Access to Services for Deaf People
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1. Executive Summary

Derby City Council commissioned the British Deaf Association (BDA) and Derby Deaf Forum to research the current access to mainstream and private sector services. The primary aim was to explore how residents with British Sign Language (BSL) could access services as independently as possible. The secondary aim was to support organisations in improving access to services for BSL users and ensure sustainability by improving the skills and pool of knowledge within the Deaf community.

A short term Steering Advisory Committee was established with representatives from local organisations who work with deaf and hearing impaired communities, the project leaders, BDA and Derby Deaf Forum. The BDA and Derby Deaf Forum carried out a series of face to face consultations with over 120 community/voluntary organisations and local Deaf people.

Research findings from the survey elicited the following:
A very large majority of community and voluntary organisations indicated they have some involvement with Deaf customers while at the same time a significant number of them stated they do not have a budget to pay for BSL/English interpretation. Half of these organisations considered it acceptable to use family and friends to interpret.

While this approach did enable Deaf people to access services, it also presents risks in terms of confidentiality for all concerned and lack of empowerment for Deaf people. Only a quarter of the large majority knew how to book a BSL/English Interpreter while a very small percent knew how to check the registration status and qualifications of the Interpreter they would book.

Conversely, most of the Deaf people interviewed said information was very difficult to understand partly because it was delivered too fast to absorb. In the Deaf world, this is known as information delivered in a “hearing way”.

Evidence from local Deaf people indicates that:
• time and experience is needed to build Deaf people’s trust in the service
• there is a lack of deaf awareness in the hearing community
• there is a lack of understanding of how to use an interpreter.

Outputs of the project achieved by the project leaders:
• 41 individuals from 24 community/voluntary organisations attended bespoke Deaf Equality training
• 287 deaf individuals attended bespoke empowerment workshops and Deaf Information Day.

Recommendations from the project are:
• Derby City Council to lead as an example of good practice in improving access for deaf people as part of their commitment to equality for deaf people
• Establish a working group between Derby City Council, BDA and Derby Deaf Forum representatives to seek realistic, affordable and achievable solutions
• Roundtable discussions that include Derby City Council, BDA, Derby Deaf Forum and the Voluntary Sector are required for reflection and consideration of steps on ensuring mainstream services are more accessible to the local Deaf community.

2. Background and Partners involved in the Project

The British Deaf Association
The British Deaf Association was founded in 1890. Its primary purpose has been to lobby and campaign for the status and recognition of the Deaf Community and British Sign Language (BSL) in the United Kingdom. The cornerstones of the BDA are:

• Language
• Community
• Identity
• Heritage of Deaf people
• Representation of Deaf people’s needs, aspirations, rights and responsibilities.

The BDA is a high profile national Deaf People’s organisation with a strong presence throughout England, Scotland, Wales and Northern Ireland.

As a member-led organisation, work is focused on achieving equality for Deaf people through community empowerment and campaigning. Working directly and face to face with local Deaf BSL communities is crucial to the success of the BDA and creates for opportunities for Deaf people to develop individually and collectively, to participate and contribute more fully in wider society.

To enable this become a reality, the BDA’s Community Empowerment Team was established in April 2011. They are the public face of the BDA working at a local operational level and the all-important link between local Deaf communities and the national campaign work of the BDA.

The team’s objective was to research, identify and meet local Deaf communities to establish and re-establish strong links between the respective local communities and public services. Secondly, it encouraged public services to sign up to the BDA’s BSL Charter. This work has been ongoing for the past three years.

Derby Deaf Forum
The Derby Deaf Forum is a member-led voluntary community group comprising local Deaf BSL residents. There is also representation from other groups such as Communication Unlimited, Derby Deaf Club, Derby Deaf Children’s Society, Derby Over-50’s Club, Social Services, and the Royal School for the Deaf. It was formed in 1999 in response to the council’s decision to close the building where Derby Deaf club was in. The council announced this on local radio which is inaccessible for deaf people; this led to confusion and anger among the Deaf community. The Forum has since continued to work to communicate with different service providers.
The Forum has achieved many notable changes including Derbyshire Police Force introducing an emergency textphone number, an increased profile within the Derby City Council via the Disabled People Diversity Forum, providing different speakers so the Deaf community could access information that was previously inaccessible.

In more recent years, it has worked to bring vital access issues to the attention of Royal Derby Hospital. Various access concepts have been explored and changes made to enhance the whole patient experience for Deaf people. Examples are an additional bell to replace ward intercoms for Deaf people to access wards and text numbers for car parking. An out-of-hours emergency text phone number for Sign Language Interpreters is currently being piloted.

**Derby City Council**

Derby City Council accepted the need for this project stemming from an identified gap in services in the September 2011 report to Cabinet on early intervention and prevention services. This report highlighted the need to support BSL residents to remain independent in the Community.

Prior to the report, a consultation had previously taken place with the residents regarding the reduction in funds for Communication Unlimited. Both these provided the necessary evidence to support the need to fund this project.

Funding this project also complemented the development of the Council’s corporate plans to improve access for BSL and Hearing Impaired residents as well as supporting the work of the recent Commitment signed by Derby City Council for this specific group of residents.

The Commitment set out six key pledges to improve access and rights of Deaf and hearing impaired people. Good practice will eliminate unlawful discrimination (both direct and indirect), advance equality of opportunity and ensure good relations with Derby’s Deaf and Hearing Impaired communities.
3. **Demography and Needs of Derby’s Deaf Community**

There is much discussion and confusion regarding the collation of statistics of the Deaf population locally and nationally. There has been no consistency in the use of terminology to classify the various types of deafness. The confusion is exacerbated by how terminology is used and whether organisations have adopted the medical or social model of deafness.

For these reasons, it can be very challenging for service providers to determine local budgets and service provision for the local Deaf British Sign Language (BSL) population. However, this can be addressed by making use of the “anticipatory duty” outlined in the Equality Act of 2010.

The Derby Deaf Community has access to a small team of Specialist Social Care provision managed by Adult Health and Housing through Derby City Council. This team provides access to social care for deaf children, deaf people and their families. The primary target groups are individuals and families where British Sign Language is the primary mode of communication.

Because of limited choice and lack of access to mainstream services, the Deaf Unit collated its own statistics regarding the local population number, age and gender.

On the 1st June 2012, the Unit for Deaf People recorded 585 Deaf adults residing in the City of Derby who are known to the Unit. 521 were aged 18 to 64 years and 54 were aged 65 years and over.

As the Unit stated, “Although the Deaf population in Derby may be considerably greater than the national average, it is still a very small population, composed of individuals with diverse needs and abilities, when the planning of services and committing of resources are to be considered”.

They also stated that the, “consultation responses from the Deaf Community repeatedly report the need to improve communication access and access to information, with anger at the persistent failure of public services to accept responsibility for providing these”.

This is reiterated in the BDA response in March 2012 to the Office for Disability Issues’ Consultation on ‘Fulfilling Potential’. During this consultation process, local Deaf people put forward their views on what were the barriers, and how the issues could be resolved. Yet the local Deaf communities are no further forward in achieving solutions without organisations willing and able to take the lead to instigate change.

The Derby and Derbyshire area is thought to be the second biggest Deaf community in the UK outside of London. Amongst the local Deaf population, one reason for living / moving to Derby is because the Royal School for the Deaf is very much child centred with children having access to both BSL and English. This offers the Deaf child more choices, opportunities and access to social activities within the local Deaf community and wider community.
For those that move here for educational purposes, they tend to remain in Derby due to a very active Deaf social network of Deaf children and Deaf people.

Another set of statistics extracted from the GP Patient survey 2009/10 show that there are 851 Deaf BSL users in Derby City and 857 in Derbyshire. These figures did not include Deaf children, carers, etc.
4. The BSL Access to Services Project

The British Deaf Association and the Derby Deaf Forum were appointed partners for this new ground-breaking short-term project from September 2013 to March 2014. The project focussed on developing appropriate access to mainstream and private sector services to ensure BSL residents could access services as independently as possible. This would increase the effectiveness of organisations working with and for British Sign Language (BSL) residents and their community within Derby City.

The project was designed to:

1. Support organisations in improving their access to services for BSL users
2. Create a website to highlight the benefits of providing better access to service
3. Ensure sustainability by improving the skills and pool of knowledge within the Deaf community
4. Collate and use the learning from this project to attract other funding to develop and sustain the project further.

