



Policy and associated guidelines for the Production of Patient Information Leaflets

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In the case of hard copies of this policy the content can only be assured to be accurate on the date of issue marked on the document.

For assurance that the most up to date policy is being used, staff should refer to the version held on the intranet

Version Tracking

Version	Date Ratified	Brief Summary of Changes	Author
		<p>Change of Title: Leaflets to include twitter and web address: added consent paragraph for use of Paeds leaflets only: removed the words 'Special Needs; pg 11: Reporting arrangement to PESG: Leaflets only produced in absence of a nationally recognized specialty body.</p> <p>Added Fruitiger as an additional font use: removed 'are responsible for' under Medical Illustrations duties and responsibilities</p>	Patient Experience

CONTENTS

QUICK REFERENCE GUIDE..... Error! Bookmark not defined.

1. INTRODUCTION Error! Bookmark not defined.

2. PURPOSE Error! Bookmark not defined.

3. SCOPE Error! Bookmark not defined.

4. DEFINITIONS Error! Bookmark not defined.

5. **DUTIES AND RESPONSIBILITIES...** Error! Bookmark not defined.
6. **PROCESS** Error! Bookmark not defined.
7. **TRAINING REQUIREMENTS.....** Error! Bookmark not defined.
8. **REFERENCES AND ASSOCIATED DOCUMENTATION** Error!
Bookmark not defined.
9. **EQUALITY IMPACT STATEMENT...** Error! Bookmark not defined.
10. **MONITORING** **COMPLIANCE**
14

Appendices

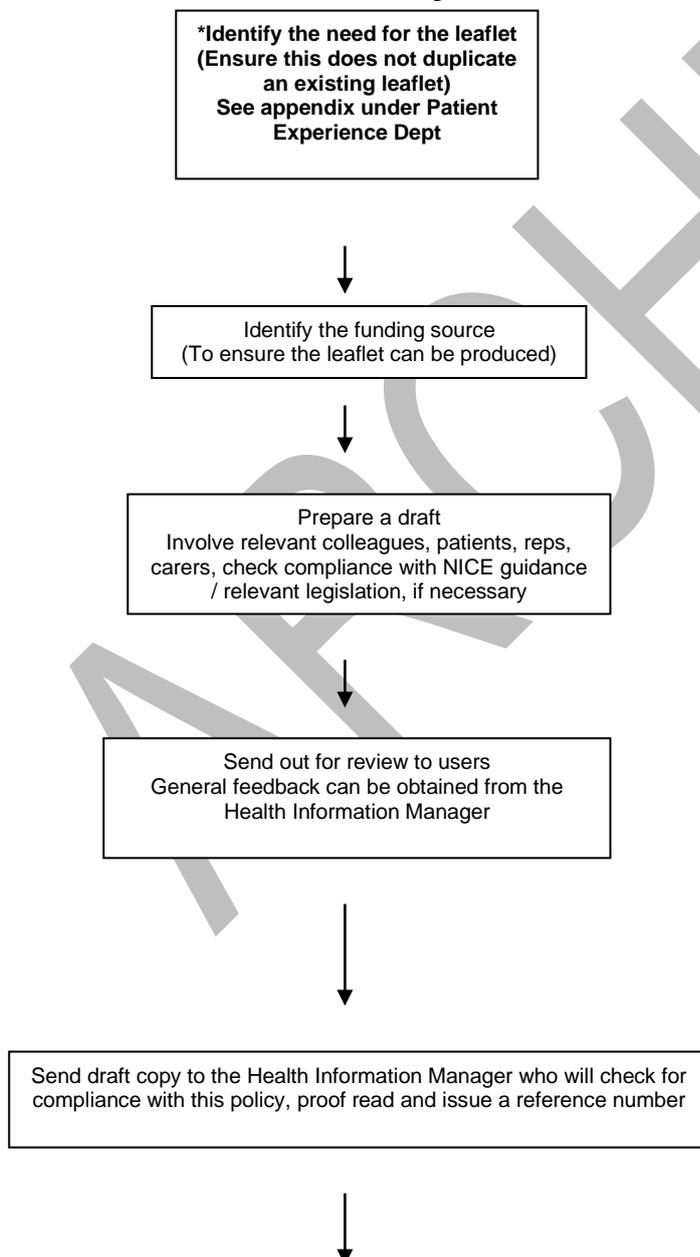
- Appendix A Guidance for producing patient information
- Appendix B Checklist for drafting patient information
- Appendix C Validation form for internally produced patient information
- Appendix D Validation form for internally produced (medication) patient information
- Appendix E Validation form for externally/nationally produced information

