**Self-assessment checklist**

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| --- | --- | --- | --- |
| **Grade** | | | |
|  |  |  |  |
| **No evidence** | **Some evidence** | **Good evidence** | **Excellent evidence** |

| **Statement** | **Things to consider** | **Evidence and actions to take** | **Grade (tick one)** | | | |
| --- | --- | --- | --- | --- | --- | --- |
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| The communication needs of service users are asked about. | Do you ask this question?  How do you gather this information?  How often is this updated?  Who asks for this information? |  |  |  |  |  |
| All patients (or their carer’s) communication needs are known about. | How do you identify people with communication needs?  Can you produce a report that identifies all patient’s needs?  Do patients know that you want this information? |  |  |  |  |  |
| Patient (or carer’s) communication needs are recorded. | How, who, where and when are needs recorded? |  |  |  |  |  |
| All patients with communication needs are flagged and are easily visible to all staff accessing their records. | Can patient flags/alerts be seen in all areas of the system by staff completing different functions?  Are flags used on the patients paper records? |  |  |  |  |  |
| Information provided fully meets the needs of the patient or carer. | Can automatically generated letters or outsourced correspondence be adapted to meet the needs of the patient or carer? |  |  |  |  |  |
| Staff are aware of the accessible information standard and its implications to the information they provide. | How have you disseminated information about the standard and staffs responsibilities within it? How do you know all staff are aware? |  |  |  |  |  |
| Written information can be provided in alternative formats by all staff. | Do all staff know how to produce alternative information formats e.g. braille and easy read? Or do they know who to contact for advice and support? |  |  |  |  |  |
| There are policies, procedures and guidance for staff on how to support patients with communication needs. | Examples of policies could be an interpretation/ translation policy, accessibility policy, Inclusion strategy, easy read guidance etc. |  |  |  |  |  |
| All public areas are fully accessible for people with physical or sensory needs. | Is the building physically accessible, are there hearing loops available and other equipment? Is the signage and way finding clear and easily followed? |  |  |  |  |  |
| Technology is utilised to improve accessibility e.g. email and text messaging. | Do you contact patients/carer’s via email or text? Can you provide patient information leaflets in plain word format to enable reading via a computer programme? Can you provide audio versions of information? |  |  |  |  |  |
| There is a commitment to testing accessibility for patients and the public. | How do you know if services and information are accessible to people? How do you share lessons when things go wrong? |  |  |  |  |  |