The outcomes of the project were to ensure that the local Derby Deaf BSL community are:

a. able to maintain or increase their independence
b. better supported to maintain or enhance their health, wellbeing and safety
c. able to make informed personal choices on how to help themselves and know who to approach for support
d. less in need of intensive social care or health support and need not be referred to social services simply because they are Deaf
e. accurately referred to appropriate services
f. able to gain appropriate access to relevant information, advice and support quickly and easily. This information will support them to care for themselves or others, carry out their domestic routines, and get access to work, education, learning and social opportunities.
A short term steering advisory committee was established to support this project. The members of the steering advisory committee were appointed to share their experience and advise the partners BDA and Derby Deaf Forum through the project. The members of the committee were:

- Sarah Tupling: Derby Deaf Forum
- Ian Gosling: Communication Unlimited/Unit for Deaf people
- Simon Keeling: CAMTAD
- Lesley Kopec: Unit for Deaf people
- Alison Hicking: Derby Deaf Forum
- Robin Ash: British Deaf Association.

**Survey Methodology**
To gain an understanding of the current climate in Derby, the following tasks were undertaken:

1. Two online surveys were developed and distributed to community/voluntary organisations and local BSL users between October to December 2013
2. Approximately 500 groups were contacted directly by email asking them to complete the survey and 31 responses were received
3. 89 face to face interviews took place at Community Action’s Annual networking event on 4 September 2013, Choice Unlimited on 18 October 2013 and Disability Direct “Do What You Want” event on 31 October 2013
4. 125 face to face interviews with Deaf people (including community leaders) using the paper based survey.

**Communication Methodology**
In terms of facilitating appropriate communication, both Project Workers are Deaf and use British Sign Language as their mode of communication. Face to face interviews with Deaf individuals were conducted in British Sign Language. The Project Workers completed the questionnaires in written English. NRCPD registered qualified BSL/English Interpreters were utilised when dealing with hearing individuals / organisations to complete the survey at the community events.
5. Findings

5.1 Community and voluntary organisations
Over 120 organisations in total were interviewed through the online survey and face to face interviews. Appendix 1 lists the 89 organisations who were interviewed informally face to face and the 31 organisations who responded to the survey. The responses and breakdown was as follows:

Contact with Deaf people
85% stated they had involvement with Deaf residents / customers / service users, 15% did not.

Understanding organisations and services
The following highlights what each organisation is currently able to do in terms of accessibility for Deaf customers:

• 64% offer accessible appointments for Deaf people*
• 42% have received Deaf awareness training
• 92% are aware of the Equality Act and its provisions on ensuring services to Deaf customers*
• 68% have no budget to pay for BSL/English Interpreters
• 19% include interpreter costs in their funding bids
• 42% have heard about Deaf Equality Training
• 50% consider it acceptable to use family members and friends for interpreting purposes
• 20% are aware of the difference between a registered qualified BSL/English Interpreter, Signer and Communication Support Worker and their levels such as Level 1, 2, 3, 4/6
• 26% know where to book a BSL Interpreter if a Deaf person asks for one
• 10% know how to check if a BSL/English Interpreter is registered qualified or not
• 67% are clear about who should be responsible for booking interpreters in their organisation
• 49% believe it should be the organisation’s responsibility to book the interpreter.

* When asking how deaf people contact their organisation, the first response from all the organisations was that Deaf people could contact them by phone, unaware of the barriers presented by standard telecommunication for deaf people. Further discussion revealed the lack of understanding of their equality duty on providing accessible services for deaf people.
Support from the project
• 57% stated they would like to receive assistance / support to enable them to improve accessibility to their organisation / service for their BSL customers / service users
• 11% stated they do not wish to receive support; reasons included being a small voluntary organisation and limited contacts with deaf people
• 32% did not state any preference.

Organisations' experiences of dealing with Deaf BSL Users
Given the range of organisations involved in the survey, the awareness, knowledge and skills set varied widely. Below are examples of common responses:

I felt ignorant
I felt ignorant as I didn’t know sign language. However, the individual was very accommodating of this and made communicating as easy as possible for me. I wish I knew more sign language

Significant cost pressure
Interpreter services including BSL are a significant cost pressure upon our organisation and therefore it is important we ensure ‘best care, best value’ from the services we provide/support

Covered by Equalities Act
The deaf awareness training we have received this from one of our volunteers with an interest in deaf awareness, so not formal awareness training. Our own service is covered by the equalities act. We have installed a loop system to assist. A couple of members of staff/volunteers have some knowledge of BSL. If a BSL user brings a family member or friend with them, we have no problem. But we would not request this. We’re aware of Level 1, 2, 3 and that there are interpreters. Not completely sure about registered interpreters or level 4/6. If a service is to be offered, it should be the responsibility of the organisation to arrange necessary support and equipment

Lots of Deaf BSL Clients
Some are fluent language users, very independent and limited contact with the team. Others have more limited language and literacy, less understanding of systems and processes and need different levels of services. Working with children brings its own challenges because of the need to adapt language levels / communication methods.

Deaf colleagues
Deaf colleagues book through Access to Work and are now able to select different interpreters rather than only the few on the council financial systems. I would discuss preferences with a service user when possible and arrange an interpreter direct with the agency, individual interpreter, paid through official order. It shouldn’t be the deaf person’s responsibility to book the interpreter, but some may choose to do so to be sure of getting the interpreter they want.
Family member’s first port of call
My spouse has a partial hearing loss. I belong to a very small voluntary community based organisation. I am aware of the Equalities Act. In relation to my spouse’s hearing loss, family members would be the first port of call for assistance. The individual is assumed to know where to go for an interpreter

Budget is small
We have heard about deaf training through schools. I believe family members should be involved. It would give them a better understanding and an interpreter should be booked. We are aware that we need to provide an interpreter and we do have a budget for translator, but the budget is small and it would be on a first come first serve basis unfortunately at this time

Complete equality impact assessments
We have a deaf awareness training programme for all staff. We use highly qualified interpreter services through a contract so we know they are qualified. We have an interpreter policy and this is available to all staff so they know how to book an interpreter. We complete equality impact assessments in accordance with the Equality Act. It is our job to book interpreters unless someone has Access to Work interpreter provided

Have no direct involvement
I am the Chairman of the local branch of a national charity that provides bespoke aids for people with disabilities when there is no suitable device available from other sources. Requests usually come through an appropriate health professional. We tailor the aid to the satisfaction of the client and the health professional. We have no direct involvement in BSL and would take the appropriate guidance if asked for an aid directly associated with it. We have provided special aids to people with hearing difficulties such as warning or attention alarms

No communication issues
No major communication issues. Qualified BSL interpreters are used when required

Delays
There are often delays whilst having to wait for an interpreter to accompany them

Appointments take longer
Generally very good, although appointments take longer

Staff to sign first
In the first instance we check if any staff are available to sign, then, due to cost, users are asked if they can bring a family member or friend who can sign for them and if not we book, at a cost to the user (£25)
**Diversity Training**
Our staff and volunteers take part in diversity training which includes communication awareness. If I needed to use a BSL interpreter, I would check that they are registered with CACDP. I am not sure who would contact to book an interpreter but would probably start with BDA. I know that it is the responsibility of the organisation to arrange an interpreter or other communication support.

**Translator present, much easier**
It is okay I can manage, but if there is a translator present, it is much easier, unfortunately I have not learnt sign language yet, but it is high on my priority list.

**Clients have refused a Signer**
When we have needed to try and supply a BSL signer, the clients have tended to refuse as they say they know or know of the qualified people and do not want them to being party to their confidential information.
5.2 Recommendations from organisations
Organisations provided over 130 recommendations that would enable them to provide a better service to their Deaf customers.

The responses and breakdown was as follows:

1. Communication
   • Would like to have access to local signers (interpreters)
   • Know how to offer a variety of communication to facilitate access to services
   • Access to appropriate communication and interpreters
   • Funding for Interpreters
   • Providing fully qualified signers (interpreters)
   • Clear interpretation
   • Succinct guidance on who to contact for Interpreters
   • Information freely available about where to book Interpreters
   • Provide appropriate access to communication: email, SMS, minicom
   • Teaching people how to use Interpreters
   • Plain English text.

