

Policy Name	Accessible Information Standard Policy
Policy Version	Version 2
Relevant Legislation, Regulations and Standards	Regulation 9: Person Centred care / Regulation 10: Dignity and Respect / Regulation 11: Need for Consent / Regulation 12: Safe Care and Treatment / Regulation 17: Good Governance (Health and Social Care Act 2008 (Regulated Activities) Regulations 2014); Regulation 18: Staffing, as read with section 181(7) of the Health and Care Act 2022; Health and Social Care Act 2012, section 250; Accessible Information Standard DAPB1605 version 1.1 (approved 3 June 2025, published 3 July 2025); Equality Act 2010, sections 20 and 29; Mental Capacity Act 2005; CQC registration guidance, Equality, diversity and human rights policy and procedures (updated 2 February 2026); Care Certificate standards (2025)
Established	04/08/2025
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Accessible Information Standard Policy

Policy Aims

This policy shows how Starling Homecare ensures effective communication with the people using its service and those involved in their care throughout its relationships with them. It follows the Accessible Information Standard (DAPB1605, version 1.1, approved 3 June 2025 and published 3 July 2025), made under section 250 of the Health and Social Care Act 2012. CQC's registration guidance requires a provider's Equality, Diversity and Human Rights Policy to show how it meets the standard; that policy refers to this one for the detail, and this policy is available to CQC with it.

Policy Background

Starling Homecare recognises its legal and ethical duties relating to effective communication and the provision of information which includes the following.

A duty under section 250 of the Health and Social Care Act 2012, through the Accessible Information Standard, which applies to all providers of NHS and publicly funded adult social care. Starling Homecare complies with it for everyone it supports, whoever pays, because a person's right to understand and be understood does not depend on who pays.

A duty under the Equality Act 2010 to eliminate discrimination and make reasonable adjustments for disabled people, such as those with hearing or visual impairments, including taking steps to put information into accessible formats if a disabled person is at a substantial disadvantage if this is not done.

The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 include the following requirements, which fall within the scope of this policy.

1. Regulation 9: Person-centred Care requires care providers to work in partnership with a person who uses the service to identify and assess their needs, which involves listening to the person and where they find it difficult to communicate their needs, wants and preferences, using different means to obtain the information sought so that the resulting plan of care and support is truly "person-centred".
2. Regulation 10: Dignity and Respect requires people using the service to be always treated with dignity and respect and have their needs for privacy respected. Care Quality Commission guidance states "all communication with people using services must be respectful. This includes using or facilitating the most suitable means of communication and respecting a person's right to engage or not to engage in communication".
3. Regulation 11: Need for Consent requires care providers to ensure that people using their service agree to any care, treatment and support proposed and where they lack the mental capacity to give their consent every effort is made to reach a decision which would most likely reflect their decisions if they were able to communicate with them directly.
4. Regulations 12: Safe Care and Treatment and 13: Safeguarding Service Users from Abuse and Improper Treatment also require effective communication between service provider and user, and where involved, other agencies.
5. Regulation 17: Good Governance requires care providers to seek and act on feedback from the people using their service and others, for the purpose of continually

evaluating and improving the service. Listening to people about how we communicate with them is part of how we meet it.

Policy Statement

Starling Homecare recognises the importance of effective communication with the people using its service, their relatives and carers and the importance of providing information that enables them to receive appropriate person-centred care and support. It also recognises that people must receive safe care and are not put at risk of harm because of ineffective communication with their service provider.

We proactively ask every person about their communication and information needs at assessment and at each care plan review. Communication needs are flagged on the person's digital record and at the front of their care plan so that everyone who works with them can see them. Whether needs are recorded, acted on and reviewed is checked through the audit programme in the Quality Assurance Policy.

Starling Homecare is committed to developing the most effective ways of communicating with the people using its services, using all the means needed and available to ensure that communications are effective.

We will make all reasonable adjustments to ensure that it communicates with any person using its service with a recognised information/communication impairment and for that person to communicate effectively with everyone involved in meeting their care needs.

