Patient Information Policy

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DOCUMENT CONTROL		**POLICY NO.**	81
Policy Group:	Corporate		
Lead Author:	Patient Feedback and Whistleblowing Manager		
Lead Executive:	Executive Director of Nursing		
Scope: (Applicability)	Board wide	**Version no.**	3.0
Status:	Final	**Implementation date:**	February 2021
Last review date:	December 2024	**Next review date**	October 2027
Approved by:	Board Management Team	**Approval date:**	October 2026
Equality Impact Assessed:	Yes	**Equality Impact Assessment date:**	May 2020
Data Protection Impact Assessed:	Not required	**Data Protection Impact Assessment Date:**	Not applicable

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Summary & Aim	Key Requirements
This Policy sets out the process for the development and review of patient and Carer information, with the exception of medical records. The Policy aims to: • Assist the Board to meet its statutory requirements in terms of Patient and Carer Information. • Assist staff to produce Patient and Carer Information that is in line with good practice principles.	• Staff designing or reviewing patient and Carer information, must follow the process outlined in Appendix 1.
Target Audience	**Previous Names**
• Staff who are developing or reviewing patient and Carer information. • Staff responsible for the approval, management and quality monitoring of the above information	Not applicable

Equality and Diversity Statement
NHS Dumfries and Galloway recognise that some communities within society are more likely than others to experience discrimination, prejudice and inequalities. The Equality Act 2010 specifically recognises the protected characteristics of **age, disability, sex, race, religion or belief, sexual orientation, gender reassignment, pregnancy and maternity, and marriage and civil partnership**. The Fairer Scotland Duty, also requires NHS Dumfries and Galloway to actively consider how socio-economic disadvantage can be reduced when making strategic decisions. The New Armed Forces Covenant Statutory Duty places an expectation on NHS Dumfries and Galloway to consciously consider the Armed forces Covenant when developing, delivering and reviewing policies and decisions which may impact the Armed Forces community and help improve their access to public services. Consideration on all of the protected characteristics, the Fairer Scotland Duty and the Armed Forces Covenant are included within the Equality Impact Assessment process and documentation, which must be completed as part of the Policy Development Process. NHS Dumfries and Galloway is committed to promoting and advancing equality, removing and reducing discrimination and harassment and fostering good relations between people that hold a protected characteristic and those who do not. This applies both in the provision of services and as our role as a major employer. NHS Dumfries and Galloway believe that all people have the right to be treated with dignity and respect and is committed to the elimination of unfair and unlawful discrimination practice.

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APPENDICES

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1. PURPOSE AND RATIONALE

1.1 Effective communication is a key component in ensuring patient safety and positive patient experiences. It enhances trust, improves relationships, supports informed consent, and increases the likelihood that patients will share important information with clinicians. Research shows that establishing and maintaining a good relationship with patients and Carers improves patient satisfaction, treatment adherence and health outcomes. It can also lead to a reduction in anxiety, pain and blood pressure.

1.2 The Board has a statutory duty to ensure communication with patients, Carers and the general public is clear, accessible and understood. All patients have a legal right to effective communication in a form, language and manner that enables them to interact and participate in their healthcare and understand any information provided.

1.3 Communication is a key factor in delivering the requirements of the following:

- Patient Rights (Scotland) Act 2011
- Equality Act 2010
- Healthcare Quality Strategy 2023-2028
- British Sign Language (Scotland) Act 2015
- Health (Tobacco, Nicotine etc. and Care) (Scotland) Act 2016
- The Duty of Candour Procedure (Scotland) Regulations 2018
- Apologies (Scotland) Act 2016
- The Health and Social Care Standards

1.4 Communication between the Board and those it serves takes a variety of forms and a significant amount of that communication is via (or supported by) patient and Carer Information. Patient and Carer information is information that we share with people in relation to conditions, investigations, treatments, procedures, examinations and services. It may also be practical information such as the location of our buildings, or the promotion of health advice e.g. healthy eating. Patient and Carer information is produced and shared in various formats, both hard copy and digital, including; letters, leaflets, posters, web information (including social media) and on screens (bedside and waiting rooms).

1.5 In order to ensure we are meeting our statutory requirements, the patient and Carer information we produce, use and share within the Board must be:

- **Accessible and Clear** - Information should be in a language, style and format which makes it easily accessible to the intended audience.

- **Accurate**– It is crucial that the information we produce is accurate and in line with current clinical and/or corporate guidelines.

- **Approved** – All new, updated or revised patient and Carer Information must go through the appropriate approval process before public use (see Appendix 1).

- **Cost Effective** – Information should be produced in a cost effective manner.