2. Accessibility
   • How to provide an inclusive service
   • How to ask service users what they need
   • Real inclusion (not as an afterthought)
   • Consistency 24/7 365 days a year
   • Innovative approaches in how Deaf can access services
   • Privacy (sign language is visible and can be seen by others)
   • Supporting organisations to make services accessible to all
   • Funding if improvements required to make services accessible.
3. Technology

- Videophones, minicom, email needs to be in all departments, not a central one for the whole organisation to take messages and then wait to get a response
- Knowledge of assistive safety equipment, vibrating fire alerts, etc
- Loop systems
- Using technology to overcome issues
- Live camera access (Video relay access).

4. Deaf Equality Awareness

- Basic knowledge of Deaf culture
- How we can support service users
- Suitable environment
- Recognising appropriate communication needs
- How to get feedback from Deaf users
- Basic knowledge of BSL.

5.3 Deaf experiences and the impact on their lives

Below are responses from Deaf people when asked what they felt about accessing local services:

Bank application 1
“I have had this experience more than once and can speak for my Deaf friends who have had similar experiences with our banks/ building societies. When my husband and I applied for a mortgage with the bank as we have had saved for a while with them. They refused to pay for an interpreter and did not want an interpreter if we paid for it ourselves in the room by stating different things that the interpreter is a third party, the interpreter is not covered by some financial code and so forth. So we had to communicate in paper and pen.”

We felt it was hell of a long process to obtain a mortgage and lot of barriers to overcome.”

Bank application 2
“I am a Deaf support worker and I support my client with every day routine which includes some trips to the bank. Because my client have no way of communicating via paper and pen so can only communicate with me via BSL so I have to make requests on client behalf by writing things down and double checking the request. It does slow things down but I wanted my client to have full control of how she manages her money as much as possible. With my client’s agreement I type out little cards – requesting a cash withdrawal, a balance statement or a deposit she could go on her own. It worked fine for short time until they changed the
account to a telephone account (Post Office) which upset my client as we both cannot use a telephone. Post Office is around the corner from her home and she is used to it for the last 13 years. We had to change her accounts/ banking.

The telephone culture is frightening and really cuts off her independence.”

Schools
“We, deaf parents, have chosen to send our hearing children to a school because the school have experience in booking sign language interpreters for parents' evenings despite 2 other schools being closer to our home.”

Household repairs
“As a deaf couple, we have had to rely on my elderly hearing mother to come round and make telephone calls for us when sorting out a broken boiler and to come back to assist with communication when the gas man came to do the repair.”

Travelling
“Using Derby Bus pass has helped many deaf people to travel independently but many times I have had communication difficulties when I have to travel to work before 9.30am so I have to ask my hearing daughter to buy the 10 trip ticket for me so I don’t have to communicate the 9 trips on the ticket and it lasts me 9 early morning starts.”

Hiring a car
“I wanted to hire a car from Enterprise as my car was in the garage. I misplaced my driving licence paper but have a photo card with me. Enterprise staff was very helpful as they knew me very well as I have hired a car from them many times before this incident. Enterprise staff member rang DVLA with my driving licence number and photo card. I was in the back room office with the staff member. The staff member was gobsmacked when DVLA said they cannot talk to her but I am required to speak to the phone. The staff member kept saying that I was Deaf without clear speech but can communicate visually. DVLA was adamant that I talk to them to confirm that I am the actual person. The staff member also kept saying that she could vouch in who I am as I have a British passport with me too plus other ID cards so she could match up with my driving licence photo card. I was forced to "speak" to the phone. I became stressed as I do not have a clear speech in saying who I am as I am asthmatic. So I started to panic and breathe faster while mustering up my strength to do this discriminatory task as they would not ask a blind person to read small print or a wheel chair user to stand up and walk. Because I was shocked and nervous to speak I ended up breathing heavily over the phone and blurted out a nervous laughter as I still could not speak and shaking my head. The staff member stood aghast and took over the telephone hand set to continue her protestation and after couple of moment of heated conversation DVLA agreed for her to send a fax copy of my passport.”

I eventually got the hired car feeling humiliated.”

At work
“When my boss at work needs to tell me something, he will phone my son to either tell him what to tell me when I get home later or to ask him to come in to the workplace so he can interpret for me.”
Information

“It is well known in the deaf community that a lot of information need to be translated into BSL and even then it need to be broken down so we can understand the context of it. Many times they try to translate word by word on video or BSL clips but it is delivered in a hearing way so we don’t understand it anyway.”

Religious groups 1

“In our workplace we have several clients living on the same street so they can receive support. Our clients struggled with one religious group who spread their gospel by canvassing/knocking/ ringing doorbells. This religious group have Deaf people in their church and several church members able to sign. The canvassing is relentless and ongoing for 10 years. We have spoken to the elders of the church that our clients themselves wish not to receive unwanted visitors or materials or being whisked to Sutton Coldfield for bible study. Church elders removed two people who regular canvass and replace with different people to canvass. With clients’ families and clients’ agreement we have removed the doorbells.”

They continue with their religious campaign by leaving a pile of DVDs re their gospel in BSL at the Post Office nearby and at the Sandwich shop too. Deaf clients or staff going in for some stamps or buying a sandwich get recognised by over the counter staff that they are Deaf so they are quickly presented with a package on top of their purchase to find DVDs with gospel in BSL. The canvassers hold a list of Deaf people’s door numbers in the street and continue to try to ring/knock doors. Our clients’ door bells are different as it flashes so we are easily identifiable.

It is sheer harassment as they have refused to accept that clients have said: “No thank you” and: “Please leave us in peace.”

Religious groups 2

“Last year I received 5 callers in 3 months from a religious group as there is a woman who lives on my street who belongs to the same group and she sends her friends who can sign to come and talk to me. They even ignore the signs on my door saying no religious callers because they can sign so therefore are exempted from the message! This only stopped when I told the 5th caller that I would call the police if there was one more visit from the group.”

Official letters

“I received a letter and because I saw the logo, I knew it was important but with my ill health I was unable to go to the Unit for Deaf people to ask them to translate it for me, it gave me added stress for 2 days until I saw a BSL interpreter at the appointment I already had to ask her to translate the letter for me, it was for a urgent blood test in preparation for my operation the following week.”

Council 1

“I don’t feel confident enough to go to the Council House as there is too many people trying to talk to me, I don’t trust the videophone as it is too public and you don’t know who is watching. It is not confidential and use interpreters I don’t know on the videophone.”

Health

“I went to my appointment, even though I can lipread a little, I was given a flyer about my condition but I have problem understanding written English. So I am worried that I may be missing on some important information.”
Getting married
“My partner and I are planning to get married in June, the church will provide the BSL interpreter and pay for it but my worry is the reception afterwards as my partner and my family are hearing so we won’t understand what is going on, not understand the wedding speeches, who will voice over my speech as it will be in BSL. It is adding onto the stress and I worry that we will not enjoy the day as much.”

Broadband
“Last month I had a problem with my broadband and needed to phone the provider for assistance but the problem was that my textphone is on the computer and needed the broadband to work! So I had to phone from my friend house and took a few days of going back and forth. Eventually they sent an engineer out but I had to pay for this whereas a hearing person would have used their mobile phone and received step to step advice to resolve the problem.”

Sports
“My deaf son wants to play football so I tried to find an accessible football club in my area so he could play in the football league but they are not deaf aware, both myself and my husband are deaf and all our children are deaf so it is difficult. My son did try the club but left after a month as he didn’t understand what was going on.”

NHS 111
“When my daughter was unwell with painful ears and being sick, I couldn’t access the 111 line for advice as it is not accessible so I had to wait until the Walk in centre opened the next day, it was a stressful night as I could not sleep with worry but luckily it was an ear infection but what if it was worse?”

Council 2
“I would like to ask hearing people in the Council who will be reading your BSL Project about Deaf people’s experience to try spend the day not speaking and write everything down. It is so tiresome and weary experience to communicate via paper and pen.”

“The concentration span shorten very quickly as it takes up lot of energy trying to write clearly, in English sentences and to receive in written format. Several things get missed because you are busy in writing things down. The common assumption of Deaf people in able to lip read and can communicate via paper and pen. I want to point this out that it is incorrect.”

The Warnock report (1978) stated that hearing children fared much better in lip reading tests than Deaf children because they have spoken language and have had heard the spoken language so their guess work in lip reading excelled better. Communicating via paper and pen is okay if you have the written language and limited to a small request like “Can I have my balance updated”/ “Please can I withdraw £200.”