We recognise that people can communicate with one another in many ways, for example: by speaking and listening, through gestures and expressions, in writing, by using pictures and symbols and through touch. They might also need special aids and appliances to help them communicate should they have difficulties in using their natural faculties to do so, for example, because of physical, sensory and intellectual impairments.

Starling Homecare will support the people using its service to find advocates to help people to express their communication needs.

Starling Homecare will always respond promptly to any difficulties in communication with the people who use its service and those involved in their care, and reviews the effectiveness of its communication methods with individuals at each care plan review and for the service as a whole in the annual self-assessment under the Quality Assurance Policy.

The Registered Care Manager is the Accessible Information Standard lead for Starling Homecare, as the 2025 standard asks each organisation to identify, and is responsible for

this policy, for the way needs are recorded and flagged on our systems, and for staff training on the standard. The Deputy Care Manager supports her day to day.

The Accessible Information Standard

The Accessible Information Standard requires providers to take six steps so that people's information and communication needs are fully and consistently addressed throughout their care, treatment and support. The 2025 version of the standard added the sixth step, review, and requires providers to name a lead, train their workforce, make their contact methods accessible, seek feedback and publish their accessible communication policy.

Starling Homecare carries out the following.

1. Find out if an individual has any communication/information needs relating to a disability or sensory loss and if so, what they are.
2. Record those needs clearly and in a standard way on all an individual's care records and documents.
3. Highlight them in their care records so everyone who must communicate with that person and has access to their records can address their communication needs in line with the individual's communication plan.
4. Where required and relevant, pass on to others an individual's information/communication needs and how they should be addressed.
5. Ensure that everyone receives information which they can access, understand and receive communication support if they need it throughout their care, support and treatment.
6. Review each person's information and communication needs regularly, at every care plan review and whenever the person, their representative or a member of staff tells us something has changed.

Starling Homecare understands that communication and the provision of information is a fundamental part of treating people with dignity and respect and in providing good, compassionate care. Furthermore, Starling Homecare recognises that effective communication can be affected by conditions such as dementia, stroke, hearing conditions, sight loss or cases where the person lacks capacity to make decisions.

Procedures

Step 1 of the Accessible Information Standard

To find out if an individual has any communication/information needs relating to a disability or sensory loss and if so, what they are.

People who use services have the right to be communicated with and receive sufficient information about their care and treatment so that they make a balanced judgment whether to give their consent.

To be responsive to individuals' communication needs, Starling Homecare adopts a "whole person" approach by identifying the most effective means of communicating with that individual, where necessary, with specialist help, which is also based on their views and preferred ways of communicating. The results are written into their plan of care and highlighted in it, particularly where other than standard means of communication are required.

People who use services who have difficulty in communicating their needs because of their difficulties or impairments will be offered or recommended that they have access to specialist support. This may be in the form of assessments by speech and language therapists, psychological assessments and advisers from organisations specialising in disabilities and sensory impairments.

It is possible that new people to the services' communication needs will already have been identified by other health and care agencies involved, but we will always check that these needs have been accurately assessed and addressed so that we can communicate effectively with the person about their care needs and deliver the appropriate care.

Steps 2 and 3 of the Accessible Information Standard

(2) To record the person's communication needs clearly and in a standard way on all an individual's care records and documents.

(3) To highlight a person's communication needs on their care records so everyone who must communicate with that person and has access to their records can address their communication needs in line with the individual's communication plan.

We will clearly record in a highlighted separate section of the person's care records the relevant information. Everyone involved in the person's care and support will know how to communicate effectively with that person.

We will discuss with the person as part of the care planning process (and, if necessary, in consultation with other professionals and agencies) what adjustments and interventions are needed to improve communication with that person.

Agreed methods of communication and interventions will be recorded in the person's care plan in a prominent and consistent way so that all care staff know exactly what has been agreed to meet the needs of people using the service, their relatives and carers.

AIS communication needs will be checked at each care review, during spot checks, and through service-user feedback to ensure reasonable adjustments remain effective and up to date.

