

Marketing and Digital Services

Accessible Information Policy

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Contact: Linsey Jonsson

Email: linsey.jonsson@nhs.net

Phone: 0141 414 2765

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Introduction

- 1 This policy is concerned with accessible information. The Scottish Accessible Information Forum (SAIF) states that “Accessible information is giving information in a way that is accessible to as many people as possible.”
- 2 It is important to note that the concept of making information accessible does not only apply to people with disabilities. Our ability to access information can be affected by a number of factors such as:
 - location – you may be in a noisy environment, only have a short amount of time between meetings or somewhere with slow Wi-Fi
 - health – you may be tired or have a short term health condition
 - equipment – you may be on a mobile phone with a small screen or have forgotten your glasses.
- 3 NHS Health Scotland produces a large amount of information through a variety of different channels aimed at both the general public and a wide range of professionals. We categorise our content in 5 ways as noted in appendix 1.
- 4 We have a key role to play in reducing health inequalities and improving health, so it is vital that we do not unintentionally exclude anyone from accessing our information.
- 5 We are committed to meeting the standards set out in this policy. However, there are some areas that we are still working on achieving the sufficient standard, as noted in appendix 2. We aim to reduce the number of exceptions over the life of this policy.

Purpose

- 6 The purpose of this policy is to ensure the following:
 - All NHS Health Scotland staff are aware of the level of accessibility we must adhere to when producing information products.
 - External suppliers who produce information products for us are aware of the accessibility standards we require the finished product to meet.

- Our stakeholders and customers are aware of our standards of accessible information provision and what they can expect from the information we produce.

Policy statement

- 7 We are committed to producing high-quality, accessible information outputs.
- 8 We will endeavor to meet level AA of the [Web Content Accessibility Guidelines \(WCAG 2.0\)](#) as a minimum wherever reasonable adjustments can be made within the resources available for all online information we produce, including online PDFs.
- 9 Anything that doesn't meet these standards will be clearly identified as such and will include an option to request a more accessible format. A list of recognised exceptions are included in [appendix 2](#)
- 10 We will use Plain English or a clear language appropriate for the intended audience for all information we produce. Specific training guidance is provided for all staff on how to do this.
- 11 We will provide BSL versions of all of our publications providing screening and immunisation information as per action 39 in the [British Sign Language \(BSL\) National Plan 2017-2023](#). We also provide BSL versions of audio visual content for content types 1 and 2 in [appendix 1](#).
- 12 We are still fully scoping out what level of support is required for actions 40 and 45b of the BSL National Plan. We are also involved in developing a new National Interpretation and Translation Policy for NHSScotland. These pieces of work are ongoing. As a result, we may need to review this policy sooner than the 3 years review period.

Policy framework

- 13 This policy operates within the following legal, policy and strategic context:

- a) [Equality Act 2010](#) – the overarching legal framework. We have a duty to make reasonable adjustments by taking positive steps to ensure that disabled people can access our services.
- b) [Patient Rights \(Scotland\) Act 2011](#) – includes the rights to access services and rights to communication and participation, which specifically mentions the right to be informed and involved in decisions about health and care services.
- c) 2020 Vision for Health and Social Care – the principles of prevention, anticipation and supported self-management.
- d) Healthcare Quality Strategy for NHSScotland – the principles of safe, effective and person-centred care.
- e) Community Empowerment (Scotland) Act 2015 – strengthens the voices of communities in decisions which affect them.
- f) Digital First - we are committed to the Scottish Government’s national digital strategy.
- g) Digital Health and Care Strategy – how technology can support person-centred care, and sustain and improve services for the future.
- h) [Making it Easier](#): Scottish Government’s health literacy action plan - The World Health Organization defines health literacy as: “the cognitive and social skills which determine the motivation and ability of individuals to gain access to, understand and use information in ways which promote and maintain good health.” ([Health promotion glossary](#) © World Health Organization 1998).
- i) [Practising Realistic Medicine](#): Chief Medical Officer’s 2016/17 annual report focusses on patient-centred care and shared decision making.
- j) [British Sign Language \(BSL\) National Plan 2017-2023](#) – Health Scotland is specifically tasked with producing information to support the screening and immunisation programmes in BSL (action 39).