QUICK REFERENCE GUIDE

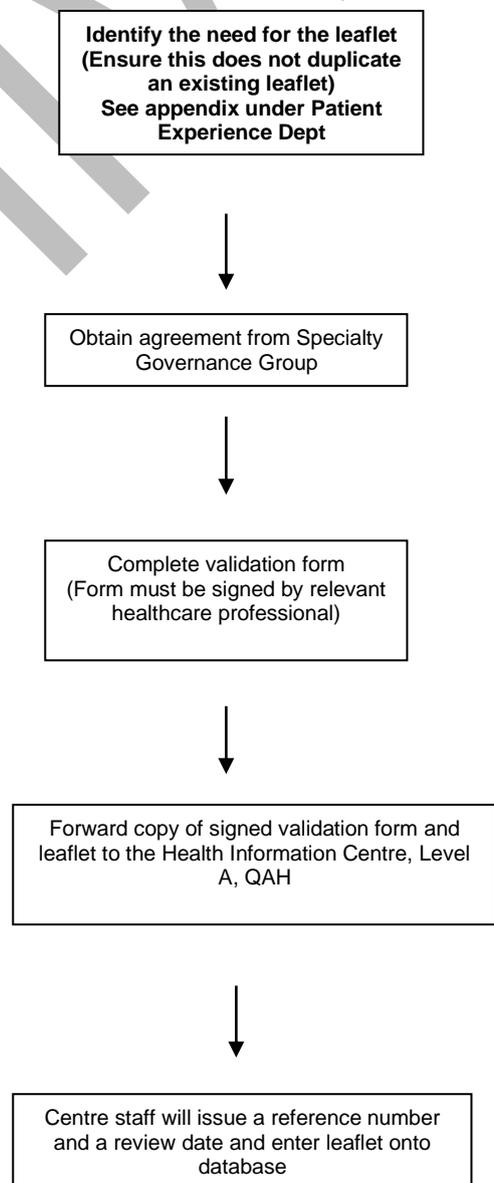
This policy must be followed in full when developing or reviewing and amending Trust procedural documents.

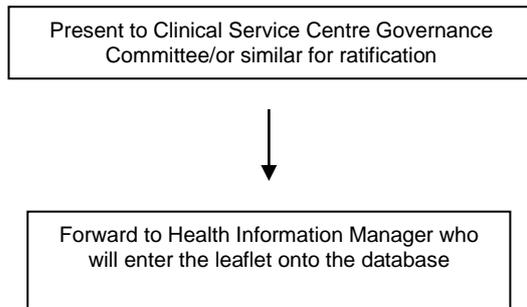
For quick reference the guide below is a summary of actions required. This does not negate the need for the document author and others involved in the process to be aware of and follow the detail of this policy.

1. New Patient Information external/nationally



2. Using pre-existing produced patient information





Although this quick reference and the body of this policy refer to patient leaflets, the exact same principles apply to the production of patient information in any media e.g. DVDs

*New patient information leaflet process should only be used in the absence of a leaflet from nationally recognised specialty body or be specific to a Trust process, procedure or service.

1. INTRODUCTION

The Department of Health 'Toolkit for Producing Patient Information' (DOH 2004) recognises that good quality information is central to the patient journey and a key element to the overall quality of the patient experience

Good quality information can empower the patient in many ways. It acts as a memory aid, or a prompt for further questions about their treatment or aftercare. It is not intended to be a substitute for face-to-face contact and discussion, but to complement this and to provide a tool for healthcare professionals to help guide patients through their treatment pathway

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2. PURPOSE

The purpose of this policy, and associated Guidelines for Producing Patient Information, is to ensure:

- Current and retrospective control of all patient information leaflets
- A framework for the development, validation and review of all patient information leaflets
- That all written information in circulation is at all times safe and fit for purpose, reflecting the latest evidence-based / national guidance or legislation;
- That information is developed in a consistent format, is of good quality, easy to read has clear expectations stated where appropriate; and
- That any patient information does not explicitly or inadvertently discriminates in any way.

Although through the body of this policy information is often referred to as being in leaflet format, the exact same principles can be applied to the production of patient information in any media e.g. DVDs, CDs

3. SCOPE

The policy and guidelines apply to:

- New and existing documents
- All employees of the Trust involved in the production of patient information
- All individuals working on behalf of the Trust and who are involved in the production of written information for patients specific to Portsmouth Hospitals NHS Trust

'In the event of an infection outbreak, flu pandemic or major incident, the Trust recognises that it may not be possible to adhere to all aspects of this document. In such circumstances, staff should take advice from their manager and all possible

action must be taken to maintain ongoing patient and staff safety'

4. DEFINITIONS

Patient information is information designed to provide advice or raise awareness about conditions, treatments, procedures, examinations and services which supports the verbal communication held at a one to one consultation.

5. DUTIES AND RESPONSIBILITIES

Clinical Service Centre Governance Group/other relevant groups are responsible for assuring themselves that, prior to ratification, any patient information is appropriate and reflects current practice.