Social
“I saw an advert that one of the Cubs group offered BSL support for deaf boys to join the cubs so I thought great! An accessible group but after my son’s first visit he told me that it was an older boy who knew a little bit of sign language as part of doing his badge and could not communicate fluently. After about 6 weeks my son decided he didn’t want to go again as he was missing out on things and felt left out.”
I felt it was unfair to rely on another cub member to interpret / communicate for my son when it should be a staff member at least. I felt let down by false advertising.”

**Pet care**
“I took my dog to be groomed and tried to explain to the woman what I wanted to have done but was shocked when I came to pick him up, he looked so awful. Because there were other people in the room, I didn’t feel confident enough to try and complain about it especially when I have poor speech and would have to rely on paper and pen at least but I was too embarrassed to expose my literacy level. I just paid and left.”

**Difficulties reported in the last quarter of 2013 (Sept to Dec 2013)**
Examples of where a lack of registered BSL interpreters or access for deaf people has impacted on Deaf people:

**Derby City Council**
- Derby City Council main reception not geared to communicate with the whole range of people (deaf with autism for example)
- Derby City Council – Employee conference
- Union support – no funding for interpreters
- Knowing where to go for support
- Derby Homes
- Adult Learning service
- Careline
- Don’t understand tenancy agreements
- Debt advice and support
- CAB
- Requesting something in library.

**Derby City Health Service (NHS)**
- GPs and Hospital
- Dentists
- Physiotherapy (Rehabilitation)
- Diabetic Nurse
- Diabetic Eye clinic
• Eye tests (Opticians)
• Chiropodist
• Sex education / clinics
• Understanding medication / what to take / what is it for?
• CPN Nurse
• Audiology
• Ambulance.

Leisure
• Wanting to do family tree research
• Museums
• Gym
• Church / understanding the bible
• Read books / DVDs (don’t understand subtitles)
• Faith / Spiritual needs
• Funeral
• Recreational activities (Karate, chess)
• Help to remember things.

Using public transport
• Announcements at Train station and on trains
• Bus
• Taxis.

Communication
• Making phone calls
• Communicating with family at visits or phone calls
• People coming to the door
• Crime – door to door enquiries
• Call out for help
• Reporting an accident
• Letters
• Information overload as it is in hearing way
• Information comes too fast and hard to understand.

**Private sector**
• Housing Associations
• Shopping
• Solicitors
• Having to educate staff / companies again and again – very tiring
• Layout of shops / asking for assistance
• Hairdressers
• Bank
• Bank statements / direct debits
• Watch repairs
• Mobile phone shops
• Post offices
• Mortgage advice
• Contact workmen e.g. Painter
• Quotes for work to be done in the home
• Meter checks in the home, asking for ID, understanding purpose of visit
• Vet
• Car hire
• Organising repairs for white goods
• Booking a cleaner for the home
• Ability to book a holiday
• Corner shops
• Travel agents
• Understanding money
• Sorting out aspects when going away e.g. Kennels.

**Community events**
• Coca Cola Lorry visit to Derby
• Hadhari Project: wanting to understand their black heritage
• Not aware of local events e.g. Sikh carnivals
• Disability events including the large Disability Event in October.

**Public sector**
• Fire services
• Police
• Jobcentre
• School teacher/parent evenings.

**All respondents reported the following:**
• Inaccurate communication and mistakes made
• Taking over and making decisions for the Deaf person reversing the parenting role by placing children in adult decision making roles
• Taking advantage of vulnerability
• Placing stressful demands on family members including time off work to accompany their Deaf family member to appointments
• Hearing older parents being called into places of employment to communicate for their adult Deaf “child”
• Taking away parenting role from the Deaf parent, stifling personal development.

73% report that information is delivered in a hearing way and is too fast which makes it hard to understand at times. The list of discriminatory practices is very long and there is a high risk of going back to the “old” days when access was nil.
6. Sign Language Interpreting issues

What do BSL/English interpreters do?
A BSL/English interpreter assists a sign language user and a hearing person to communicate. They interpret from one language to another. In the UK, this will usually be from British Sign Language (BSL) to spoken or written English, or spoken or written English to BSL. Interpreting is a recognised profession and interpreters train for many years. They are required to have a good command of English, relevant qualifications in BSL and should have completed approved interpreter training programme. BSL/English interpreters are utilised by people who are Deaf and whose first or preferred language is BSL.

National Registers of Communication Professionals working with Deaf and Deafblind People (NRCPD)
NRCPD regulates communication professionals who work with deaf and deafblind people. Their job is to safeguard the wellbeing and interests of people who rely on those professionals. This is carried out by checking that every sign language interpreter, sign language translator, speech to text reporter, lipspeaker, interpreter for deafblind people and notetaker has been properly trained to do their job safely and consistently. Additional information about the status of interpreters and the NRCPD is available in Appendix 2.

Statistics for BSL interpreter availability
NRCPD website data shows the numbers of registered BSL Interpreters locally:

Within 10 miles of Derby:
14 Registered qualified BSL Interpreters
3 Registered Trainee BSL Interpreters

Agencies within 10 miles of Derby
Communication Unlimited (based in Chaddesden, Derby)
6 In House registered qualified BSL Interpreters
2 In House registered trainee BSL Interpreters

Communication Unlimited is a local BSL interpreting agency continuing to slowly increase the interpreting service it can offer. Many difficulties, however, still remain

Deaf Access, Derby College, Roundhouse
2 In House registered qualified BSL Interpreters
2 In House registered trainee Sign Language Interpreters

Freelance interpreters within 10 miles of Derby
Freelancers (self-employed)
5 Registered qualified BSL Interpreters

Locally Registered Sign Language Interpreters
2 working outside Derby
**Difficulties faced by the Deaf community in Derby**
The Deaf community has experienced a myriad of difficulties receiving sign language interpreting services including:

- time and experience needed to build Deaf people’s trust in the service
- time needed to recruit and train community interpreters
- lack of deaf awareness in the hearing community
- lack of commitment to ensure interpreters are qualified
- lack of understanding of how to use an interpreter
- lack of understanding of the boundaries of the role of an interpreter
- reluctance by service providers to include booking of an interpreter
- reluctance and refusal to pay for interpreters
- reluctance or refusal to pay a fair price for an interpreting service.

**Reasons for non-payment by organisations / agencies include:**

- “We are a charity and do not have the money to pay for the service on behalf of its customers”
- “If we do employ an interpreter, we will pass on the charges to the Deaf person”
- “We are self-employed, do not have the money and will not provide the service”
- “We will pay for one interpreter but not two.” This is regardless of the assignment whether this lasts for more than one hour or is particularly intense and requires high levels of concentration from the interpreter/s
- “We haven’t booked the interpreter – the Deaf person did so we’re not paying without prior agreement.”
- “We don’t see why we should pay for a minimum of two hours when two hours are not needed.” Many interpreting terms and conditions stipulate a minimum period of time
- “We don’t have a budget for interpreters”
- “The fee charged by the interpreter is too expensive”
- “We will manage without”
- “Our service is only available through telephone and correspondence”
- “We don’t have time for protracted negotiations, and retrospective payment will not be considered.”
Note: these statements are not verbatim but representative of what has been said to the authors.

Impact of lack of appropriate interpretation support:
• Deaf people are excluded from participating in Derby’s society and lose their independence
• Deaf people with the greatest communication barriers suffer the most
• Deaf people suffer loss of dignity and humiliation
• Increased pressure on social care and education services.

The Derby Deaf Community has recognised and been proud of its access to the local community and organisations. Now it feels under threat, fearful of being excluded and discriminated against. The survey found that there was a recent increase in these concerns following the Council’s decision in 2012 to cease funding for a local BSL interpreting agency to provide sign language interpreting for deaf residents to access local services, changes within the deaf team, impending move to the Council House and the current economic situation caused by the impacts of the austerity cuts.

Unfortunately members of the Deaf community have reported recent incidents where inadequately skilled ‘signers’ with no interpreter training nor membership of a professional organisation to deal with complaints have been booked instead of qualified interpreters because of the current shortfall in interpreters available. There is concern when confidentiality is breached as the ‘signers’ used are not accountable to the NRCPD and Deaf people cannot make a complaint. The organisations booking sub-standard services are also at risk if formal complaints are made about misinformation and the ‘signer’ holds no professional indemnity.

Online Interpreting
This is a recent development where organisations are taking advantage of the technology available. An interpreter can be accessed remotely via a computer and a webcam. An interpreter appears on the screen and relays the conversation between a hearing person and the Deaf person.