Step 4 of the Accessible Information Standard

To pass on where it is required and relevant to others an individual's information/communication needs and how they should be addressed.

All staff who have access to a person's care records will be aware from the records of their communication needs and support plan. They are also expected to impart and share the facts of a person's specific communication needs and support plans with others involved in that person's care, support and treatment, but who might not have authorised access to the person's care records.

Where someone transfers to another service or receives care from another service, we will, with the person's permission, share information that we are requested to provide about their communication and information needs (along with other information sharing) with the receiving service.

Where it is suspected that a person does not have the mental capacity to communicate, or in any other way has no ability to communicate, then the provisions of the Mental Capacity Act 2005 will be implemented and best interests' decisions made with the involvement of people close to the person using the service, such as relatives, carers or advocates. A communication need does not of itself mean a person lacks capacity; the first principle of the Mental Capacity Act 2005 applies and we give every practicable help to communicate before any assessment of capacity, as the Consent Policy and Procedures sets out.

Step 5 of the Accessible Information Standard

To ensure that individuals receive information which they can access, understand and receive communication support if they need it throughout their care, support and treatment.

Starling Homecare will make all reasonable adjustments to meet the communication needs of people with sensory difficulties, including people with visual and hearing difficulties.

Starling Homecare does not supply specialist communication equipment, but we identify the need, work with the person, their family and the professionals involved, signpost to or liaise with the services that provide it (for example sensory services, audiology, the community equipment service or the GP), and support the person to use aids already in place. Our own information is provided in the format the person needs: key documents are provided in large print or easy read on request, we can arrange audio or picture-based versions where a person needs them, we read information to people who prefer that, and we arrange British Sign Language interpretation and Makaton support through external services where a person needs them, particularly where consent is being taken or an important decision made.

Starling Homecare will help any person using the service, family member or carer who needs it to find advocacy support to meet their communication and information needs.

People can contact us by telephone, text message, email, video call or face to face, and we agree with each person which they prefer. Our contact details and on-call arrangements are left in the home in a format the person can use. We encourage people and their representatives to tell us how well we are communicating with them, through care plan reviews, the annual survey under the Quality Assurance Policy and the Complaints Policy and Procedures, and we act on what we hear.

All staff are responsible for helping to deliver this policy by communicating in a way that is accessible to every user of this service.

We publish this policy so that it is available to the people we support, their representatives and the public, and we provide it on request in the formats described above.

Step 6 of the Accessible Information Standard

To review people's information and communication needs regularly. The standard requires regular review; we do this at every care plan review under the Person Centred Care Planning Policy, at the reviews after care starts under the Admissions Policy, and whenever a change is reported, and the record and flag are updated at the same time so that staff never work to out-of-date information.

Training

All care staff will receive training as relevant to their roles and responsibilities in the care of people with hearing and sight problems and disabilities, which will include learning about communication techniques and providing accessible information.

Care staff:

1. Receive initial training based on the Care Certificate Standard 6: Communication and develop their communication skills from there
2. Will receive training in the six steps of the Accessible Information Standard so that they can communicate effectively with everyone who has a communication need.
3. Receive refresher training on the standard in line with our training plan and whenever the standard or our systems change.
4. Receive training on learning disability and autism appropriate to their role, as Regulation 18 is treated as requiring under section 181(7) of the Health and Care Act 2022, meeting the standards in the Code of Practice on statutory learning disability and autism training (final from 6 September 2025), and Care Certificate Standard 16, Awareness of learning disability and autism.

How We Check This Policy Is Working

Whether communication needs are identified, recorded, flagged, shared, met and reviewed is checked at each care plan review, through observed practice under the Staff Supervision Policy, and at least once a year through the audit programme and the annual self-assessment under the Quality Assurance Policy. Where the check finds a gap, the Registered Care Manager either fixes the practice or brings the policy to the Nominated Individual for change. This policy is reviewed every twelve months, and sooner if the Accessible Information Standard, the Equality Act 2010 or CQC's guidance changes.

Policy Review

Signed:	R. Faldu
Name	Rupen Faldu
Date:	06/10/2026
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