
Aneurin Bevan Community Health Council

Engagement Report

Sensory Impairment

December 2022



Contents	Page
Introduction & background	3
Feedback we received	4
Patient story	9
Conclusion	10
Recommendations	11
Thanks	11
About the CHCs	12
Contact details	13
Equality and Diversity	14
Equality and Diversity Impact Assessment	17

Introduction & background

As a Community Health Council, with a statutory duty to monitor and scrutinise health services, we wanted to learn from people who have a sensory impairment/s, and their experiences when accessing NHS Services.

Our Annual Plan shows that we are committed to undertake engagement with the local population, to gain feedback from people who have accessed NHS treatment and care within the Aneurin Bevan Health Board area.

Sensory impairment most commonly refers to sight or hearing loss, combined sight and hearing loss (which is frequently referred to as dual or multi-sensory impairment, or deaf blindness), and Sensory Processing Disorder.

To reach people in the community we created a survey that was adapted for those who were visually impaired and/or deaf or hard of hearing. Alternative formats were available upon request. The survey was live August – October 2022.

Our survey went live on our social media platforms, website and sent to our distribution list, to increase responses.

The CHC would like to thank those who took the time to share our survey.



Feedback we received

When people filled in our survey, they gave their experiences of accessing NHS Services with a sensory impairment. We received 10 responses to our survey, and a patient story.

People who filled in our survey told us that they were deaf or hard of hearing, have vision loss, dual sensory impairment/multisensory impairment, and sensory processing disorder.

People who told us that they are deaf or hard of hearing told us they communicate using British Sign Language (BSL), lip reading and by voice.

Those who have a visual impairment, told us they access information in the following formats:

- Large print
- Extra-large print
- Audiotapes
- High contrast
- Magnification

The most common NHS Services accessed by people who filled in our survey were:

- GP Services
- Dentists
- Opticians
- Pharmacy
- Audiology
- Emergency Department/Minor Injury Units
- Mental Health Services

When people rated how easy it was for them to access NHS services to seek an appointment or information, it was disappointing to read that most people found it difficult when accessing the Emergency Department, Minor Injury Units, Dentists, and Audiology Services.

People left the following comments explaining why they found it difficult to access those services:

"Most of the time new staff in workplace created communication disaster have no preparation of meet a deaf person & assume they all lip read or etc"

"As a person with sight loss I can see lots of ways that things could be improved, but don't know how to be a part of making this happen. The simplest way is by email, as this means that my screen reader will read it, which benefits me and is more cost effective to the Health Board"

"GP surgery doesn't answer telephone. Usually on a queue & suggesting you go online which I can't do. Opticians also want you to book online. Dentist ok just long wait. Pharmacy phone request for prescription & they are immediate and book vaccinations in shop."

"I was given an NHS hearing aid about three years ago. I have no idea whether other NHS Wales support, services or equipment is available to me, whether I should have my hearing tested regularly or how to arrange this (beyond asking for a GP referral)."



There was mixed feedback from people who accessed GP Services and Dentists. However, it was pleasing to read that most people rated the access to their Pharmacy and Opticians either "easy" or "very easy".

Some people told us that they required reasonable adjustments to be made for them when accessing NHS Services. One person told us that they require a guide to navigate the building. This person also requires an audio version of appointments or someone to read letters for them.

Another person told us they require larger print when accessing NHS Services.

We asked people "Has your need for reasonable adjustments led to any delays or challenges in your receiving appointments/treatment for NHS Services?"

Six people felt they experienced delays in receiving appointments and/or treatments due to needing reasonable adjustments to be made.

Comments:

"I have had to seek private audiology, private dermatology and would like to receive a proper dental service"

"Sign language relay online"

"I require an escort so have to fit in with their availability as well as the NHS Service. I cannot re-dress bandages, etc. confidently or adequately."

Most people felt comfortable to offer suggestions to NHS Services if they did not make reasonable adjustments for them. However, some people didn't feel confident to do this.