This is suitable for short interpreting work such as a receptionist requiring initial details to set up an appointment so that a face to face interpreter can be booked. Communication Unlimited are currently considering introducing this in late 2014 after successfully completing a pilot early 2014 with Royal Derby Hospital. Another company, Significant, is providing the video relay interpreting called SignVideo at Derby City Council House.

Opportunities for learning British Sign Language and Deaf Awareness:
British Sign Language (BSL) is the national visual and spatial language of the Deaf Community. BSL has been officially recognised by the UK government as a language in its own right and is the third most frequently used indigenous language. Learning a new language such as BSL is hard work and inevitably costs money.
Organisations considering training staff need to assess the following factors:

- Number of Deaf people visiting the organisation
- Number of staff required to learn
- Time expended
- Turnover of staff
- Type of class – two hour evening classes or block courses
- Internal or external course
- Minimum requirements e.g. should staff have Level 2
- Becoming a centre – there are different awarding bodies. (See Appendix 3)
- Selling places to external candidates.

Training that raises awareness of deafness is delivered in two different ways: Deaf Awareness and Deaf Equality.

Deaf Awareness courses are designed to provide a wider introductory knowledge and skills for enhancing communication with deaf and hard of hearing people. Deaf Equality courses are designed to ensure that individuals / organisations know how to meet their obligations in providing equality for deaf people in services and identify unnecessary barriers to Deaf people and their language: British Sign Language.

Based on the list of centres available from Signature and Institute of BSL’s websites, there are approximately six local organisations that provide the different BSL courses in Derby. There are also other organisations providing similar courses outside of Derby City in Derbyshire, Nottinghamshire and Leicestershire.

The British Deaf Association provides bespoke Deaf Equality training. Communication Unlimited provides Communication Professional Awareness training for organisations that need to know how to use communication support appropriately.

**Online BSL learning**

A recent development is people learning BSL are able to access sign vocabulary via the Internet. This vocabulary enables BSL learners to practice their skills in addition to attending BSL courses. It can also be used for non-frontline staff who have limited contact with deaf people. The vocabulary enables them to have some signs for a basic conversation.

The list of different types of courses and resources provided by organisations and accredited centres is in Appendix 3.
7. Past and present status of Deaf people in wider society

Many Deaf people state that their education has not prepared them for the world at large. Much of the time during their education years was expended on an emphasis on learning how to “hear”, how to “lipread”, and how to say words “properly”. As a result, access to learning the curriculum suffered significantly as pupils concentrated on lipreading everyone in class.

The use of sign language is not actively encouraged and deemed as a last resort. By default, many families did not want their child to be considered as a lost cause and needing to learn sign language.

The positive aspect about sign language is that Deaf people state that they were finally able to feel comfortable communicating, and most importantly able to access other forms of communication and information enabling them to access wider society. Instead of feeling like a second class hearing citizen, they now feel like an equal Deaf citizen.

Before formal sign language interpreting service provision became available, access for Deaf people was limited to social services provision or volunteer support received from family, friends, work mates and people working in education. Being able to access independent, competent, and confidential interpreting services with confidence has empowered Deaf people. This has given them choice and control in making their own decisions with dignity. The information, knowledge and skills enables them to organise their own lives, live in the community, gain and maintain employment, leading to improved finances and enhanced parental control.

Social care services are currently being cut and the personalisation agenda has yet to affect many Deaf people. To date, only twenty six Deaf people who use BSL and have no additional needs have been successful in their application for personal budgets and a further eleven people are currently being assessed. Reasons for the low uptake appear to be the lack of awareness of the scheme, lack of information of how this could support them, and difficulties in gaining approval from the personal budget panel.

Some deaf people require Deaf relay interpreters. They are trained and experienced Deaf people who work alongside BSL interpreters with users who are Deaf but not fluent in BSL or have a complex or mental health condition. They adapt what the hearing interpreter is signing into a native variation of the BSL for the client, and also deliver the client’s response to the hearing interpreter. The issue is paying for this. There appears to be a general reluctance to accept that for Deaf people with additional needs, not only is a BSL interpreter required but also a Deaf relay interpreter.

This is a matter of concern as there is a higher percentage of mental health amongst deaf people compared to hearing people. A research summary of the Journal, The Lancet, Volume 379, Issue 9820 can be found in Appendix 4.

Increased difficulties are anticipated in the next 12 months with further council cuts on deaf services and lack of awareness by other services.
8. Project outcomes – delivery and evaluation

Following the findings from the survey with the community, voluntary organisations and local deaf people, the steering advisory committee and the project leaders agreed to change the delivery of the training programme for organisations and local deaf residents. This is to accommodate feedback from the survey and enable the project deliver the aims and outcomes more effectively within the tight timescale.

The steering advisory committee agreed for the project leaders to deliver these activities to achieve the main outcomes of the project:

• 4 bespoke Deaf Equality training sessions
• 5 bespoke empowerment workshop sessions with deaf residents
• 1 Deaf Information Day.

Deaf Equality Bespoke Training
As a result of the survey, four free bespoke Deaf Equality training was specifically designed and presented to the community, voluntary and public sector organisations. In total, 41 individuals from 24 organisations attended the four training sessions provided at Derby Deaf Club, Rycote Centre. A list of organisations who attended the session can be found in Appendix 5.

The aim of the training was to:

• Develop awareness about Deaf BSL users residing in Derby
• Develop an understanding of the barriers faced by Deaf BSL users every day
• Improve communication skills when interacting with a BSL user
• Present initial findings of the BSL project survey.

Contents of the bespoke training sessions
The training session covered the following:

• Definition of deafness
• Statistics
• How can you tell that someone is deaf?
• Derby BSL Access to Services Surveys and responses
• Impact on Deaf people and Concerns
• Lipreading
• Solutions
• Equalities Act 2010
• Basic Do’s and Don’ts of Communication
• Use of NRCPD registered BSL Interpreters
• Local sign language interpreting agencies.

**Evaluating bespoke training sessions**
The following is a breakdown of the evaluation provided by participants:

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<td>Was the trainer informative?</td>
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<td>3</td>
</tr>
<tr>
<td>Did the trainer answer your questions?</td>
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<td>8</td>
</tr>
<tr>
<td>Was the venue suitable?</td>
<td>15</td>
<td>21</td>
</tr>
<tr>
<td>Would you recommend this workshop?</td>
<td>39</td>
<td>0</td>
</tr>
</tbody>
</table>

**Summary of comments from training sessions:**

• “Good overview on access issues that deaf people face and some ways that these can be overcome.”

• “Learned a lot, made me think about how I treat people who are hard of hearing.”

• “Appreciate the opportunity to ask questions, welcome the excellent handouts and your patience.”

• “This workshop has really made me realise how difficult it is for deaf people as well as people who can hear.”

• “I live and work in Chaddesden and have never heard of Communication Unlimited which goes back to what you were saying about the need to promote and share information, thoroughly enjoyed the course.”

• “Very informative. Lots to consider for our organisation and how we deliver services.”

• “The course has been very informative and has emphasised more to me the difficulties and additional stresses the deaf community experience. Maybe one day BSL will be taught automatically in schools.”

• “Very useful session and has given me some things to think about to ensure the services we provide are accessible.”

• “Very informative and I will take away what I have learned when planning events/AGMs.”

• “It was not clear beforehand that the emphasis was on BSL users and although the information was useful it was not quite as broad as I needed it to be. Enjoyed it though thanks.”
• “A highly entertaining, while still informative, session, engagingly presented – a real revelation to my question which varieties of organisation are particularly bad/good at accommodating those with hearing difficulties – disability related organisations particularly bad (if I understood correctly) who would have thought of that?”

Summary of suggestions for future training development:

• “I would approach Derby City Council to offer Councillor training.”
• “More interaction like lipreading activity to help inform people of barriers.”
• “Would be great to have more specific arts organisation training!”
• “It would be good to have feedback from deaf community on specific services and accessibility in our venues.”

Bespoke empowerment workshops for deaf residents
As a result of the survey, five free bespoke workshops were specifically designed and presented to local deaf people during January 2014 to March 2014. The series of workshops delivered below were:

• ‘Equalities Awareness’ workshop at Derby Deaf Club
• ‘Using interpreters/Our Health in Your Hands’ workshop at Derby Deaf Club
• ‘Equalities Awareness’ workshop at Royal School for the Deaf Post 16
• ‘Parliament’ workshop at Derby Deaf Club
• ‘Derby Commitment’ workshop at Royal School for the Deaf Secondary department.