- **Appropriate Quality** – Information should be produced to an appropriate standard and must be in line with local branding guidelines.

- **Respectful and Sensitive** – Information should be sensitive to the religious or cultural needs of all people, avoiding stereotypes.

- **Reviewed Regularly** - All patient and Carer information produced and/or used by the Board should be reviewed regularly.

1.6 Associated procedures and guidance are available in the 'Patient and Carer Information' section on Beacon. Support is also available from Patient Services.

Please note: For the purposes of this document, patient and carer information does not include information held about individual patients i.e. medical records.

2. POLICY AIMS

2.1 This Policy will:

- Assist the Board to meet its statutory requirements in terms of Patient and Carer Information.

- Assist staff to produce Patient and Carer Information that is in line with good practice principles.

2.2 When referring to this Policy, consideration should also be given to the NHS Scotland Interpreting, Communications Support and Translation National Policy, Company Representative Guidance, Communications Branding guidance and the local British Sign Language (BSL) Action Plan.

3. POLICY SCOPE

3.1 This Policy applies to all NHS Dumfries and Galloway staff (whether on a permanent, temporary or bank contract) in all locations who are involved in writing, reviewing or managing patient and Carer information.

3.2 The Policy sets out the processes to be followed when developing or reviewing patient and Carer information.

4. DEFINITIONS

4.1 As detailed in 1.4 above.

5. DUTIES / RESPONSIBILITIES

5.1 Organisational Responsibilities

5.1.1 To ensure communication with patients, Carers and the general public is clear, accessible and understood.

5.1.2 To ensure patients are afforded their legal right to effective communication in a form, language and manner that enables them to interact and participate in their healthcare and understand any information provided.

5.2 Staff Responsibilities

5.2.1 To follow this Policy and associated procedures.

5.2.2 To report to their manager anything that prevents them from fulfilling the requirements of this document.

5.3 Managers' Responsibilities

5.3.1 Ensure staff are aware of the Policy and are supported to produce information that complies with the principles outlined above.

5.3.2 Ensure that there is adequate budget available within the service to meet the costs of producing any new or revised patient and Carer information.

5.3.3 Ensure staff are aware of how to access patient and Carer information.

5.3.4 Ensure staff use patient and Carer information appropriately.

5.3.5 Ensure all new, updated or revised patient and Carer information (for their area of responsibility) has gone through the appropriate approval process before public use (see Appendix 1).

5.3.6 Ensure that the patient and Carer information they are responsible for is reviewed within appropriate timelines.

5.4 Patient Services' Responsibilities

5.4.1 Ensure this Policy and the associated supporting documents are up to date.

5.4.2 Coordinate quality checks to ensure compliance with this Policy and the associated Procedure.

5.4.3 Support services to produce and maintain patient and Carer information that is compliant with the above principles.

5.4.4 Approve updated and revised patient and Carer information.

5.4.5 Manage the patient and Carer information database.

5.5 Patient and Carer Information Working Group's Responsibilities

5.5.1 Approve new patient and Carer information.

5.5.2 Support quality checks.

5.5.3 Promote the importance and benefits of this Policy and the associated supporting documents.

5.5.4 Explore and promote digital formats and solutions for patient and Carer information.

6 PROCESS / PROCEDURES

6.1 The process set out in Appendix 1 should be followed for the development or review of all patient and Carer information.

7 CONSULTATION

7.1 Consultation on the original Policy was led by the Lead Author and included:

(a) Associate Medical Director

(b) Associate Director of Allied Health Professions

(c) Intellectual Disabilities Manager

(d) Equality and Diversity Lead

(e) Communication and Engagement Manager

(f) Scottish Health Council

The revised Policy was reviewed and approved by the Board's Senior Leadership Team in October 2026.

8 TRAINING AND SUPPORT

8.1 Support is available via the Patient Experience team for any member of staff producing or reviewing patient and Carer information.

9 MONITORING

9.1 Bi-monthly updates on patient and Carer information will be provided to Healthcare Governance Committee and Board as part of the existing Patient Experience report. There are currently no Key Performance Indicators associated with patient and Carer information, however this is under review.

10 EQUALITY IMPACT ASSESSMENT

10.1 The Policy was Equality Impact Assessed in May 2020. That assessment was reviewed in December 2024 and October 2026 to ensure it remained relevant and accurate.

11 DATA PROTECTION AND CONFIDENTIALITY IMPACT ASSESSMENT

11.1 A Data Protection Impact Assessment was not undertaken when reviewing this Policy as the document did not review or handle confidential or personal information.

