Accessible Information Standard (AIS) self-assessment template

Date of completion	14th August 2025
Name of organisation	Coquet Trust
Name of integrated care board in which the organisation is situated	North East and North Cumbria ICB
Region	North East
Tier 1 local authority for the area	Newcastle, Gateshead, Northumberland, North Tyneside, South Tyneside, Sunderland.
Job title of the person completing assessment	Emma Agar – Operations Project Manager Susan Scott – Head of PBS.
Job title of senior responsible officer for accessible information standard	Head of PBS and Operations Project Manager.

Total RAG Assessment 3 – red 6 – Amber 5- Green

	Assessment question	Measuring	Evidence	Organisation response	RAG
1	How well do you identify people's information and communication needs?	Step 1: Identify	• An approach has been agreed on how to identify people with communication or information needs relating to disability, impairment or sensory loss. • Overarching implementation (identify, record, flag, share, meet and review of needs). • To ensure that people receive information which they can access, understand and receive communication support if they need it.	As part of assessment process a communication assessment is completed. This will identify the needs of the person and this is recorded in Nourish. But could implement a further assessment Stirling understanding screening tool to assess the level of detail/complexity of information given.	
2	Are you reliant on paper-based systems and if so, is the process compliant with the six steps of the AIS?	Steps 1 to 6: Identify, record, flag, share, meet & review	• Yes/ No (if applicable) • A clear process for recording people's information and communication needs in line with the standard is in place. • Paper based system process tracks six steps	No, we use Nourish to document people's communication needs.	
3	Are people's communication & information needs recorded and flagged in electronic systems using SNOMED or where non electronic records are being	Steps 2 & 3: record & flag	• Staff are aware of how to record information and communication needs. • IT system supports recording & flagging.	Nourish is used to record the needs of individuals, it will document the communication needs of the	

	used, are you using specific definitions to record needs?		• Evidence of booking system adjustments e.g., SMS/Email/Online access. • People's feedback on ease of booking	person and any adjustments needed. The profile page of Nourish will show what the person needs. May need to review language used to ensure it meets the best guidance as per standard.	
4	Does your IT systems have sufficient functionality to identify, record, flag, share and review information and communication needs?	Steps 1, 2, 5 & 6: Identify, record, meet & review	• A clear process for recording people's information and communication needs in line with the standard is in place. • System capability; Recording, sharing, reviewing,). Logging gap, outcomes; complaints or incident logs reviewed • Use of interim work arounds e.g. paper records	Nourish has the ability to report, however the reliability of the data is not clear.	
5	How well does your organisation ensure that individuals receive information in a format they can understand, and the information and communication support they need?	Step 5: Meet	• A process for sending out correspondence in alternative formats is in place • A process for producing or obtaining information in alternative formats is in place	We have some easy read documents; we have invested in photosymbols to convert more documents to easy read. We currently don't provide other formats, however could	

			• A process for arranging or booking professional communication support is in place • What data do you have on the provision of these services?	easily implement audio/visual transcript. We don't routinely send information in alternative formats	
6	Do you review the recorded information and communication needs of people?	Step 6: Review	• Describe how this is reviewed and how often	Reviews happen every 6 months.	
7	Are staff appropriately trained and have an awareness of both the AIS and how to meet people's needs, using your organisation's systems?	Overarching implementation	• Training strategy is in place. • Training briefings have been given to staff. • Training is delivered and there are opportunities to share learning. • Training evaluation forms are collected	We do not provide training on accessible communication but we do Person specific training such Makaton. We have not shared information to staff about accessible information.	
8	Do you promote the opportunity for people, their families and their carers to receive and to request information and communication in an accessible format?	Overarching implementation	• An accessible communication policy that is in line with the AIS, has been developed. • Public campaigns or posters • Web updates with analytics of web use	We do not have an accessible information policy; we don't openly share we can create other format documents. Update 04/09/25 – policy is now in place and has been shared.	
9	How do ensure your complaints process is accessible to everyone?	Step 5 and 6: Meet and Review	• Consideration has been given to the accessibility of relevant websites and the availability of relevant information online	We have an easy read complaints policy, there is a welcome book that includes reference to policy. Currently not stored on website.	

			• There are alternative and accessible ways to submit a complaint • Complaint themes are analysed. • Accessibility checked via feedback		
10	Are you able to track complaints related to failures to meet the AIS within the last 12 months?	Overarching implementation	• Complaints are themed or coded by AIS compliance	Complaints are themed to include communication issues, but need to include accessible information	
11	How does your organisation use information and communication needs data to inform service planning, quality improvement, or population health?	Overarching implementation	• Use of Population health management tools to segment populations with communication needs • Identify individuals at risk due to unmet communication needs • Evidence that this data is used to inform service planning, commissioning, or quality improvement	we have the data although not clear on the reliability of it, however we do not regularly use it to inform quality planning. We could look to involve the quality partners, annual survey to include question on communication.	
12	Have you a designated responsible lead for AIS?		• Name and role of Lead • This role is recorded in governance or accountability docs e.g. committee minutes, team structure, job description	No – will take to SMT to agree person. Updated 04/09/2025 -we now have 2 named leads.	

13	To what extent does your organisation share and publish this SAF?		• Evidence that the SAF is published (e.g. on organisation website or annual report) • Date and location of publication • Accessibility of the published docs e.g. available in alternative formats • Internal policy confirming publication approach or frequency	This is the first time we have completed this self-assessment so not previously published. Update 04/09/25 – this is now published	
14	To what extent has your organisation developed an action plan to support improvement?		• Evidence that the action plan is published (e.g. on organisation website or annual report) • Quality Improvement (QI) projects • Accessibility of the action plan e.g. available in alternative formats	We haven't yet as this is the first time completing the assessment. Need to review the KQA to include are we meeting the communication needs and is there evidence the team and they are aware of alternative formats if needed.	