We asked people if they felt their communication needs were met when considering the following:

	Very good	Good	Adequate	Poor	Very poor	Not applicable
Access to buildings	1	1	5	2	1	
Clear signage		1	2	5	1	1
Accessible forms and formats			4	2	4	
Information related to the taking of medicines	1		3	1	5	
Appropriate communication in waiting area e.g., use of audio or visual display systems		1	2	4	3	

One person told us that when they find the reception area for their appointment, very often the receptionist will ask them to take a seat even if they arrive with a cane or a guide dog.

"Signs in a building are a big issue for me. Medication leaflets are printed in writing too small for me to read, the GP uses a TV that displays your name when doctor is ready for you. I cannot see this either."

Another person said that they had been told: *"it was easier to deal with a deaf person later by seeing able bodied people first."* This person was also told a BSL interpreter had been booked for their appointment, but the interpreter was ill, so they had to sit and wait to be called.

We asked, "When you meet with health professionals, are they aware of your sensory impairment/s and are your needs understood?"

Four people "sometimes" felt this way and six people felt this "rarely" happened. No further comments were given.

It was important for us to ask people to rate their experience during NHS appointments from very poor to very good:

It was pleasing to read that most patients had an "ok" or "good" experience when accessing Opticians, Pharmacy/Prescription Services, Dentists and GP services.

Unfortunately, more than half of the respondents rated their experience at a local Minor Injury Unit or Emergency Department as "poor" or "very poor".

We were also told about negative experiences from people who accessed Audiology Services, Speech and Language Therapy and Mental Health Support Services. On average, 20% of the respondents rated their experience of these NHS services as "very poor".



We asked people “have you ever avoided using a health service because the communication was too difficult?”

There were mixed responses when reviewing the feedback for this question. **50%** of people told us “Yes”, they had avoided using a health service because the communication was too difficult and **50%** of people told us “No” they hadn’t.

We asked people to give further comments or suggestions on how to improve their experience when accessing NHS Services:

“Deaf & deafblind awareness and possible British Sign Language taster and discusses a way forward to help staff to prepare to meet a range of deaf people and approach them efficiently than cause disaster.”

“Larger signs in buildings. More training for staff to understand other people’s needs. Various formats for various health issues.”

“Staff could do with training on how to assist someone with a sensory loss.”

“Easier access for servicing & minor repairs for hearing aids.”

“Courtesy Clear Speech. Confidential conversations not so the whole world can hear.”

“Realise that not everyone is able to access online services because they are not accessible. Also, consider that there are GP surgeries which are 1 bus rides for me. However, I have to take 2 buses to reach mine just because closer as crow flies. Not something you want to do when unwell and registered blind.”

“Get rid of computerised touch screen booking in system.”



Patient story

Ms X contacted us to share their experience of a family member accessing British Sign Language (BSL) Interpreters for NHS appointments.

Ms X's daughter is profoundly deaf and suffers with anxiety, especially in new situations. Ms X's daughter requires a BSL interpreter for NHS appointments.

Ms X told us that there have been two occasions when her daughter has been let down by the Health Board to provide adequate BSL interpretation.

When Ms X's daughter attended a hospital in the Aneurin Bevan area for planned treatment, they met the BSL interpreter who was only able to stay for one hour and hadn't been given any prior information about the appointment that she was going to be interpreting for.

As the interpreter was only able to stay for one hour, the hospital agreed that Ms X could accompany her daughter and provide some communication support for her daughter. However, Ms X feels that it is not safe or appropriate to use family members to provide sign language. Ms X told us she is not a qualified, registered BSL interpreter and could have inadvertently given her daughter incorrect information or relayed incorrect information to medical staff, resulting in serious consequences for both parties.

After this incident, Ms X's daughter had another appointment arranged. Prior to this appointment, Ms X contacted the patient liaison team to ensure that a BSL interpreter had been arranged. Ms X had been assured that they had.