Health Information Manager is responsible for:

- Ensuring compliance with the associated policy guidelines (Appendices C and D)
- Maintaining the database of ratified patient information
- Supporting the author in the process of producing and reviewing patient information
- Informing specialties that their information is due for review every two years
- Maintaining an archive record of all Trust patient information

Author of any information is responsible for

- Ensuring the information contained in any documentation is compliant with NICE guidance and current legislation, if relevant
- Reviewing information every two years or earlier should legislation or research dictate
- Identifying a funding source for the production of any information

- Obtaining ratification from their Clinical Service Centre Governance Group/or relevant group and giving the name/date of ratification to the Health Information Manager.
- Maintaining a record of their documents and review dates to ensure awareness of their current information needs
- Informs the Health Information Manager of any retired leaflets for archiving

Consultant/Matron/Specialist Nurse is responsible for agreeing and signing off any relevant external/nationally produced patient information

All Managers have a responsibility to ensure that:

- For non-clinical areas any external/nationally produced patient information is, and remains, current
- All staff proposing to produce a leaflet are aware of this policy and associated guidelines

Medical Illustration Staff ensures that;

- Only information approved via the process outlined in this policy and associated guidelines is printed
- All new and revised patient information is produced in the approved policy and Trust Corporate Identify format

Patient Groups/Health Information Manager are responsible for ensuring that any information placed before them is understandable and readable.

6. PROCESS

6.1 Process for producing patient leaflets

Need for leaflet identified: eg: new procedure or service- check that national leaflet does not exist

Author to identify funding
(to ensure leaflet can be produced)

Author to

- Confirm NICE compliance
- Confirm relevant legislation
- Confirm evidence-based best practice
- Discuss with relevant colleagues

Author to

- Draft leaflet (Guidance is at Appendix A) on an A4 sheet(s)
- Complete checklist (Appendix B)
- Present draft to Patient Group/ – for feedback on content and readability
- Forward leaflet to Health Information Manager, Health Information Centre, Level A, QAH or by e-mail

If no relevant Patient Group exists, the draft should be presented to the Health Information Manager for general feedback

Health Information Manager will:

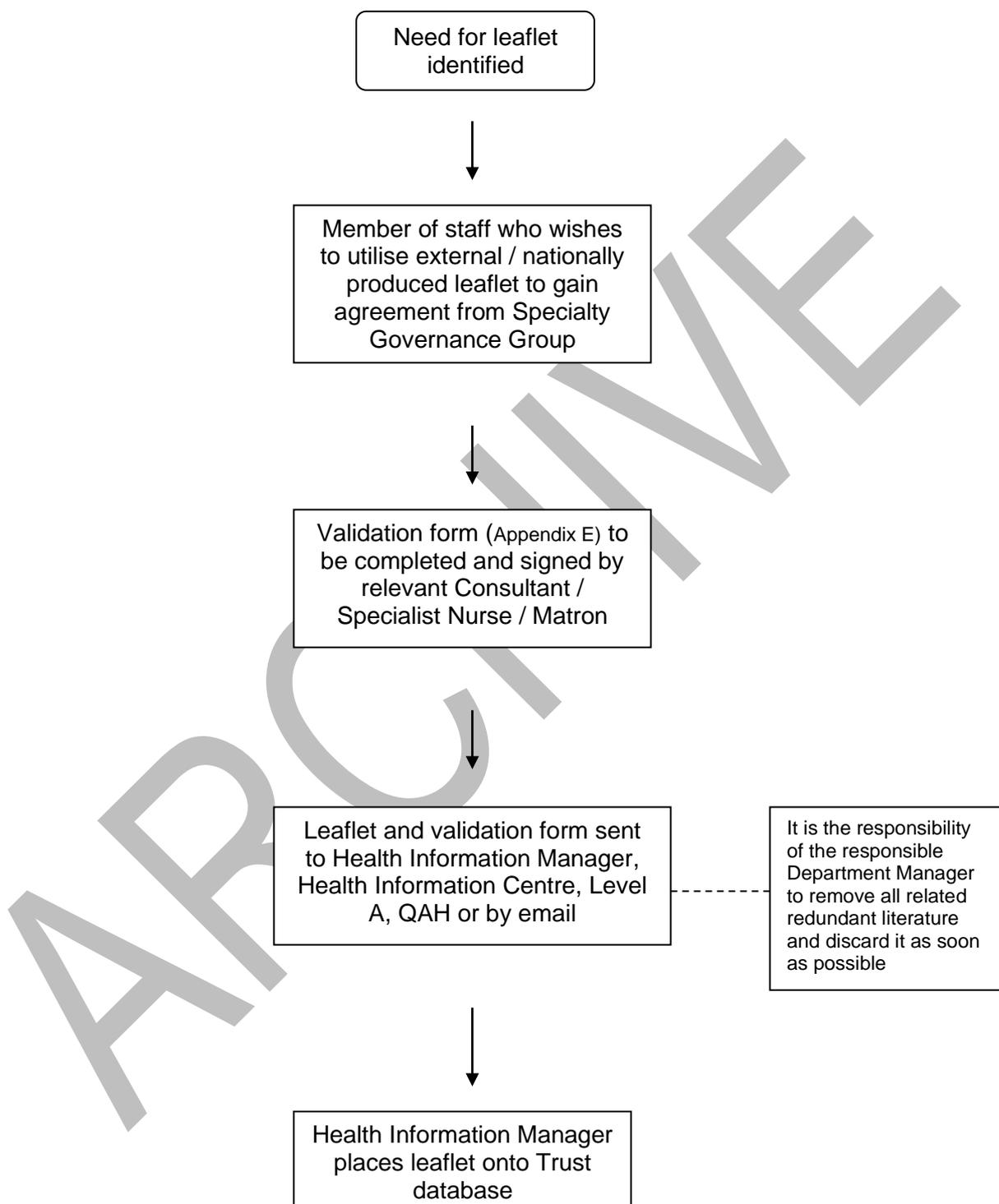
- Proof read the leaflet
- Check for compliance with this policy, using
 - Appendix C for general leaflets
 - Appendix D for medication leaflets
- Issue a reference number
- Return validated leaflet to the author

