



## Consistency in Care

One of the challenges in working with patients with disabilities is ensuring access to a consistently high level of service that is adapted to their needs. Patients

who are unwell do not want to have to worry about having to make sure all their attending staff are au fait with their specific needs. This in turn creates a conflict between the requirements of maintaining patient confidentiality and providing the best service possible.

The PCT has launched a 'hospital passport' system for its patients with learning difficulties, which contains the requisite information for the attending unit to provide the necessary care and treatment during a hospital stay. These are produced as a collaboration between staff and patients, and copies are on file at James Cook and The Friarage, allowing staff to adapt existing practices to better help patients with learning difficulties. Running alongside the passports is a 'flag' system, whereby patients with a learning disability are flagged, highlighting that the patient in question may be known to the Community Learning Disability Team, and to contact the team for further information or support if needed.

**If you would like this document in a different format, for example, large print, audio cassette/CD, Braille, or in another language, please contact 01904 694 821.**

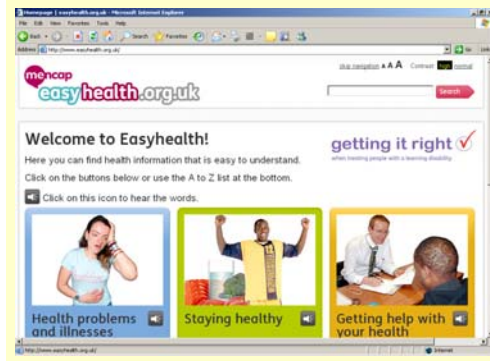


## Inform and Empower

The underlying logic behind equality legislation is to ensure everyone has the same level of access to information and choices; this then gives people the confidence to make informed decisions.

In relation to the Community and Mental Health Services, this is a powerful tool to empower our service users. If people with learning disabilities understand what exactly is happening with their health, then they will feel more confident about taking control of it.

To this end we have been working on providing accessible information in a range of ways to service users, such as using symbols and pictograms on signs, simple English, and providing healthcare information on websites, incorporating various font sizes, high contrast, and audioguides.



# Equality and Diversity

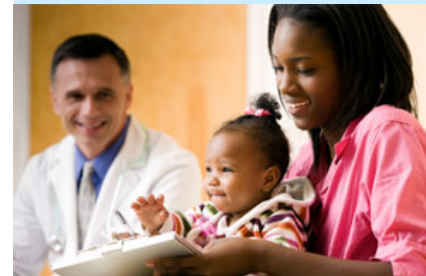
Our role is to ensure equality of access to services across North Yorkshire for all service users, whatever their differing needs.

Case study: Alan is 63 years old and deaf. The last time he visited his GP he missed his appointment. The nurse called out his name at the appropriate time, then marked him down as absent. By the time Alan enquired, the nurse had left for the day. He missed his appointment and had to reschedule for another time.

This is an example of how existing practice can discriminate against service users with disabilities. Alan contacted PALS, and the GP surgery in question is



now looking at ways of improving their system. A quick work-around would be to have the nurse on duty ensure that Alan has been made aware that it is his turn to see the GP; however, this solution highlights Alan as 'different,' and does not guarantee that other service users with similar needs will not suffer a similar experience. The surgery could adopt an electronic system, which calls out names on a screen at the appropriate time as well as audibly. Similar systems operate in many other surgeries and this would make sure that any service users with similar needs to Alan would receive the same level of service as any other service user, without singling him out for special treatment.



### Ageism

Older employees are a great asset to any organisation; their experience allows them to provide invaluable support. Sadly, it is not always easy for older people



to find work; many employers are reluctant to adapt their existing working practices to arrive at a solution that recognises the needs of older employees and works with them to ensure these needs are met.

Adopting flexible working practices requires organisations to recognise that their existing working patterns may not be suitable for everyone, and is a practical way to ensure staff are happier and more productive in the workplace. For example, David is 72 and works part-time in a local facility. As he does not drive, he is reliant on public transport. In order to ensure that David is able to continue to work to the best of his abilities the unit adjusts his start and end times to correspond to local bus times. This means that David doesn't have to wait around for a bus, especially in the winter when it's cold and dark, and is kept safe. David knows that he doesn't have to worry about his commute and is therefore happy continuing to work for the facility, and the unit has retained a valued colleague.



### Staff training

NHS North Yorkshire and York PCT has recently rolled out a computer-based learning system to increase e-learning across our staff base; an important development given the difficulties in providing traditional training workshops over such a large area. CBLS (Computer-Based Learning Solution) is a web-based system that contains bespoke training packages across a variety of areas.

When designing the new system, the team made sure that ensuring access for all staff was a priority. As there was no disability audit available to the team, which would have given them an idea of the disabilities within their target audience, they aimed to make the package as accessible as possible to everyone, whilst encouraging and incorporating feedback from staff having difficulties in order to further improve the service. Their partner company had some experience in this area and was able to help the team arrive at appropriate solutions.

The system itself is very user-friendly, taking just two clicks to access a user's individual homepage, and every aspect of the designed shows how the team have thought about accessibility. The font size

has been chosen in line with existing regulations for partially-sighted individuals, and each screen has been designed to be clear and concise, as an overly-fussy screen can prove distracting for people with sight issues. The whole package also includes an auditory soundtrack for every page, allowing users to follow the training programmes entirely through headphones if this is easier for them.



The response has been overwhelmingly positive; with over 29,000 packages completed, only three users reported difficulties. These are dealt with on a cases-by-case basis by dispatching e-learning coordinators to provide support in person, as they often require conflicting

solutions; someone with poor vision may need a black-and-white version, whereas a dyslexic user may need a completely different coloured background, and a user with poor vision may wish for a further increase in font size.

By building their training package around users with differing capabilities from the very beginning, the CBLS team have delivered a system that is immediately accessible to all staff members, whatever their capability.



### Front-line staff

Everyone who works in the NHS feels strongly about helping people, but not all of our staff are medically trained. Receptionists and similar front-line positions are staffed by non-clinical personnel but as a part of their working day regularly come into contact with patients, and they do everything in their power to help.

Feedback from our non-clinical personnel highlighted that they sometimes felt unsure of how best to help disabled patients; for example, our personnel felt that they should be doing more to help deaf patients but didn't have the necessary skills.

We already run a programme for our clinical staff that teaches them sign language, and as a pilot we extended this to our front-line non-clinical staff. There was extremely high demand for this service and uptake exceeded our expectations.

The end result was that many of our non-clinical personnel are now conversant in sign language, which provides a more welcoming experience for our deaf patients by breaking down communication



barriers, and our reception staff now feel that they can provide a higher level of care to our deaf patients.