In total, 87 deaf residents attended at least one of the five workshops provided.

The aims of the workshops were to:

• Develop better knowledge about Equality Act/Derby Commitment and how to use it in their daily lives
• Develop an understanding of how to give feedback to appropriate public services
• Increase their confidence when making a request for registered interpreter for appointments
• Develop an understanding of how to influence key local political people of the local need for better access to services.
Contents of the bespoke training workshops:

- **Equalities Awareness workshop:**
  - Understanding of the Equality Act 2010 – delivered in BSL
  - Know your rights and how to inform others
  - Know how to complain in the correct way.

- **Using the interpreters/Our Health in Your Hands workshop:**
  - Know who is responsible for booking a BSL interpreter
  - Know how to recognise interpreters who are registered with NRCPD
  - Understand why it is safe to use an interpreter who is registered with the NRCPD
  - How to make a complaint if an unregistered interpreter or no interpreter was made available for an appointment.

- **Parliament workshop:**
  - How Parliament works
  - What do Members of Parliament do
  - Know the difference between a MP and a Councillor
  - Understand how to talk to your MP in the right way.

- **Derby Commitment workshop:**
  - Learn the difference between Parliament and local government
  - Learn about the Derby Commitment and how it works
  - Understand examples of discrimination.

**Evaluating bespoke training sessions:**
It was not always possible to ask participants to complete the evaluation forms provided due to time constraints and also it was paper based. However, verbal feedback was still obtained.

Summary of feedback of the training delivered:

- “Very good information day.” A local Deaf resident on the Equalities Awareness workshop
- “Thank you for coming to talk to our Post 16 students, they found it interesting and informative. Some were still discussing it in the afternoon.” Post 16 Co-ordinator, Royal School for the Deaf, Derby on the Equalities Awareness workshop
• “Fab workshop last night. Good discussion / information about Interpreters and why we should use qualified ones, how do we recognise them, what do we do if not happy or no interpreter.” A local Deaf resident on Using the interpreter/Our Health in Your Hands workshop

• “Your contribution to our Citizenship/BSL programme was very well received. Thank you for coming in and explaining it all so well.” Cheryl Ford, Principal, Royal School for the Deaf, Derby.

Deaf Information Day

This was organised after the survey indicated many people and organisations requested an opportunity to share information to and with the Deaf community.

The funding for the BSL Project enabled us to book a room at The Spot and organise a day where organisations could inform Deaf people of their work.

Approximately 200 people of various ages, ethnicity, backgrounds attended and all gave positive feedback. Some Clinical Commissioning Group commissioners were in attendance in addition to a representative of Natascha Engel, MP for North East Derbyshire. They discussed various issues with different deaf people and organisations. A list of organisations who took part in the event can be found in Appendix 6.

Some stallholders commented on the number of deaf people – some saying that had not seen that many in one room. Some also said that they felt they were in the minority as a hearing person which gave them a taste of what it must be like to be a deaf person living daily in the hearing world.

This ground-breaking event has already elicited requests for a repeated annual event at the weekend around September/October.

Feedback from those who attended the Deaf Information Day

• “Many thanks for your wonderful hard work arranged and set up an important event information day yesterday. Thanks again for your greatest gold heart toward Deaf/deaf/hard hearing community in Derby & Derbyshire.”

• “Thanks for all your hard work, Information day was good. Covered a wide range of services etc. and good to see a range from community come. However still not reaching out to many more. Pat on the back however!”

• “It was an excellent opportunity for us to be able to reach out to the Deaf Community and I’m really grateful for you asking us to attend. I feel the day enabled us to learn more about the issues facing the Deaf community, what services are available and I feel the day gave us a real opportunity to meet and talk to the public and other professionals working within the Deaf community, which we don’t normally on a daily basis always get. Thank you.”

• “Good event, useful range of providers, timescale and venue accessible to range of people. Information on the resources available to support the Deaf and organisations working with the Deaf was useful.”
The members of the community and organisations that we spoke to seemed pleased with the information we had on offer:

- “It was good to make contact with people we knew and other organisations and we have had a couple of emails since the day from stall holders. It was also good to see how others communicate and get ideas.”

- “It was good to have the opportunity to contribute to what we experienced as a very useful and informative day. Excellent networking. Hope those who visited our stall, particularly those who asked for health tests found our presence and resources helpful too. Many thanks.”

Access to Information
This report has highlighted that access to information is one of the biggest barriers that Deaf people face in today’s society. This is supported by other studies nationally and internationally and can be found in Appendix 7.

Barriers inhibiting Deaf people’s access to information include:

- Many Deaf people are not confident in using written English. Nearly all the information is in written English, including information on the internet

- Much information is in spoken English, including telephone communications and face to face meetings. It has been estimated that up to 80% of lipreading is guesswork, so lipreading cannot be relied upon

- Sign Language Interpreting is required despite a shortage of appropriately qualified and registered BSL/English Interpreters locally and nationally

- Trying to obtain support is a slow and lengthy process often requiring prior written authority for interpreting to be undertaken. This is exacerbated by limited or no budget made available for interpreting provision

- Networks in the wider community provide informal access to information through spoken language are denied to Deaf people

- The speed at which information can change bewilders people who don’t know where to go to ask for support

- The need for a third person to assist in the obtaining of information which may be of a very personal / confidential nature. This is compounded through the use of unqualified personnel or family members who generally lack Deaf awareness and can create dependency

- Continual and repetitive previous negative experiences lead to Deaf people not bothering to try anymore as they are too weary

- The expectation by organisations that everyone can make a telephone call with often only a telephone number available for contact purposes.
Some organisations are now using text messaging. A Deaf person can communicate with an organisation using texting instead of using the telephone. This is suitable for short communication purposes where text messages could be used to gain initial details to set up appointments. A Deaf person will need reasonable literacy skills, many do not have.

Using Information
Barriers restricting Deaf people’s use of information include:

- The number of sources of information for comparison
- Fewer networks for sharing experiences
- Concern about the independence and/or accuracy of information that has been gained through a third person
- The speed at which action may need to be taken
- Responses required in written English.

If information is not easily obtained and used, this can impact on a person’s safety, ability to make decisions, organise their own life, and participate in the community. Other impact points are on the parental/caring role, the running and maintenance of the home, choice of work and learning opportunities, and emotional and physical health.

There needs to be a concerted effort to ensure that Deaf people are not disadvantaged when attending and accessing local services. The consequences of disadvantage are two-fold. Fewer independent people place a greater stress on services and without early intervention there is a greater risk of Deaf people developing mental health conditions that are more costly to support.

These longer term costs need to be offset against the initial cost of providing appropriately qualified and registered BSL/English Interpreters at the point of engagement with local services.

It is hoped that this report is a first step towards alleviating the long term gross inequality that Deaf people in Derby City face and towards developing work that enables Deaf people to manage their own independence with appropriate support.
9. Recommendations

Given the range of simple and straightforward issues as well as complex issues raised, a number of possible solutions can be put forward. Follow up discussions will be required with a range of stakeholders.

1. Derby City Council to lead as an example of good practice in improving access for deaf people to their services as part of their commitment to equality for deaf people. The Commitment provides a framework for discussion.

2. Establish a working group between Derby City Council, BDA and Derby Deaf Forum representatives to seek realistic, affordable and achievable solutions.

3. Further discussion and agreement with stakeholders’ priorities to be undertaken as outlined in the Commitment signed by Derby City Council.

4. Organise follow-up meeting(s) with Deaf community stakeholders on developments taking place.

5. Findings from the report to be disseminated with a series of presentations at the voluntary and community organisation’s networks.

6. A roundtable discussion with Derby City Council, BDA, Derby Deaf Forum and voluntary sector to reflect and consider steps on making mainstream services more accessible to the local deaf community.

7. Derby City Council, BDA and Derby Deaf Forum to support and consider how to resource a Deaf-led specialist advocacy, training service and BSL/English interpreting translation ‘one stop’ service similar to the one provided by Nottinghamshire Deaf Society, based in Nottingham.