Author to

- Obtain ratification for leaflet from Clinical Service Centre Governance Group/or relevant group
- Return ratified leaflet to the Health Information Manager with date of ratification and name of group

Health Information Manager places leaflet onto Trust database and archives old leaflet

6.2 Process for using pre-existing external / nationally produced patient information



6.3 Review arrangements

6.3.1 All leaflets must contain a review date

6.3.2 The review date will normally be two years from the date of production. However, it is essential that information is reviewed and amended earlier should legislation or research dictate

6.3.3 The Health Information Manager will notify authors that their information is due for review two months prior to the review date

6.3.4 When information is reviewed and/or amended significantly, the process for the production of patient leaflets must be repeated. When reviewing and updating leaflets it is useful to consider the following:

- Continued accuracy of the information
- Any changes in practice/procedure/research or legislation
- Improved evidence base
- Improved diagrams
- Changes to location
- Changes to telephone numbers
- Changes to contact / opening times
- Any further available information which will better inform the patient

6.3.5 All redundant information must be removed from the ward/department as soon as possible

6.4 Archiving arrangements

6.4.1 The Health Information Manager maintains an archive record of all redundant PHT leaflets on the Trust Patient Information database and in hard copy

7. TRAINING REQUIREMENTS

It is considered unlikely that any specific training will be required to implement this policy. Guidance and advice may always be sought from the Health Information Manager.

8. REFERENCES AND ASSOCIATED DOCUMENTATION

Commission for Health Improvement. (2004). *Unpacking the Patients Perspective: Variations in NHS Patient Experience in England.* London: Commission for Health Improvement. Available at: www.chi.nhs.uk

Department of Health. (2001). *Good Practice in Consent Implementation Guide: Consent to Examination or Treatment.* London: Department of Health. Available at: www.dh.gov.uk

Department of Health. (2004). *Better information, better choices, better health.* London: Department of Health. Available at: www.dh.gov.uk

Department of Health. (2004). *Toolkit for Producing Patient Information.* London: Department of Health. Available at: www.dh.gov.uk

Department of Health. (2005). *Creating a Patient-led NHS. Delivering the NHS Improvement Plan.* London: Department of Health. Available at: www.dh.gov.uk

Department of Health (2010) *Our Health, Our Care, Our Say*
Available at: www.dh.gov.uk

9. EQUALITY IMPACT STATEMENT

Portsmouth Hospitals NHS Trust is committed to ensuring that, as far as is reasonably practicable, the way we provide services to the public and the way we treat our staff reflects their individual

needs and does not discriminate against individuals or groups on any grounds.

This policy has been assessed accordingly

Our values are the core of what Portsmouth Hospitals NHS Trust is and what we cherish. They are beliefs that manifest in the behaviours our employees display in the workplace.

Our Values were developed after listening to our staff. They bring the Trust closer to its vision to be the best hospital, providing the best care by the best people and ensure that our patients are at the centre of all we do.

We are committed to promoting a culture founded on these values which form the 'heart' of our Trust:

Respect and dignity

Quality of care

Working together

No waste

This policy should be read and implemented with the Trust Values in mind at all times.

