

## **Improving your Healthcare by Steve Powell, Chief Executive, Sign**

For many deaf people a visit to the doctor can be very unsatisfactory. Communication support is missing, there are often misunderstandings and sometimes even the diagnosis can be wrong. Research published by the RNID (*A simple cure: a national report into deaf and hard of hearing people's experiences of the NHS. March 2004*) highlighted some of the problems:

**35%** had experienced difficulty communicating with their GP or nurse

**15%** said they avoid going to see their GP; this doubles among sign language users

**28%** found it difficult to contact their GP surgery to get an appointment

**35%** had been left unclear about their condition

**33%** of sign language users were either unsure about instructions for medication, or had taken the wrong amount of a medication

**24%** had missed an appointment for simple reasons such as not being able to hear staff calling their name; 19% of whom had missed more than five appointments in a year

In hospitals:

**42%** of deaf and hard of hearing people who had visited a hospital (non-emergency) had found it difficult to communicate with NHS staff. This increased to 66% for sign language users

**70%** of sign language users admitted to A&E units were not provided with a BSL/English Interpreter to enable communication.

The evidence demonstrates a disturbing picture where deaf and hard of hearing people face difficult and often distressing obstacles in order to access the NHS.

This pattern has not altered for many, many years but it could change dramatically.... with your help.

The Department of Health published a report early in 2005 called Towards Equity and Access (TEA). Although this was about Mental Health and Deafness, 16 of the 26 recommendations in the report are about deaf people's general access to primary and secondary care. The government has recognized that unless a deaf person can access their GP, make an

appointment or receive an accurate diagnosis then there is a likelihood of deteriorating mental health.

Now the good news, why things could change so dramatically. The Department of Health has given £2.5m per year ongoing to implement those 26 recommendations. But, and there is always a but, although this money has largely gone to Primary Care Trusts (PCT's) they are not spending the money on implementing those recommendations. This is where you can help. Unless the deaf community understand that the inequalities which they have suffered for so many years have been recognized, and some simple pressure can make changes, then PCT's will continue to spend the allocated money elsewhere.

The DoH has set up an Implementation Panel to review what is happening to the money and recommendations. They have found

- The NHS is in breach of the DDA. The NHS is failing to make the reasonable adjustments required to make their services accessible to deaf people.
- The PCT's are not using the TEA funding to implement the recommendations in the report. Many PCT's are not aware they have money, others are spending it on different work or using it to reduce end of year deficits.

Pressure needs to be put on PCT's and the easiest way is to go to a PCT Board Meeting or AGM and ask a few simple questions about what they have done with your money.

We can help you with this. There are two TEA Implementation Officers, Herbert Klein and Lloyd Wint. They can give you all the information you need to ask those questions.

Contact Telephone: 0208 772 3225

Email (Lloyd Wint): [lwint@tea-officers.org.uk](mailto:lwint@tea-officers.org.uk)

Email (Herbert Klein): [hklein@tea-officers.org.uk](mailto:hklein@tea-officers.org.uk)

Unless deaf people now grab this opportunity things won't change. Please don't leave it to others, demand your rights.

There is some further good news.

Not all the TEA money has been distributed to PCT's. Some has been granted to voluntary organizations to make changes. Two examples are:

The United Kingdom Council on Deafness has been given some money to give every PCT in England Deaf Awareness/Communication Tactics training. Front line staff, perhaps your doctor or nurse or receptionist, will be offered this training and it will be delivered by local organizations. PCT's will be told

that they should continue with this training every year – another example where you can add a bit of pressure ensuring they do this.

The charity *Sign* has also been given some money to introduce its communication software throughout England from January 2006. This means that your doctor, nurse, receptionist, health visitor, occupational therapist, etc can access SignHealth with a click of a mouse on a computer. It is there for you to use. Not only does it help communication but it lets the doctor print off simple information sheets on different conditions or images of your body or a simple prescription chart. All of these are essential when you are unwell and visit your doctor.

You can view *Sign* Health by going to [www.signhealth.com](http://www.signhealth.com) and clicking on the demo version.

In conclusion. There is now an opportunity for real change.

- When you next visit your doctor ask him/her if they have had their deaf awareness/communication tactics training.
- Ask your doctor/nurse/receptionists to use SignHealth to improve communication and information.
- Visit a PCT Board Meeting and ask the questions that Herbert and Lloyd can give you about what they have done with all that money.
- Don't allow discrimination to continue.

Together we can ensure deaf people get real access and equality.