Disappointingly, the BSL interpreter who had been booked to attend this appointment, did not arrive. To give the interpreter chance to arrive, Ms X's daughter agreed to let the patient who was due to be seen afterwards, to be seen first. Ms X had to step in to interpret for her daughter, but as per her previous concerns, Ms X feels it was inappropriate to interpret for a family member.

Ms X told us that the receptionist in the department did their best to find out further information about the absent BSL interpreter, but had no luck getting any information.

After the appointment had finished, the BSL interpreter still hadn't arrived. It was later discovered that the BSL interpreter had been booked to attend the wrong hospital for the appointment, due to a reported clerical error.

Ms X told us it is concerning to think that if her daughter had attended the appointment on her own, the appointment would have had to be rescheduled, which would've caused a delay in her receiving treatment.

Conclusions

In conclusion, even though we received a small number of responses to our survey, the themes in experiences offered by people living with sensory impairment(s) in the Aneurin Bevan area is clear and raises a number of difficulties that people face in accessing NHS services and meeting their communication needs.

It was positive to learn about some people's good experiences in accessing primary care services offered by Pharmacies and Opticians.

The findings highlight the areas where improvements are needed such as:

In some situations, people did not feel confident in offering suggestions if reasonable adjustments had not been made for them when receiving an NHS Service.

This could lead to people avoiding health services because communication is too difficult for them, as 50% of respondents told us in our survey.

Recommendations

- 1)** The Health Board is asked to provide more information, in accessible formats, to people on how they can access Audiology Services and specific clinical/treatment information materials in accessible formats.
- 2)** The Health Board is asked to review the feedback given in relation to the signage across sites in the Aneurin Bevan area and the use of appropriate communication in waiting areas as people rated this as being “poor” by respondents to this survey.
- 3)** Consider undertaking ‘walk throughs’ at Aneurin Bevan sites to ensure everything is in place and accessible to support people with sensory impairment(s). It would be beneficial to involve people with sensory impairment(s) to inform a walk through review.
- 4)** The Health Board is asked to review people’s comments regarding the possibility of training for staff to better understand sensory impairments to provide a good service.
- 5)** The CHC would like to understand if the Health Board asks people who have a sensory impairment, the most appropriate way to communicate and can they offer reasonable adjustments to be made for them when accessing NHS Services.
- 6)** The Health Board is asked to review the process of booking British Sign Language (BSL) interpreters for hospital appointments, and how this can be improved, noting Ms X and her daughter’s experience, which was a theme highlighted in our last report.

Thanks

The CHC would like to thank everyone who took the time to tell us their views, we hope the feedback people have shared influences healthcare services to recognise and value what they do well and to enable them to act where they need to, as quickly as they can, to make things better.



About the Community Health Councils (CHCs)

CHCs are the independent watchdog of the National Health Service (NHS) within Wales. CHCs encourage and support people to have a voice in the design and delivery of NHS services.

CHCs work with the NHS, inspection, and regulatory bodies. CHCs provide an important link between those who plan and deliver NHS services, those who inspect and regulate it and those who use it.

CHCs receive feedback from the public in many ways. Before the coronavirus pandemic, CHCs regularly visited NHS services to hear from people while they were receiving care and treatment. CHCs also heard from people at local community events, and through community representatives and groups.

Since the coronavirus pandemic, CHCs have focused on engaging with people in different ways.

This includes surveys, apps, videoconferencing, and social media to hear from people directly about their views and experiences of NHS services as well as through community groups.

There are 7 CHCs in Wales. Each one represents the “patient and public” voice in a different part of Wales.