10. MONITORING COMPLIANCE

As a minimum the following elements will be monitored

ARCHIVE

Minimum requirement to be monitored	Lead	Tool	Frequency of Report of Compliance	Reporting arrangements	Lead(s) for acting on recommendations
100% of leaflets (internally and externally sourced) are produced in line with the requirements of this policy	Health Information Manager	Random Audit (using Appendix D) of: <ul style="list-style-type: none"> • 10 x internal produced leaflets • 10 x externally sourced leaflets 	Annually	Policy audit report to: <ul style="list-style-type: none"> • Patient Experience Steering Group (PESG) 	CSC Management Teams
100% of leaflets are archived	Health Information	Random Audit of	Annually	Policy audit report to:	Head of Patient Experience

Policy and associated guidelines for the Production of Patient Information Leaflets:
 Issue Date: 01/05/2016 (unless requirements change)

Issue Number 6 Issue Date 08/05/2014

appropriately	Manager	<ul style="list-style-type: none"> • 10 x internal produced leaflets • 10 x externally sourced leaflets <p>to ensure earlier versions have been archived</p>		<ul style="list-style-type: none"> • Patient Safety Working Group 	
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Appendix A

Guidelines for producing patient information

1. Introduction

The following guidelines have been designed to provide assistance whenever you are planning a new leaflet or revising an existing one. They apply to the production of all patient information, regardless of the media: written, audio, DVD or CD.

There may be occasions when accessible or easy read information is required for a person with learning disabilities. The information needs to be meaningful to the person(s) and may be developed as a 'one off' to meet individual needs. When a document is produced it will be in accordance with the DOH's Guidance for People who Commission or Produce Easy Read Information (revised edition 2010) or accessed from a reputable source. If a number of easy read information leaflets are required they will be developed in collaboration with service user groups and local learning disabilities services in accordance with the policy

Further advice and assistance can be obtained by contacting the Health Information Manager

- By phone at the Health Information Centre QAH :
Ext. 6757
- By post to the Health Information Centre, Level A,
Queen Alexandra Hospital, Cosham. Portsmouth,
Hants PO6 3LY

2. Where do I begin? Issues to Consider

The following points should be considered before introducing a new piece of literature:

- Identify a need for the information ensuring that you **are not** duplicating something that is already available. Look on the NHS Choices or Patient UK websites first; www.patient.co.uk www.nhs.uk
- Is there another area within the Trust that may use the same information? Has anything been produced nationally, i.e. British Heart Foundation?
- Identify funding resource to ensure production of the leaflets
- Decide what group the information is intended to target? Inpatient, outpatient, carer, child, etc. - different consumer groups have different needs. Consider doing an Equality Impact Assessment (EIA) if necessary. An EIA can be downloaded from the Portsmouth Hospitals NHS Trust Intranet
- Think about the whole process - not just compilation and production, but also distribution, updating, recurring costs, and continuing contact point.
- Evaluate throughout the process, involving any relevant department and evaluations from your patients/public

3. Equality and Diversity

Never make assumptions about gender, age, race, sexuality or physical ability.

- **Gender**

When general information can only be applied to only one gender, for example: vasectomy or hysterectomy, use the phrasing men or women,

rather than people or patients. If the information relates to both genders use she/he or him/her where appropriate.

- **Age**

Be aware of the age group to which the information applies. If the information covers a range of ages ensure that all parties will be able understand it. This includes the use of photographs/drawings: keep them simple.

- **Race**

Remember that we live in a multicultural society and the information should reflect this. Consider cultural differences and religious beliefs. Would it be possible to translate the information should the need arise? Remember, although a language can be spoken it does not always mean someone can read their own language

- **Sexuality**

It is advisable not to assume that everyone is heterosexual or married. For this reason it is recommended that the term partner is used rather than gender specifics.

- **Physical ability**

Details of appropriate access should be included where appropriate. Be mindful of the visually impaired as something that is pleasing to your eye may be difficult for them to read. It may be necessary to consider more suitable formats in addition to a standard print leaflet - an audio CD, DVD, large print or Braille.

The Department of Health has produced a set of basic guidelines for people commissioning

information in Easy Read aimed at people with learning disabilities can be found at www.dh.gov.uk/publications .

Portsmouth City NHS Trust also has a Learning Disability Service at St James' Hospital Portsmouth. Please contact the Health Information Centre for further information and help on Ext. 7700 6757.

4. Advertising/Sponsorship

The appropriateness of any advertising/sponsorship will be a corporate decision and must be submitted to the Information Governance Steering Group before being added to any patient information. Any organisation, product or service which may cause offence, may bring the Trust into disrepute either directly or through association is strictly prohibited. Therefore the following products must not be advertised:

- Cigarettes/tobacco
- Slimming products
- Cosmetics
- Formula milk
- Alcohol

Please note this list is not exhaustive: if you are not sure please contact the Health Information Manager on Ext 7700 6757

5. Copyright

Artwork, sketches etc obtained from any source (including the internet) are subject to copyright of the originator and permission from them must be obtained for each occasion that the artwork/sketch will be used. It is the responsibility of the originator of any patient information item to check the copyright of any material to be used and to obtain the relevant authorisation/agreement.

