

It is campaigners like the lobby groups in the UK which have made that so effective in the UK. The UK, in comparison to many other countries in the world, has a far higher proportion of television with subtitles, and the lobby groups here have been particularly successful over the last 20 years. We see that social media and audience pressure does bring results. BBC and Channel 4 went to 100% voluntarily, because of audience pressure. Services like Amazon Prime Video, which is similar to Netflix, have started to make their content accessible because they are getting such a lot of pressure from

the audience through social media such as Twitter and Facebook. Technology is getting better and a lot of the transmission problems we saw maybe 10 or 15 years ago, when we first had digital TV, have been addressed. There are fewer technical problems with the process than there were then. More people will find and watch TV if producers create good quality subtitles for it and this will be profitable for the producers so we are trying to use that argument to persuade them to make their programmes accessible.

Richard Byrnes

The new NHS Accessible Information Standard

One of life's eternal bug bears for people with hearing difficulties is the problems they experience when trying to use the NHS. A typical Out Patients Department is an acoustic nightmare for people with hearing impairments, and the situation in many GP and Dentist surgeries isn't much better. This leads to patients being left marooned in the waiting room because they didn't hear their name being called, and [more seriously] giving the wrong answer to the doctor or nurse because they misheard the question. In recent years many practices have put ever more emphasis on patients contacting them by telephone, which has an isolating effect as seen by many people with hearing impairments.

Hence the NCIUA was pleased to see a year or so ago that NHS England was drafting a mandatory "Accessible Information Standard" to address issues of this type. Effectively the Standard sets out how NHS England requires NHS funded facilities to implement the "reasonable adjustments" required by the Equality Act to allow people with various forms of disability to have full access NHS services. The Association was able to make some input to the development of the standard, along with other bodies such as Action Hearing Loss, hence we are pleased to see that the Standard has now been officially approved by NHS England, and will be rolled out nationally over the next year or so. [The standard itself is a voluminous document, running to about 60 pages, so it perfectly reasonable to give teams at the sharp end

some months to digest it!].

The Standard states that it applies to

- All providers of NHS care or treatment;
- All providers of publicly-funded adult social care;
- Adult social care or services bodies (in their role as service providers);
- Independent contractors providing NHS services including primary medical services (GP practices), dental services, optometric services and pharmacy services.

Perhaps of most interest to Association members are Requirements 26-31 of the Standard, which provide that:

26. Organisations MUST ensure that patients, service users, carers and parents with information and / or communication needs related to or caused by a disability, impairment or sensory loss have these needs met.
27. Organisations MUST ensure that patients, service users, carers and parents with information needs (a need for information in a non-standard print format) are sent or otherwise provided with information, including correspondence, in formats which are appropriate, accessible and that they are able to understand.
28. Organisations MUST ensure that patients, service users, carers and parents with