Contact details



Aneurin Bevan Community Health Council
Raglan House
William Brown Close
Llantarnam Business Park
Cwmbran
NP44 3AB



01633 838516



Enquiries.AneurinBevanCHC@waleschc.org.uk



www.aneurinbevanhc.nhs.wales



@Bevanhc



CIC Aneurin Bevan CHC

Equality and Diversity Survey Results

Number of people who filled in the Equality and Diversity Questions: 0

Preferred Language																	
English			Other			Not answered											
0			0			10											
Gender																	
Woman/ Girl		Man/Boy		Non- binary		Prefer not to say		Other		Not answ ered							
0		0		0		0		0		10							
Do you consider yourself to be a trans person?																	
Yes			No			Prefer not to say			Not answered								
0			0			0			10								
Sexual Orientation																	
Asexu al		Bisex ual		Gay		Le sb ia n		Heterose xual/ Straight		Pans exua l		Prefer not to say		Oth er		Not answ ered	
0		0		0		0		0		0		0		0		10	
Month and Year of birth																	
Jan		Feb		Mar		Apr		May		Jun		Jul		Aug			
0		0		0		0		0		0		0		0			
Sept		Oct		Nov		Dec				Not answ ered							
0		0		0		0		0		10							

Ethnicity				
Asian or Asian British:				
Bangla deshi	Chine se	Indian	Pakistani	Other
0	0	0	0	0
Black or Black British:				
African		Caribbean		Other
0		0		0
White:				
Welsh/English /Scottish/Nort hern Irish/British		Gypsy of Irish Traveller	Irish	Other
0		0	1	4
Other Ethnic group:				
Arab		Prefer not to say		Other
0		0		0
Religion or belief				
Buddhism	Christianity	Hinduism	Islam	Judaism
0	0	0	0	0
Sikhism	Atheism	No Religion	Prefer not to say	Other religion or belief
0	0	0	0	0
Not answered	10			

Do you consider yourself to have a disability?

Yes	No	Prefer not to say	Not answered
0	0	0	10

Do you look after, or give any help or support to a family member, friend, or neighbour because of a long-term physical disability, learning difficulty, mental ill-health or problems related to old age?

Yes	No	Prefer not to say	Not answered
0	0	0	10

Are you currently pregnant or have you been pregnant in the last year?

Yes	No	Not answered	Prefer not to say
0	0	10	0

Equality Impact Assessment

Please complete the following table to state whether the following groups will be adversely, positively, differentially affected by the policy/activity or that it will have no affect at all

Impact	None	Negative	Positive	Comments
Protected Characteristics				
Age	x			
Disability	x			The survey was adapted for people who have a visual impairment and those who have both a visual impairment and deaf or hard of hearing. Additional formats of the survey were available on request.
Sex	X			
Race	X			
Religion/Beliefs	X			
Sexual Orientation	X			
Gender reassignment	X			
Marriage and civil partnership	X			
Pregnancy and maternity	x			

Other characteristics to consider				
Welsh Language			x	Reports & Surveys published bilingually
Other Languages		x		Reports & Surveys can be published in required language on request
Human Rights	x			
Poverty level	x			
Persons with dependents	x			
Rural residence	x			
Gypsy and traveller communities	x			
Digitally vulnerable	x			Survey was available both printed and online.

Risk Assessment

<p>Are there any risks arising from the implementation of this policy?</p> <p>N/A</p>
<p>What measures are in place to manage or remove these risks?</p> <p>N/A</p>
<p>Welsh Language</p> <p>This document/policy has been assessed in line with our Welsh language requirements for standards:</p> <ul style="list-style-type: none"> i) 37,38 ii) 69,70,71 <p>In coming to our impact determination, we sought advice/reviewed the evidence of/considered:</p>

All CHC public facing documents are available in Welsh & English.

The CHC undertakes an Equality Impact Assessment for all public documents and identify them as positive for Welsh translations.

Outcome

Positive impact –

Standards 37, 38 – All public documents are produced and published bilingually in Welsh and English.

Standards 69-71 - We undertake Equality Impact Assessments for all public documents and identify them as positive for Welsh translations

Negative Impact – None

Accessible formats

This report is also available in Welsh.

If you would like this publication in an alternative format and/or language, please contact us.

You can download it from our website or ask for a copy by contacting our office.