6. Content

- Ensure the purpose of the leaflet is reflected in the title - if this is not possible due to the sensitive nature please ensure it is stated at the beginning of the information.
- Write the information in plain English. Essential medical terminology must only be used if there is no alternative. When the use of medical terminology is unavoidable this must always be explained www.plainenglish.co.uk
- It is essential that, as well as information about the benefits of the treatment / intervention, possible side effects and complications must also be clearly explained together with any risks; if those risks are greater than 1%.
- Be positive in your approach; highlighting what can be done. Avoid negative statements unless referring to specific instructions related to the clinical condition or proposed intervention e.g. you must not eat or drink
- Always include contact details of the relevant department.
- Give additional contact addresses for further information or self-help groups where appropriate.
- Give information on how to make a comment, compliment or complaint about the Trust.

Patient Experience Service information should be on all leaflets. Their email is

7. Layout and design

Font Style:

- Arial /fruitiger
- Font size of 12pts to be used as a minimum. This should be increased to 14pts - 16pts if the leaflet is specific to the visually impaired.
- Black ink on white paper. The use of colour, if essential, should be carefully selected.

Layout:

- Avoid the use of capitals and underlining as these are difficult for the visually impaired to read.
- Use bullet points to break up text and bold to emphasise areas of importance. The use of headings will make the information more manageable.
- Think logically when organising your text, a description of the disease/procedure followed by the routine sequence of events. This will assist in understanding the patient journey.
- Take care when using a picture or diagram to illustrate a point as it may confuse rather than clarify. Avoid the use of clipart.
- Do not use justified margins.

Front cover:

- This must display the Trust logo along with the title of the leaflet. If appropriate the relevant department can also be displayed.
- Front cover should be displayed in the Corporate Identity format.

Back cover:

This must display:

- A list of useful contacts for additional information (including self-help groups), where appropriate
- The name of the department producing the leaflet.
- The date the leaflet was produced and a review date (two years from production date is a realistic target).
- The reference for the Trust (this will be allocated to you by the Health Information Manager or Health Information Centre for external leaflets).
- Copyright symbol © Portsmouth Hospitals NHS Trust
- PHT Twitter account address - **Follow us on Twitter @QAHospitalNews**
- PHT Web address – www.porthosp.nhs.uk
- Specialist Support paragraph

8. Compulsory Paragraphs

Specialist Support (to be put on back of the leaflet)

This leaflet can be made available in another language, large print or another format. Please speak to the Ward Manager or contact the Health Information Centre Tel: (023) 9228 6757, who can advise you.

The paragraphs below must either be included within the information produced or given as a separate leaflet.

Consent- What does this mean? (for use on general leaflets)

Before any medical professional examines or treats you they must have your consent or permission.

Consent ranges from allowing a doctor to take your blood pressure - rolling up your sleeve and presenting your arm is implied consent - to signing a form saying you agree to the treatment or operation.

It is important **before** giving permission that you understand what you are agreeing to. **If you do not understand – ask.** More detailed information is available on request.

Consent- What does this mean? (for use on paediatric leaflets)

Before any health professional examines or treats you they must have your consent or permission.

Consent may be implied (e.g. offering a wrist for taking a pulse) or written (where you sign a form agreeing the treatment/operation). Young people are presumed to be able to give consent depending on their maturity and the nature of the decision. Where a child is not competent to give consent, only a person (or body) with parental responsibility may consent on the child's behalf. More detailed information is available www.dh.gov.uk

NB: If you are planning to produce an Advice Sheet for patients e.g. Discharge Advice, Diet Advice, this consent paragraph need not be included.

Information we hold about you and your rights under the Data Protection Act

Please refer to the booklet 'Your Healthcare Information – Your Rights! Our Responsibilities!' for further guidance.

How to comment on your treatment

We aim to provide the best possible service and staff will be happy to answer your questions. However, if you have any concerns you can also contact the Patient Experience Service on 0800 917 6039 or E-mail

portsmouthhospitals.patientexperience@porthosp.nhs.uk

9. Note

This process must now be followed when revising or planning new items of patient information. Any literature produced outside of this process will be not be endorsed by the Trust. Therefore, neither the NHS logo nor the Trust name can be used on such items. A sticker will be provided to identify the externally produced leaflet as being passed through the process detailed here in the policy.

Appendix B

CHECK LIST FOR DRAFTING A PATIENT INFORMATION LEAFLET (for author use)

TITLE OF PUBLICATION	
WARD / DEPARTMENT	
CONTACT NUMBER	
Presentation	
Is the layout clear and legible?	
Is the font size 12 – 16pts in Arial/fruigtiger?	
Is good use made of headings / bold text (underlining, justified margins or block capitals to be avoided)?	
Has copyright been sought, if required?	
Have special needs been considered accordingly?	
Front Cover	
Is the NHS Logo present?	
Is the leaflet title clear?	
Is the department/specialty/ ward initiating the information present?	
Have you included the Specialist support paragraph?	
Main Body Content – for specific conditions	
Is there a clear description of the condition /operation /procedure?	
Are the risks and benefits of treatment made clear?	
Are there clear instructions for preparation required before the operation/procedure?	
Are the treatment options given including non-treatment, and alternatives (if appropriate)?	