12. DOCUMENT CONTROL SHEET

12.1 Document Amendment History

Version	Section(s)	Reason for update
1	Original Policy	Policy was due for review in 2015
2	All	Policy reviewed, updated and approved Feb 2021
2	All	Reviewed Feb 2022, no changes made.
2	All	Reviewed Aug 2023, no changes made.
3	All	Reviewed December 2024, minor typos revised.

12.2 Distribution

Name	Responsibility	Version number
Corporate Governance Team	Place on Policy Register	3

12.3 Associated documents

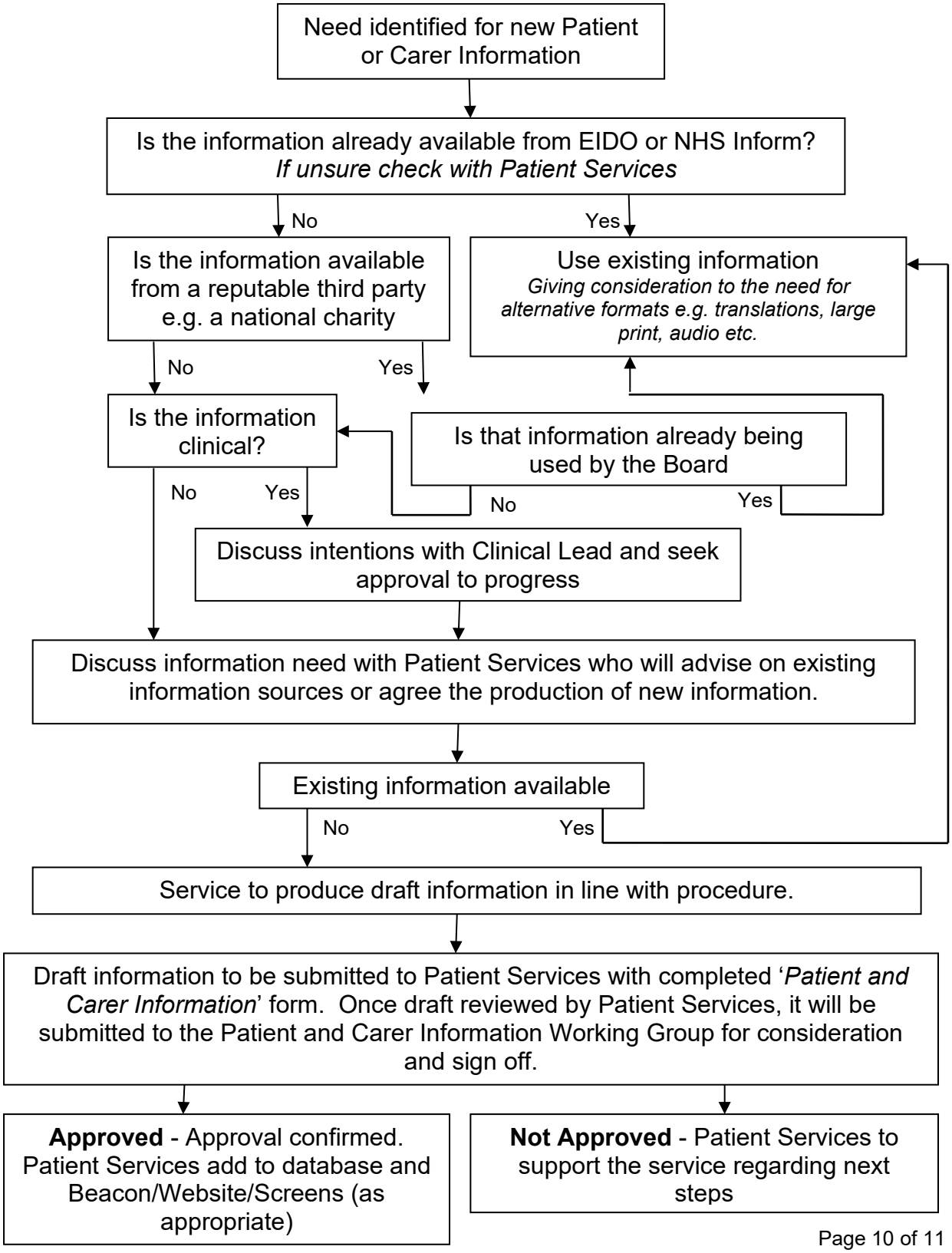
- Equality Impact Assessment
- Guidance documents (available on Beacon)

12.4 Action Plan for Implementation

Action	Lead Officer	Timeframe
Revised Policy to be shared via internal communication channels.	Patient Experience Team	By December 2026

Appendix 1 - Patient and Carer Information Approval Process

Producing New Digital or Hard Copy Information e.g. leaflets, web pages etc



Review of Existing Information