- k) NHS Health Scotland's [A Fairer Healthier Scotland a strategic framework for action 2017-22](#) – aims to improve health and reduce health inequalities.
- l) [Health Inequalities Impact Assessment](#) – HIIA is an integrated impact assessment which incorporates: Health Impact Assessment, Equality Impact Assessment (EqIA) and a Human Rights Impact Assessment.
- m) [Human Rights](#) – NHS Health Scotland is committed to a human rights based approach to planning and delivering public services.
- n) [Web Content Accessibility Guidelines \(WCAG\) 2.0](#) – the minimum standards of accessibility we subscribe to for digital content and online PDFs.
- o) [Plain English Campaign](#) – NHS Health Scotland is a corporate member and we aim to uphold the principles of Plain English.

Scope

- 14** This policy is concerned with ensuring NHS Health Scotland meets the legal and policy standards set out above.
- 15** It relates to the production and development of all our information, whether produced in-house or commissioned externally. These are defined as follows, although the list is not exhaustive:
 - a) Digital products
 - b) Social media
 - c) Data visualisation
 - d) Film
 - e) Audio
 - f) Publications
 - g) Alternative formats and translations
 - h) Events

i) General communications (including PowerPoint presentations)

16 It does not cover information from third parties which we link to or host on our websites. Whilst we can provide guidance and advice, the responsibility for ensuring accessibility lies with the content owner (if this is not NHS Health Scotland).

17 Accessibility is a shared and joint responsibility across the organisation.

18 All staff are required to make sure they are well informed about the organisation's standards of accessible information (this policy) and that they use and follow the guidance document [to follow] and our ['How to' guides](#).

19 The Marketing & Digital Services (M&DS) team is responsible for producing the following information outputs:

- digital products
- data visualisation
- films to support programmes of work
- audio versions of publications
- publications
- alternative formats
- translations.

M&DS staff are required to be well informed and to adhere to the quality and accessibility standards as laid out in the supporting guidance.

20 The Communications & Engagement (C&E) team is responsible for producing the following information outputs:

- Social media
- Corporate films

M&DS staff are required to be well informed and to adhere to the quality and accessibility standards as laid out in the supporting guidance.

21 The Events and Sponsorship team has an overview of all our events activity. Events and Sponsorship staff are required to be well informed and to adhere to the quality and accessibility standards as laid out in the supporting guidance.

22 This policy will be communicated to staff via:

- The Source
- Supporting guidance
- Accessibility drop-ins
- Plain English training

Review

23 This accessible information policy will be reviewed three years from date of issue, or sooner if appropriate.

24 The supporting guidance documents can be updated at any time as required.

Appendix 1: definitions of content

- 1** External facing content aimed at a general public audience.
- 2** External facing content related to informed consent* aimed at a general public audience.
- 3** External facing content aimed at a professional audience (includes health professionals and practitioners, policy makers and decision makers and workplaces).
- 4** External facing corporate content aimed at a professional audience (as above).

- 5 Internal facing corporate content aimed at a very limited audience (our staff and Board).

'Informed consent' refers to the formal process for giving permission or agreeing to medical tests, treatment or investigations. Before a doctor, nurse or any other health professional can begin certain examinations or treatment, the patient must be given enough information about it, and should be allowed to make up their own mind without pressure from other people. The patient will usually be asked to sign a form to give their consent, but consent may also be assumed if they have read the information provided and agree to proceed.

Appendix 2: exceptions

Agreed corporate exceptions as at April 2018 are:

- Externally commissioned research reports (pre guidance)
- Outcomes frameworks
- Some data visualisations (particularly infographics)
- Time-sensitive films used on social media
- Translations (make accessible on request)
- Some legacy items created before our commitment to meet AA level of accessibility (will include some publications and some websites)