Are the discharge details clear, including what signs to look for at home/time off work certificate required?	
Are the points of contact clear?	
Does the leaflet include:	
<ul style="list-style-type: none"> • A brief description of consent and the Data Protection Act? 	
<ul style="list-style-type: none"> • The specialist support paragraph 	
<ul style="list-style-type: none"> • The need for someone to collect the patient from hospital, if appropriate 	
<ul style="list-style-type: none"> • Signs and symptoms to look out for at home 	
<ul style="list-style-type: none"> • Length of time it may take them to recover: advice on driving where relevant 	
<ul style="list-style-type: none"> • Taking time off work and how to obtain a medical certificate, if necessary 	
<ul style="list-style-type: none"> • Follow up arrangements 	
<ul style="list-style-type: none"> • Contact details of the relevant department / ward 	
<ul style="list-style-type: none"> • References and contact addresses for more detailed information or self-help groups, if appropriate 	
<ul style="list-style-type: none"> • Details on how to give feedback or make a complaint. Use Patient Experience Service as contact portsmouthhospitals.patientexperience@porthosp.nhs.uk Tel: 0800 917 6039 	
For Specific Specialties – for information being produced by a specific ward/department the following should be included	
Brief description of the specialty and the service it provides	
Clear directions from the main entrance to the ward /	

department	
Opening times for the department / visiting times for the ward	
What to expect whilst in the department / ward e.g. approximate length of stay, tests	
Clear instructions on preparation for procedure or admission, including what to bring in, if relevant	
Information on the facilities available with locations e.g. toilets, refreshments	
Clear advice on discharge, including	
<ul style="list-style-type: none"> • The need for someone to collect them, if appropriate 	
<ul style="list-style-type: none"> • Signs and symptoms to look out for at home 	
<ul style="list-style-type: none"> • Length of time it may take them to recover: advice on driving where relevant 	
<ul style="list-style-type: none"> • Taking time off work and how to obtain a medical certificate, if necessary 	
<ul style="list-style-type: none"> • Follow-up arrangements 	
<ul style="list-style-type: none"> • Contact details of the relevant ward / department 	
<ul style="list-style-type: none"> • References and contact addresses for more detailed information or self-help groups, if appropriate 	
<ul style="list-style-type: none"> • Details on how to give feedback or make a complaint. Use Patient Experience Service as contact portsmouthhospitals.patientexperience@porthosp.nhs.uk Tel: 0800 917 6039 	
<p>Content for Medicines related Patient Information Leaflets – decide on whether a local leaflet is required or whether the pharmaceutical manufacturer’s patient information will suffice. Otherwise</p>	

Ensure information provided does not contradict the Summary of Product Characteristics (SPC) or Patient Information Leaflet provided by the manufacturer	
Provide a copy of the draft to the relevant clinical pharmacist for approval / review prior to taking it through the approval process with the Health Information Manager	
Ensure the evidence base for the leaflet is given to the Health Information Manager, in order that it can be recorded on the Medicines Internal Validation Form	
Language	
Is the information clear and understandable?	
Are the sentences short and simple?	
Has medical jargon been avoided or explained in glossary where possible?	
Back Cover	
Is there a glossary of terms, if appropriate?	
Are there clear instructions on how to comment about their treatment? Patient Experience Service contact information to be on all leaflets portsmouthhospitals@porthosp.nhs.uk Tel: 0800 917 6039	
Are additional sources of information / contacts listed?	
Is the name of the department producing the information mentioned?	
Is there a date of publication?	
Is there a review date?	
Is the copyright symbol in place?	
Has the leaflet been reviewed and agreed by a Patient Group – if available?	
Have copies of the evaluation forms been sent to the	

ARCHIVE

Appendix C

**VALIDATION FORM FOR INTERNALLY
PRODUCED PATIENT INFORMATION**
(for use by Health Information Manager)

Title of publication
.....
.....

Date of
publication.....
.....

Author of publication
.....
.....

Ward/Dept
.....
.....

Contact number

Presentation	Y/N	Comments
Is the layout clear and legible?		
Is the font size 12-16pts in Arial/fruigtiger?		
Is good use made of headings/bold text? (Please avoid underlining, justified margins and block capitals)		
Have special needs been considered accordingly?		

