

Raising standards of care for Deaf people in local hospitals: a progress report

- As a result of attending the event (pictured) we held with Deaf service users in January, the Royal Free London Hospital is now planning to deliver more Deaf awareness training for staff. The training will be delivered by Action for Hearing Loss and the first date is booked for July.
- At University College London Hospital (UCLH), where Deaf patients had experienced difficulties knowing when it was their turn to be seen, a trial of the use of vibrating buzzers has been successfully completed. The buzzers will be in use in all hospital departments by July.
- Again at UCLH, an audit is being carried out to check that staff involved in booking interpreters are contacting Deaf patients to confirm that British Sign Language (BSL) interpreters have been booked. The audit will be completed for the end of July.
- Our local work also helped to inform the debate in the House of Lords on the health of Deaf People which took place at the end of March.



A fuller list of the measures that local hospitals plan to take to improve the experience of Deaf people follows in the rest of this document.

Response from University College London Hospitals

You can read the full response [here](#).

1) On making complaints procedures accessible:

‘We intend to produce a video clip on how to complain and have this in place by September. This will be available via the Trust website and in most outpatients’ areas where there are flat screens available.’

2) One Deaf people having a negative experience at A&E because they are unable to hear their name being called out:

‘Vibrating buzzers have been successfully trialled; and will be rolled out to all departments. This is in progress and will be completed in July.’

3) On ensuring that appointment letters for Deaf patients have information on whether an interpreter has been booked:

‘All staff involved in booking interpreters are asked to ensure that they contact patients and confirm that BSL interpreters have been booked. We will be auditing this to see if this is happening across the Trust.’

They will also check whether email contact details are available on appointment letters, in case changes to bookings are needed. The audit will be completed by the end of July.

4) Can appointment letters state that this patient may need to be seen before others if there are long waits, as interpreters are only available for a booked time?

‘We appreciate the concerns which Deaf patients may have, but we feel that introducing this change could disadvantage others attending the clinic. However, what we will do is remind staff to book BSL requests for longer periods.’

5) On encouraging staff Deaf champions and ensuring Deaf awareness training is available to all staff and undertaken by all front-line staff.

‘UCLH actively promotes Deaf awareness training to all staff [...] We do not have any Champions as such but, due to the regular awareness sessions, staff have expressed an interest in learning basic BSL and this is currently being looked into. This is likely to be on the proviso that those attending will be asked to become Deaf Champions for their hospital site.’

Response from Royal Free London

You can read the full response [here](#).

1) On ensuring that staff who are responsible for booking appointments offer choice of interpreter gender to patients:

‘Royal Free London are developing a small PALS (Patient advice and liaison service) and Complaints project to work with the booking teams to ensure the correct information is supplied for the booking of interpreters and to develop a confirmation process for the patient file and patients.’

The project will be developed by June this year.

2) On encouraging staff Deaf champions and ensuring Deaf awareness training is available to all staff and undertaken by all front-line staff:

‘The Royal Free London Organisational Development and Learning Development teams are planning to deliver Deaf/deaf awareness training provided by Action for Hearing Loss as a result of attending the Healthwatch event in January. The first date is booked for July and an evaluation of the training will be carried out.’

3) On ensuring that appointment letters for Deaf patients have information on whether an interpreter has been booked:

‘This area has traditionally been a difficult area for acute trusts to meet the access needs of patients.’

4) On ensuring that clinical staff are aware of the rights of people using interpreters - to keep the interpreter with them during, for example, minor surgical procedures under local anaesthetic

‘Royal Free London currently supports all patients with communication access needs to have interpreters or advocates present before and after surgical procedures and with them if the patient is conscious during the procedure and it is medically appropriate.’

Response from the Whittington

The Whittington have not responded formally. On the subject of appointment letters having information about whether an interpreter has been booked, they said the following

‘These are issues we are aware of but having a report that outlines users experience in this way is very helpful in terms of presenting the issues internally and helping us prioritise taking it forward.’

The bigger picture: what's happening nationally

You can read more about the government response [here](#).

Following the House of Lords debate on the health of Deaf people, where the work we've been doing in Islington **was noted**, Baroness Jolly announced the government's plans for tackling the problem (the poorer experience Deaf people have using health services).

- NHS England are developing an information standard, which will ensure that Deaf people, as well as all other disabled patients, will be given information in a way that is appropriate for their needs. This standard will be finalised at the end of 2014, and all NHS organisations will have to follow the guidelines by 2015.
- The government is also developing a new action plan on hearing loss.

'It is the service provider's role to anticipate the requirements of disabled people and make reasonable adjustments for them in advance, before any disabled person tries to access their service.'

It is not acceptable for health services not to be equipped with communication support for those who need it. This may be British Sign Language, basic technology including display screens in GP waiting rooms, or text messaging services.'

Baroness Jolly, speaking on behalf of the government.