8. An annual Deaf Information Day supported by Derby City Council and Derby City NHS as part of their corporate and social responsibility.
10. Conclusion

This report has highlighted a wide range of issues, some straightforward and others complex. While the number of responses was reasonable, the numbers of areas of concern were high. The most frequent concerns centred on communication. To paraphrase a national politician; the issue is: “Communication, communication, communication.”

These are:

- not being able to communicate
- being mis-understood when they do try and communicate
- not understanding or accessing local services
- ensuring communication (when it is provided) is of an appropriate qualified level
- lack of appropriate support in local services because of communication.

All these are barriers that contribute to a downward spiral of isolation because of the difficulty of communication. This, in turn impacts the emotional well-being of individuals.

Key findings of this report highlighted lack of knowledge and information available to deaf people as a result of lacking information. Information needs to be accessible and targeted earlier, possibly through specialist advocacy, translation and training.

It is suggested that implementing the recommendations would be an excellent starting point.

The British Deaf Association and Derby Deaf Forum would like to express their gratitude and thanks to the members of the local Deaf community, community/voluntary organisations who took part in the surveys, the steering advisory committee and Derby City Council for their advisory support and for funding this project.

Robin Ash
Empowerment & Campaigns Officer
British Deaf Association

Alison Hicking
Secretary
Derby Deaf Forum
11. Appendices

- Appendix 1 – List of organisations who took part in the survey
- Appendix 2 – List of the registration professionals and NRCPD Identification badges.
- Appendix 3 – List of BSL accredited courses/resources and local organisations/training centres
- Appendix 5 – List of organisations who attended Deaf Equality training sessions
- Appendix 6 – List of organisations who took part in Deaf Information Day
- Appendix 7 – References

**NB:** All information contained in the appendices was correct as of June 2014
## Appendix 1

### List of organisations who responded to the survey:

**Online survey**

1. Derby Stoke Club
2. Relate
3. Sight Support Derbyshire
4. Derbyshire Friend
5. Derby City Council
6. Mencap
7. Derby City Boxing Academy
8. 118 Cub Scout Group
9. SV2
10. Derbyshire Police
11. Communication Unlimited
12. Remap
13. QUAD
14. DCC Support Planning & Brokerage Hub
15. Remploy
16. Derby Citizens Advice and Law Centre
17. Royal Voluntary Services
18. Cycle Derby

Thirteen organisations chose to be anonymous.

### Face to face informal interviews at
Community Action’s annual networking event, Disability Direct’s Do What You Want event and Choice Unlimited.

1. Action Housing
2. British Red Cross
3. Community Action
4. Derby Adult Learning Service
5. Derby Counselling & Therapy Centre
6. Derby Heart City – Public Health
7. Derby Parent/Carer Forum
8. Derbyshire Mind
9. Derbyshire Positive Support
10. Disability Direct
11. First Steps Derby
12. Mental Health Action Group
13. Nimbus – Credibility
14. Power Advocacy
15. Prince’s Trust
16. Safe and Sound Derby
17. Steps for the Future
18. Samaritans
19. Spiral Arts
20. Volunteer Centre
21. Women’s Work
22. Blue Sky Brokers
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<td>Chores4You</td>
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<td>Derbyshire Fire &amp; Rescue</td>
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<td>62.</td>
<td>DCC Transitions</td>
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<td>63.</td>
<td>Derby College</td>
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<td>64.</td>
<td>Derby County in the Community</td>
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<td>65.</td>
<td>Funability</td>
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<td>66.</td>
<td>Sexual Health Services for young people</td>
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<td>67.</td>
<td>Passport to Leisure</td>
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<td>68.</td>
<td>Umbrella</td>
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<td>69.</td>
<td>Wheelblazers</td>
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<td>70.</td>
<td>YMCA Derbyshire</td>
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<td>71.</td>
<td>Age UK</td>
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<td>72.</td>
<td>Alzheimer’s Society</td>
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<td>73.</td>
<td>DCC Derby Advice</td>
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<tr>
<td>74.</td>
<td>Winter Health – NHS Derby City</td>
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</tbody>
</table>
75. Derby Care Link
76. Derby Homes Supported Living Services
77. Department of Work & Pensions
78. Scope
79. A4e
80. Craegmoor Oaklands
81. Premier Care
82. DCC Local Area Co-ordination
83. Home Care Direct
84. iCare
85. Primecare
86. Remploy
87. Right at Home Derby
88. Derbyshire Sailing Endeavour
89. Derbyshire Friend
Appendix 2

List of registered professionals and ID badges:

**Registered Sign Language Interpreter (RSLI)**
An RSLI is an interpreter who has met nationally recognised standards as agreed by NRCPD. These standards set out the competence and professional practice expected of members of the register. Members are allowed to use the initials RSLI to indicate their professional status.

**Trainee Sign Language Interpreter (TSLI)**
A TSLI is someone who is working to become an RSLI. TSLIs must have BSL skills of Level 6 or equivalent, together with an agreed standard of English.

**Unregistered Interpreters**
Unregistered interpreters may not have approved qualifications and training to provide an up to standard service. No formal complaints procedures exist to deal with concerns with unregistered interpreters.

**Communication Support Workers**
Sometimes people get confused between a Sign Language Interpreter and a Communication Support Worker.

Communication support workers mainly work in education, in schools, colleges and universities, supporting Deaf learners to communicate with their teachers and other learners. CSWs work as part of the education team alongside other professionals, such as Teachers of the Deaf (TODs), Speech and Language Therapists (SALTs), Audiologists and sometimes British Sign Language (BSL) interpreters. Many of them do not have level 3 or 6 BSL qualifications.

Duties typically include:

- Supporting students by interpreting between spoken English and BSL, notetaking and lipspeaking
- Supporting students with understanding and producing written material in class
- Adapting learning materials so that students understand them more easily
- Suggesting ways that the school or college environment can be improved to make it easier for students to use hearing aids or lipread.
Samples of ID badges:

NRCPD set standards of professional practice and ensure only professionals who meet those standards can carry an NRCPD photo ID card.

NRCPD promotes the importance of registration in adding value to BDA’s vision of a society in which deaf people are fully included.

NRCPD wants deaf and deafblind individuals and the general public to be able to locate a communication professional that best suits their needs at any time. There are free to use online registers available 24 hours a day, every day. This register also enables providers and other people to check if a communication professional is registered or not.

NRCPD campaigns to promote the benefits of using only NRCPD Registered professionals in the public sector. They do this by lobbying public service providers and government departments, encouraging them to guarantee provision of NRCPD registered communication professionals to enable deaf and deafblind people access their services. The different level of registered professionals can be found in Appendix 2.

NRCPD checks training courses undertaken by professionals to ensure they cover all the elements required to meet the agreed professional standards.

NRCPD investigates complaints made about communication professionals on their register. This helps them to make sure the services provided by all the professionals they regulate meet the standards required.

Further details can be found at their website: www.nrcpd.org.uk
Appendix 3

List of BSL accredited courses/resources and local organisations/training centres:

Signature – www.signature.org.uk

- Level 1 Award in British Sign Language
- Level 2 Award in British Sign Language
- Level 3 Award in British Sign Language
- Level 6 Award in British Sign Language
- Level 6 NVQ Diploma in Sign Language interpreting.

Institute of British Sign Language – www.ibsl.org.uk

- Entry Level in British Sign Language
- Level 1 Award in British Sign Language studies
- Level 2 Certificate in British Sign Language Studies
- Level 3 Certificate in British Sign Language Studies
- Level 4 Certificate in British Sign Language Studies
- Level 4 Certificate in British Sign Language/English Bilingual skills
- Level 6 Certificate in British Sign Language Studies
- Level 6 Diploma in Interpreting Studies.

Local organisations and training centres providing some of above courses:

- Derby Adult Learning Service
- Royal School for the Deaf Derby
- Deaf Issues
- Sign4U Communication Ltd
- Brown Eyes Communication
- Derby Deaf Church
- Deaf Matters Training.
It is recommended that the above organisation websites be explored to ensure up to date current training provision.

Local organisations providing bespoke Deaf Awareness courses:

- Derby Adult Learning Service
- Deaf Issues
- Communication Unlimited
- Arboretum Community Project/Cafe.