Front Cover		
Is the NHS Logo present?		
Is the leaflet title clear?		
Main Body Content		
Is there a clear description of the condition/operation/procedure?		
Are the treatment options given including non-treatment, and alternatives (if appropriate)?		
Are the benefits and risks of treatment made clear?		
Are there clear instructions for preparation required before the operation/procedure?		
Are the discharge details clear, including what signs to look for at home?		
Are the points of contact clear?		
Does the leaflet include a brief description of consent and the Data Protection Act?		
Language		
Is the information clear and understandable?		
Are the sentences short and simple?		
Has medical jargon been avoided or explained in a glossary where possible?		
Back Cover		
Is there a glossary of terms present, if appropriate?		
Are there clear instructions on how to comment about their treatment? (Patient Experience		

Service contact to be on all leaflets).		
Have the following been added? <ul style="list-style-type: none"> • Specialist Support paragraph • Twitter address • Web address 		
Are there additional sources of information/contacts listed?		
Is the name of the department producing the leaflet mentioned?		
Is there a date of publication?		
What is the review date?		
Is there a reference?		
Is the copyright symbol in place? © Portsmouth Hospitals NHS Trust		

Has the leaflet been reviewed and agreed by a Patient group?

Yes/No

Have copies of the evaluation forms been received?

Yes/No

Has funding been secured for the printing of leaflets and ongoing costs?

Yes/No

Has the leaflet been endorsed by the Clinical Service Centre Governance Group/or similar? What date was this done? (dd/mm/yyyy)

Yes/No

This leaflet meets/does not meet the required standard.

Name

Signature

Position

Date

.....

Appendix D

**VALIDATION FORM FOR INTERNALLY PRODUCED
PATIENT INFORMATION LEAFLETS ON MEDICATION**

Title of publication

.....
.....

Date of

publication.....
.....

Author of publication

.....
.....

Ward/Dept

.....
.....

Contact number

Presentation	Y/N	Comments
Is the layout clear and legible?		
Is the font size 12-16pts in Arial/fruitiger?		
Is good use made of headings/bold text? (Please avoid underlining, justified margins and block capitals)		

Have special needs been considered accordingly?		
Front Cover		
Is the NHS Logo present?		
Is the leaflet title clear?		
Main Body Content		
What is the medication and what is it for?		
Is there a clear description of the medication?		
Are the treatment options given including non-treatment and alternatives (if appropriate)?		
Are the side effects / risks and benefits of treatment made clear?		
Is it there an explanation on how it is given?		
How often should it be given?		
Are the discharge details clear, including what signs to look for at home?		
What should be avoided or added when taking this medication? E.g. certain foods		
What to do if the medication is not taken properly?		
Does the leaflet tell the patient to advise the doctor of any other medications they are taking?		
Are the points of contact clear?		
Does the leaflet give advice on repeat prescriptions?		
Does the leaflet advise on storage of medication, including out of reach of children and does it need to be in the		

fridge?		
Language		
Is the information clear and understandable?		
Are the sentences short and simple?		
Has medical jargon been avoided or explained in a glossary where possible?		
Back Cover		
Is there a glossary of terms present, if appropriate?		
Have the following been added? <ul style="list-style-type: none"> • Specialist Support paragraph • Twitter address • Web address 		
Are there clear instructions on how to comment about their treatment? (PALS contact to be on all leaflets).		
Are there additional sources of information/contacts listed?		
Is the name or appointment of the producer mentioned?		
Is there a date of publication?		
What is the review date?		
Is there a reference?		
Is the copyright symbol in place? © Portsmouth Hospitals NHS Trust		

Has the leaflet been reviewed and agreed by a Patient group?	Yes/No
Have copies of the evaluation forms been received?	Yes/No
Has funding been secured for the printing of leaflets and ongoing costs?	Yes/No
Has the leaflet been endorsed by the	Yes/No

Clinical Service Centre Governance
Group/or similar? What date was this
done? (dd/mm/yyyy)

This leaflet meets/does not meet the
required standard.

Name

Signature

Position

Date

Appendix E

VALIDATION FOR EXTERNAL/NATIONALLY PRODUCED PATIENT INFORMATION

Title of Publication	
Date of Publication	
Author of Publications	
What is the publication for?	
Does it explain the topic and related issues fully?	YES / NO
Is the information up to date?	YES / NO

Does the information favour one treatment/drug?	YES / NO
Does the information list risks/benefits and alternatives?	YES / NO
Does it explain what happens before, during and after treatment?	YES / NO
Does it explain the signs/symptoms to look for at home?	YES / NO
Does it give a point of contact if there are any concerns at home?	YES / NO
Does it explain what is meant by the term 'consent?'	YES / NO
Does it explain our responsibilities to patient confidentiality?	YES / NO
Does it give details for other sources of information?	YES / NO
Have you discussed this with other specialities involved in the treatment?	YES / NO
Are the company/association that produced the literature advertised or promoted in any way other than named as the publisher?	YES / NO
<p>I am satisfied that the publication named above is suitable for use in the</p> <p>Ward/Department of at Hospital.</p> <p>Consultant/Matron/Nurse Specialist Signature </p>	

Print Name

Job Title **Date**

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