'CYC Accessibility Guide' to refer back to post-training - something that's separate from the style guide - a simplified version would be useful for easy access. Target date: September 2023

Recommendation: Make sure that you ask people about their preferred format. Record this and use it to provide information in that format as standard.

What do we do now?
As described above people are invited via the website to request services in an accessible format. If made via Customer Services requests will be sent directly to service areas. When people contact customer service by other means such as phone, email or in person we do not capture their preferred format and this may challenging given the range of service the council undertakes in terms of keeping a central record.

What more can we do?
See information sharing section below.

Recommendation: Once identified, share people's information needs within organisations. Information about people's needs should only need to be recorded once for people across the organisation to get it right.

What do we do now?
Generally we do the internal sharing well as CYC has developed 'MDM' for external customers and internal tools for staff like 'Singleview'.

Any new external customer/resident records system that come online are considered, as part of their project plan, for joining MDM, and this is overseen at the council's ICT Board.

For MDM and Singleview the council has the necessary Data Protection in place, working with the Corporate Governance Team, and annually reviewed.

In respect of systems used for example via the Customer Centre – these would need to be considered carefully as our privacy notices and any required data sharing arrangements, state what we are going to use personal information for. At present we share peoples' details across the council where we have a lawful basis to do so for example a safeguarding risk identified, or this had been requested by the person concerned.

What more can we do?
We don't have "information needs" as a field within Singleview. Whilst technically possible this may not be recorded or recorded well in individual systems.

We will review all of our case management systems as appropriate to see how information needs are captured in order to action the technical change to make appear on Singleview.Target date: various as opportunities emerge.

As a multi service organisation it may never be possible to achieve "needs should only need to be recorded once" as;

- We have many entry points for customer information, held by variety of systems, that we are always likely to recapture this information.

- We do not routinely update any personal details, let alone information needs, from system to system, for example being we do not move personal information from Mosaic to My Account.

We will work towards 'needs should only recorded once' generally through various data quality practices (examples being updating systems with NHS numbers, dates of death etc.) Target date: various as opportunities arise

We will work towards "review how held action" and then embedding practices for example asking staff to check customer record via Singleview. Target date: various as opportunities arise then introduce into accessibility training

We will ensure that data protection, privacy and information security risk assessments are undertaken in a timely way and any additional data protection, privacy and information security requirements will be put in place where required. Target date: various as opportunities arise.

Recommendation: Involve people with lived experience to help find pragmatic answers.

What do we do now?

The council is always looking for improved ways to engage, which includes how we provide information. A recent example – we are exploring the opportunity through Age Friendly York to work together with Age UK York, Living4Moments, Wilberforce Trust and Be Independent to provide a workshop on using technology to provide solutions for people who are hard of hearing.

The CYC website development included engagement with a range of users including people representing the blind and partially sighted, older persons, BAME. The procurement of our BSL included representation from the deaf community.

What more can we do?
Communications Team to review, implement and share learnings from recent Our City survey to build into the style and accessibility guides). Target date: March 2023

Work with the council's new Access Officer once appointed to develop standards for engagement as part of Equality Impact Assessments. Target Date: September 2023

Recommendation: Provide choice. Don't assume that everyone with a particular issue needs information in the same format or that everything is accessible. Digital is not the solution for everyone.

What do we do now?
We recognise that not everyone uses or has access to technology which can digitally exclude people, we are therefore looking to provide access to the same quality of information from Live Well York to community centres with electronic notice boards. We also provide printable personalised booklets. Our approaches through the Communities Team is that its all about relationships so our Local Area Coordinators and Health Champions are out there in the community having conversations rather than expecting everyone to read information. Our commissioned social prescribers are also having conversations as their first approach to engaging and providing information.

We fund and work alongside YOPA to provide information fairs out in different communities in York. We commission Access Able to provide information on the accessibility of community venues and public spaces to ensure people going out to obtain information can visit knowing what the physical environment is. We have had and are developing the next community information strategy to ensure the way we provide information remains a priority.

Whilst Customer Services promote the use of digital services we know this is not for everyone. Customers can contact us by phone or email. We will also see people face to face if this meets their needs. For any web service we develop internally we encourage all services to develop an approach to non digital customers.

What more can we do?
Continue to support of York's digital inclusion partnership 100% Digital York including initiatives to develop greater opportunities to access technology, connectivity, develop skills and/or support within communities. Target date: Ongoing

Recommendation: Each organisation should have one contact / team who work across that organisation to find solutions to accessible information needs quickly and effectively.

What do we do now?
The single point of contact for many services is through the Customer Centre but they can also go direct to a specific business area if they require a more bespoke solution. Our style guide is provided through our Communications Team.

What more can we do?
As seen a range of services within corporate and community services are currently involved at CYC. Access and Inclusion resource within communities will be brought together and led directly by the AD Customers & Communities to provide some overall leadership and support. Target date: September 2023

Recommendation: Seek and share good practice. Providing information in accessible formats isn't always easy but lots of organisations are trying. Share progress and challenges so that things are constantly improving.

What do we do now?

We have regional meetings to share good practice relating to advice and information provision with other local authorities. Web Services keep up to date with good practice surrounding accessible web services

What more can we do?
Share good practice internally from user feedback and regular reviews. Target date: September 2023

Recommendation: Review what you are doing to make sure it is working and learn from what is and isn't going well.

What do we do now?
We review Live Well York periodically which includes accessibility but also provide the opportunity for feedback on any page of the website at any time. We use the Healthwatch York volunteer readability group to feedback on the information pages and whether they are Plain English. We provide Easy Read pages on Live Well York based on feedback from people with learning difficulties.

Web Services use a number of methods to review how we are doing. This includes Silktide (technology which identities areas on the website which do not comply with the 2018 UK Public Bodies Accessibility Regulations) and direct feedback from users.

What more can we do?
Review Equality Impact Assessments for learning opportunities when the Access and Inclusion Team is established – Target Date: September 2023"

York CVS Response

York CVS has considered the recommendations made in the Healthwatch York and Healthwatch North Yorkshire Accessible Information Standards report, both at Senior Management Team and through the Equality Diversity and Inclusion working group.

The EDI group has recommended that York CVS takes forward the recommendations through some key actions. Namely:

- Developing an Accessible Information Action Plan for the whole organisation
- Identifying staff and volunteer champions for accessible information
- Recording communication needs, initially through member / supporter records, longer term through a CRM system
- Offering a range of alternative formats
- Holding staff training sessions on the use of the Recite Me accessibility toolbar installed on all 3 websites (York CVS, Priory Street Centre, Healthwatch York

Conclusions

We would like to thank North Yorkshire Police, York and Scarborough Teaching Hospital NHS Trust, City of York Council and York CVS for their responses.

Next steps
We would recommend the following next steps to the Board

1. Request at the Board meeting that those member organisations yet to provide a response do so within 28 days

2. Revisit the issue every six months to check progress is being made.

3. Consider how our current monitoring processes review how well providers are meeting the Accessible Information Standard and how we can identify and share best practice across the city.

4. Ask the York Human Rights City Network to help us embed accessibility of information across the system by making it one of the human rights indicators reported on

healthwatch York

Healthwatch York
Priory Street Centre
15 Priory Street
York
YO1 6ET

www.healthwatchyork.co.uk
t: 01904 621133
e: healthwatch@yorkcvs.org.uk
@healthwatchyork
Facebook.com/HealthwatchYork