NHS Lanarkshire, North and South Lanarkshire Councils want your views on their services

Event Report
Accessibility

If you would like this document in a language or format of your choice including large print and audio or if you have any questions or want to feedback please contact:

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What we did

- Held an event on the 19th October 2015 at South Lanarkshire Council Almada Street Hamilton
- Invited members of the Deaf and deafblind communities to come and tell us about their experiences of using our services

Who was involved in organising it?

- NHS Lanarkshire
- Deaf Equality and Accessibility Forum
- Deaf Services Lanarkshire
- Deafblind Scotland
- North and South Lanarkshire Councils
- Scottish Council for Deafness

Why did we do it?

We wanted to learn from peoples’ experiences of our services and hear about

- What we did well
- What we could do better and
- If there were any barriers for deaf and deafblind people to access our services

The Event: Opening and Welcome

Vicky Chapman opened the event. She is a member of the Deaf community. Vicky shared some of her personal experiences and challenges when using / accessing NHS services in the hope that her feedback would help to inform and influence change and lead to improvements for members of the Deaf and deafblind community.

![Image of Vicky Chapman giving a presentation](image-url)
Calum Campbell (NHS Lanarkshire Chief Executive) welcomed all saying that he hoped this would be, “the first step” towards wider and fuller engagement with the Deaf community.

Setting the scene for the evening he invited the 45+ attendees from the Deaf and deafblind community to provide feedback about:

- NHS services in general
- Specifically on the recently developed “Deaf and deafblind passport” which aims to improve communication between patients and staff

He also invited the community to take the opportunity to get involved with the NHS Lanarkshire website review. Calum also briefly mentioned NHS Lanarkshire Clinical Strategy

Mick Fleming from the University of the West of Scotland spoke and asked members of the community to get involved with an independent research project about Deaf and Deafblind people accessing and using public services.

The work is funded by North & South Lanarkshire Councils and will begin before the end of the year. Contact details: Email: Mick.Fleming@uws.ac.uk

Phone: 01292 886455 Mobile: 07534816656 Text: 07534816656 via contact SCOTLAND-BSL: http://contactscotland-bsl.org/
The Event / the Evening

The evening was split into two sessions - each 40 minutes long. The topics discussed were -
- NHS Lanarkshire services
- North & South Lanarkshire Council services

We asked three questions in each session (these had been sent to all attendees prior to the event)
- Do Deaf/deafblind people access our services?
- If Deaf/deafblind people do – what is good / what could be better?
- If Deaf/deafblind people don’t access our services, why not?

The questions were developed by the organising group which included representatives of the Deaf/deafblind community, NHS Lanarkshire and North and South Lanarkshire Councils.

Common themes from the feedback sessions:

Carrying out everyday activities can be challenging and frustrating for members of the Deaf and deafblind communities. The following issues were identified as common areas of concern across the NHS and the Councils:
- There was a perceived lack of Deaf awareness amongst staff – particularly frontline, reception/meet and greet staff. Especially around communication needs.
- Staff need to be aware that British Sign Language (BSL) is the first language of many people from the Deaf community and that it is very different from English. So they may not read/write or understand English. Therefore, written information cannot always be relied upon.
- Staff should ask the patient what the best communication method for them is.
- Staff should not make assumptions about the Deaf person’s lip reading/reading abilities.
- Staff should regularly check that the patient (Deaf or hearing) has understood what is being said.
- Not understanding that people feel isolated due to lack of communication
- Better sign posting to other services
- Some staff attitudes – that they require to be more patient
Family and friends should not be used as interpreters. Staff should not encourage them to do so. When they are used they often lack the signed vocabulary to accurately interpret so the patient only gets, at best, a potted version of what was said or - even worse - thumbs up! Remember that in a personal or emotional situation the Deaf person may not want their family/friend to have knowledge of their situation or may need them to be there in a supportive role not in a communication role.

- Video relay interpreting was not reliable (screen freeze, time delay) – face-to-face was preferred
- More opportunities for Deaf people to be involved with Lanarkshire Groups/ committees which both the NHS and Councils have.
- Deaf people are reluctant to complain even if they know how to. There was a lack of knowledge on how to make a complaint.
- Many people had experienced interpreters being cancelled or not turning up and the service providers need to know the impact that this has on mental health
- People’s files/notes should have a flag saying they are Deaf or deafblind
- There were many older people at the event who were concerned at how they contact emergency services in an emergency. Was there enough awareness that if you register your phone number you can call 999 - a GPS would find and track you
- People want to be independent when booking appointments.
- Deaf people want, and need, more support to embrace new technology. Some Deaf people said they stopped going into Council buildings a long time ago because they did not understand the technology being introduced.
- Some older people are using faxes to communicate for appointments etc.
Feedback about NHS Lanarkshire:

- GPs and other Health Professionals need to take the extra time required to properly attend to and listen to a Deaf person.
- Wards can be busy/noisy which affects patients ability to communicate
- Planned treatment – communication needs should be notified in advance
- Family should not be used for interpreting as they may not understand medical terminology or want to share the diagnosis with the patient
- There is a lack of visual aids when attending for appointments (LED detailing patient name and treatment area to attend would be helpful)
- Some GP’s didn’t have the capacity to record that patients required BSL support on their IT systems which meant interpreters were not always booked
- Some people had experienced delays in getting routine appointments to allow interpreting support to be arranged
- There is a lack of meaningful interaction between NHS staff and local Deaf groups. This could be resolved with promotional work being undertaken - with the appropriate communication support.
- More opportunities for Deaf people to be involved with NHS Lanarkshire Groups / committees and
- Not enough health promotion outreach/community based work done with the Deaf/deafblind communities, especially through existing clubs and networks

What we do well:

- When time spent with patient, it was a better experience
- Good experience of dental services - good explanations – but based on dentist good practice/personality i.e. took off mask to explain things
- Having basic knowledge of BSL – a podiatrist is a level 3 uses her skills to explain simple aspects of care
- Some staff recognise that patience is required to explain things

- Booking interpreters when requested.
Feedback about North & South Lanarkshire Councils:

- Specialist social workers/team to understand and meet the needs of Deafblind people
- Recognising that written English is not the first language of a deaf person and that writing down information isn't always ok.
- A specialist/nominated social worker for sensory impairment
- Homecare services not skilled to communicate
- Social work assessments/better assessments of communication needs
- Traffic/road issues – no dropped ramps in public areas
- Check specialist equipment regularly after installation
- Better information on other services such as carers, respite
- Better access to interpreters during respite
- Attitudes of staff can determine type of service experience
- How do people communicate with Council services?
- There are issues with Type Talk - very often it just rings-out
- North Lanarkshire L App – to report a repair take a photo and an appointment is booked through the App – ‘quite impressive’
- Sites which have staff who can sign BSL could be advertised. However, it is important to remember that if these staff are not signing regularly they may forget or become less confident to sign to a Deaf person
- Too many sites for different services

What we do well:

- Provision of guide communicators support
- Social work good at getting repairs carried out quickly
- Support and advice on financial matters
- Parks/Personal gardening spaces well maintained

Why NHS and Council services are not used:

- Deaf people are aware of the basic services such as social work/housing/leisure services but many Deaf people are not aware of the range of other services available to them
- Don’t know about the range of services offered by NHS Lanarkshire
- Communication issues, confidentiality and BSL level one at money matters
Way forward:

The following actions were requested in order to improve the experience of Deaf and deafblind people trying to access local services:

1. Deaf awareness training for all frontline healthcare professionals, so that they have clear guidance of booking an interpreter. An interpreter should be offered to all Deaf patients that request one.
2. Any assessment needs to consider the person’s communication needs as this is key to their ability to be part of the decision making process.
3. Deaf friendly appointment system via e-mail and text messages to health services. “A video phone at the reception point of A&E and in GP surgeries so that the patient can access a translator as and when they need one.”
4. Better use of mobile phone communication Apps to improve access to council/health services at relevant contact points.
5. Access to preferred communication - Deaf and hard of hearing people should be given access to communicate in their preferred methods.
6. Better information of how to raise concerns or make complaints.
7. Deaf people registration - improved identification and registration of Deaf people within health settings. The following practical solutions were given by the responders: “All patient records should state if someone requires a BSL interpreter. There is no current system in place that stores this information.” “NHS cards are perhaps a good place to display whether someone is deaf and needs the support of BSL.”
8. Better outreach health education/promotion - a greater provision of information on local health services, particularly health awareness campaigns preferably via group talks or using BSL support.
9. More opportunities for the Deaf and deafblind community to be involved with public groups that help the NHS and Councils plan design and deliver services.
Conclusion:

The aim of the event was to bring people together to discuss their experiences of using and accessing the NHS and Council services. It revealed that there are a number of difficulties faced by Deaf and deafblind people in accessing services in Lanarkshire and that the communities are not asking for special treatment, just equal treatment.

Most, importantly we also found out about what we need to do to improve Deaf and deafblind people’s experiences of accessing our services.

It is now up to NHS Lanarkshire and North and South Lanarkshire Councils to not only take action using the information from the event but also to continue talking to Deaf and Deafblind people to ensure we get it right.

Special thanks to Liz McCluskey (Deaf Services Lanarkshire), Enrique Canton (Deaf Equality and Accessibility Forum) and Suzanne Abbate (Deafblind Scotland) without whom the event would not have been a success, the speakers facilitating the event and all of the services who contributed to this event either by facilitating a workshop or attending with a stall. Most importantly we would also like to thank the Deaf and deafblind community for their support and the signers for a fantastic turn out.