**NB:** British Deaf Association only provide bespoke Deaf Equality training

**Online BSL learning websites:**

Sign Station: http://www.signstation.org/

Signworld: http://www.signworldlearn.com/
Deafness might damage your health

One in seven people in the UK are deaf, most of whom are hard of hearing.1 About 70 000 of these individuals are profoundly deaf, either from birth or before acquiring speech. Most communicate through British Sign Language (BSL) as their first or preferred language, rather than spoken English. These individuals together form the Deaf community, with their own language, culture, and history.7

People from the Deaf community encounter many barriers in the health-care system and often have bad experiences, usually because of poor communication. Most health-care workers have little experience of sign-language users because few are in the public eye or are health-care professionals. Ignorance leads to negative attitudes, and patients from the Deaf community endure both individual and institutional discrimination.1 Clinicians regarding BSL users as disabled come across as patronising,2 and entries are still seen in patients’ medical records stating that a full history has not been taken because the patient is deaf.

In The Lancet, Johannes Fellinger and colleagues2 review the extensive evidence of mental health problems in deaf people, which are substantially more common than in hearing populations. Many anecdotes of poorer physical health in people from the Deaf community exist, but there are no robust studies. Research is needed to establish whether people from the Deaf community have poorer health than do hearing individuals, and to explore underlying causes.

Poor communication in a consultation can lead to medical error. Reliance on lip-reading is inadequate, because lip-readers understand only part of a conversation and use guesswork to fill gaps. Communicating through a series of handwritten notes is an unsatisfactory substitute for a full consultation, not least because people from the Deaf community have often had poor-quality education, and many have lower-than-average literacy.

A qualified interpreter should be present in a consultation between a clinician and a patient who uses BSL to enable full communication for both professional and patient. Without an interpreter, the clinician cannot make an adequate clinical assessment or explain the diagnosis and treatment, and the patient is denied the opportunity to discuss his or her concerns. However, interpreters are scarce and advance booking is necessary, so they are often unavailable for appointments with family doctors or for emergencies. Therefore, patients frequently rely on family or friends to interpret, but few are qualified interpreters, and patients’ autonomy and privacy are compromised. Online access to interpreters via computers and webcams has improved availability, particularly at short notice. Some services now provide 24 h cover.

A UK survey3 showed that 77% of BSL users had difficulty communicating with hospital staff. 33% left consultations with their family doctor unsure about medication instructions or subsequently took the wrong doses. Reeves and colleagues4 reported that BSL interpreters were present at 17% of consultations with a family doctor and 7% of those in hospital emergency departments. The study showed that people from the Deaf community have substantially poorer access to primary care and emergency services, and have difficulties at all stages of the health-care process. The main causes were poor deaf awareness of doctors, nurses, and reception staff, and insufficient provision of interpreters. Nevertheless, 82% of family doctors feel that they can communicate effectively with their hard-of-hearing patients and those who use BSL.5

Most worryingly, however, 30% of BSL users avoid seeing their family doctor because of communication difficulties, thereby risking their health rather than facing another struggle with the health-care system.7

Andrew Alexander consults with Paddy Ladd (left) via Pascale Marrey, a BSL/English interpreter.
Mainstream health promotion is done via speech and writing through radio, television, leaflets, and websites. Very little information is available in BSL, although patient-information leaflets are available in many foreign languages. Access for members of the Deaf community is mainly limited to the written word in leaflets, websites, and television subtitles; literacy issues can further reduce this access. A US study showed that understanding and knowledge of AIDS and risk behaviours were lower in people from the Deaf community than in hearing participants. Other investigators noted that people from the Deaf community in Scotland were marginalised from health-promotion programmes. 

Murphy recorded a 7-year life-expectancy gap between the richest and poorest people in the UK. Other factors associated with poor health include unemployment and mental ill health. People from the Deaf community are at risk of poorer health because of a combination of poor-quality education, threefold higher unemployment than in hearing individuals, increased mental ill health, and decreased availability and accessibility of health information. This risk is compounded by poorer access to primary and secondary health-care provision. For example, reduced access to health information and care could mean that control of diabetes in patients from the Deaf community is inadequate, leading to increased risk of complications, such as blindness (which would be particularly devastating for people who rely on visual communication).

How then can we improve health care for the Deaf community? Good communication is the key, and small changes made by staff can make a big difference. Deaf-awareness training for all health-care staff is a priority and should be provided by people from the Deaf community in an interactive, thought-provoking way. The medical records of people from the Deaf community should be flagged with preferred communication methods, and longer appointments than usual should be scheduled. The UK Equality Act 2010 necessitates provision of an interpreter when it would enable or make it easier for people from the Deaf community to access the service; organisations should maintain up-to-date details of interpreting agencies including those which provide out-of-hours service for emergencies. Other reasonable adjustments are use of text messaging and email to book appointments and contact health-care staff. In the UK, deaf people can already contact ambulance services by text message. Patient information leaflets and government health advice should be available in BSL, with subtitles on DVDs and websites; the National Health Service could act as a national resource. UK law clearly states that people from the Deaf community should have equal access to health-care services, but few examples of best practice or recommendations exist. National guidance co-written by members of the Deaf community is needed. The health of people from the Deaf community should be targeted in the same way as that of other groups. For example, many recommendations of the report entitled No patient left behind, which examined inequity of health-care access for minority ethnic groups, could be extended to the Deaf community. The Department of Health’s programme to improve access to family doctors included people from the Deaf community, and this work could be developed by ensuring that the National Health Service Commissioning Board and clinical commissioning groups specifically consider access to all health-care services.

Patients from the Deaf community have the same need for good communication and safe care as everyone else. Clinicians have a responsibility to recognise that communication is a two-way process, and that they need assistance to communicate with this group of patients. So what should you do when you meet your next patient from the Deaf community? Putting yourself in their shoes and asking them how best to communicate would be a good start.

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We declare that we have no conflicts of interest.


Source:
http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(11)61670-X/fulltext
### Appendix 5

**List of organisations who attended Deaf Equality training sessions:**

<table>
<thead>
<tr>
<th>No.</th>
<th>Organisation</th>
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<tbody>
<tr>
<td>1</td>
<td>Revive Management Services Ltd</td>
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<td>2</td>
<td>SV2</td>
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<td>3</td>
<td>QUAD</td>
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<td>4</td>
<td>Community Action</td>
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<td>5</td>
<td>Promoteability</td>
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<td>6</td>
<td>Citizens Advice and Law Centre</td>
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<td>7</td>
<td>Cycle Derby</td>
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<td>8</td>
<td>Impact Derby</td>
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<td>9</td>
<td>Action Housing UK</td>
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<td>10</td>
<td>SV2 Advocacy and Support</td>
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<td>11</td>
<td>Disability Derbyshire C.I.L</td>
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<td>12</td>
<td>Disability Direct</td>
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<td>13</td>
<td>Relate</td>
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<td>14</td>
<td>Aspire Physio</td>
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<td>15</td>
<td>Derbyshire Mind</td>
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<td>16</td>
<td>Derbyshire Positive Support</td>
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<td>17</td>
<td>Action Housing UK – Derby Miss Project</td>
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<td>18</td>
<td>Steps for the Future</td>
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<td>19</td>
<td>DCC Support Planning and Brokerage Hub</td>
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<td>20</td>
<td>Royal Derby Hospital</td>
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<td>21</td>
<td>CAMTAD</td>
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<td>22</td>
<td>Sight Support Derbyshire</td>
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<td>23</td>
<td>NHS East Midlands Commissioning Support Unit, Derby</td>
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<tr>
<td>24</td>
<td>Age UK</td>
</tr>
</tbody>
</table>
Appendix 6

List of organisations who took part in the Deaf Information Day:

1. Citizens Advice and Law Centre
2. Toots 2 Text
3. Derbyshire Healthcare NHS Foundation Trust
4. Arboretum Community Project
5. Action Deafness
6. Derby Adult Learning Service
7. Derby City Parent and Carer Forum
8. Derby Theatre
9. Derbyshire Police
10. Jobcentre Plus
11. Pearl Linguistics
12. British Deaf Association
13. Derbyshire Positive Support
14. Derbyshire County Council – Deaf Team
15. CAMTAD
16. Derby College
17. Royal School for the Deaf
18. Derby City Council’s Deaf Services
19. Derby City Council’s Customer Services
20. Derby City Council
21. Questmark
22. Scene and Sound
23. QUAD
24. Age UK
25. Significant Sign Video
26. NoteAbilityENT Ltd
27. Solutions 4 Community Support
28. Communication Unlimited
29. Kingswell Support Services Ltd
30. Derby Deaf Children Society
Appendix 7

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To contact the British Deaf Association, please look at our website: www.bda.org.uk

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