



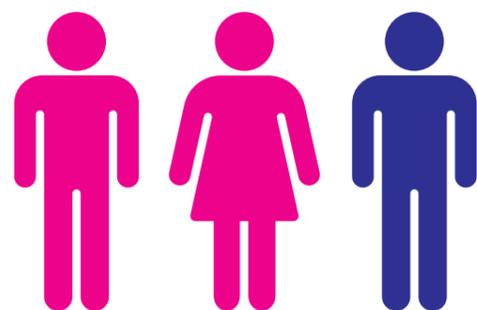
On the
record

Good Practice?

Why people who are deaf or have hearing loss are still not getting accessible information from their GP

by Tom Bailey

**Two-thirds
(64%)**



of people who are deaf or have hearing loss feel unclear about the health advice after their GP appointments, at least some of the time.



More than half **(57%)** of people who are deaf said they felt unclear about their health

advice because a sign language interpreter was unavailable for their appointment.



Nearly half **(45%)** of people with hearing loss felt unclear because their doctor or nurse did not speak clearly.



Only **1 in 10** have been asked about their communication needs



**One-quarter
(26%)**

ask other people to book appointments for them, but less

than one in 12 **(7%)**, want to book appointments in this way.



Two-fifths (43%)

said that staff at their GP surgery call their name out when it's their turn to be seen by the doctor or nurse.

Top tips for improving access to your practice

- Provide a range of different methods for people who are deaf or have hearing loss to contact your surgery, such as email, Text/SMS message and Next Generation Text (NGT) relay.
- Offer and extend online access.
- Ask people what support they need to communicate well and understand information – and record this information accurately on their patient record, in line with the Accessible Information Standard.
- Provide deaf awareness training for practice staff.
- Ensure hearing loop systems are available on reception desks and in consultation areas, and check them regularly to make sure they're working.
- Follow simple communication tips such as speaking clearly – and avoid obstructing lip movements with your hands or other objects (this is particularly helpful for people who lipread).
- Provide communication support, such as a qualified British Sign Language (BSL) interpreter, to everyone who needs one.
- Extend appointment times, if necessary, to support good communication.
- Ensure people who are deaf or have hearing loss can give feedback or make a complaint about the quality of care in an accessible, appropriate way.

Introduction

Nine million people have hearing loss in England – that’s one in six of us. People who are deaf or have hearing loss may find it difficult to communicate with friends, family, and health and social care professionals.

The Department of Health and NHS England’s **Action Plan on Hearing Loss** states that urgent action is needed to tackle the growing prevalence and impact of hearing loss – and to reduce unacceptable, regional variations in the quality and accessibility of health and social care services.

Our research shows that people who are deaf or have hearing loss often struggle to use GP services when they need to. This can lead to confusion over diagnosis, and result in ineffective care. Our 2013 **Access All Areas** report shows that one in seven (14%) had missed an appointment because they didn’t hear their name being called in the waiting room. The NHS itself estimates that the cost of people who are deaf or have hearing loss missing NHS appointments could be as high as £15m a year.

In 2015, NHS England launched the **Accessible Information Standard**. This sets out clearly how and why health and social care services should make a “dramatic improvement” in meeting the communication and information needs of people with disabilities and sensory loss, including people who are deaf or have hearing loss. The Action Plan also refers to the Standard and lists “improved access to wider health services” as a key outcome measure for service improvement.

One year after the Standard became law in England, we looked closely at whether it has led to improvements in the way GP surgeries communicate with people who are deaf or have hearing loss.

What is the Accessible Information Standard?

NHS England’s Accessible Information Standard sets out a clear approach for improving the accessibility of NHS and adult social care services for people with disabilities and sensory loss. To meet the legal requirements of the Standard, NHS and adult social care services must:

1. **Ask** people if they need support to communicate well and understand information.
2. **Record** information about these needs in a consistent way.
3. Highlight or **flag** needs on patient records to make sure they are visible to staff.
4. **Share** needs with other services when someone is discharged from hospital or referred elsewhere for treatment or care.
5. Provide support to **meet** needs, such as an accessible alternative to the phone or a qualified BSL interpreter.

To find out more about the Accessible Information Standard, please visit england.nhs.uk/accessibleinfo



Methodology

Between September and October 2017, we surveyed people, in England, who are deaf or have hearing loss to find out whether their GP surgeries are meeting the requirements of the Standard. The survey was available online in English and BSL video, and we also handed out paper copies at Action on Hearing Loss drop-in sessions and other events. We received 744 responses.

Contacting GP surgeries

Findings

Despite the legal requirements of the Standard to provide “one or more communication or contact methods which are accessible to and useable by the patient”, our findings suggest that many people who are deaf or have hearing loss are still being forced to use the phone, go to their GP surgery in person or rely on other people to contact their GP surgery on their behalf:

- Nearly half (44%) of survey respondents use the phone to book GP appointments, but less than one-quarter (23%) want to have to do this.
- Nearly half (47%) visit their GP surgery in person, but only one in seven (14%) said this was how they preferred to communicate.
- One-quarter (26%) said that they ask a family member, friend or support worker to call their GP surgery on their behalf, but a much smaller proportion, less than one in 12 (7%), said they wanted other people to book GP appointments for them.
- More than one-third (37%) of survey respondents said they experienced difficulties booking urgent same-day appointments or getting urgent medical advice when their GP surgery was closed.
- Almost one in five (19%) survey respondents said they had experienced difficulties because they were offered a same-day phone appointment by their GP surgery, and they cannot use the phone.



I do wish that I could make appointments online. Phone calls are a struggle for me and, if you're not feeling well, it's even worse – no matter how helpful the person on the other end of the phone is trying to be.

Anonymous survey feedback

Why accessibility matters...

Some people who are deaf or have hearing loss may struggle to follow conversations over the phone; this can lead to confusion over appointment times. Others, who cannot use the phone at all, may have to visit their GP surgery in person to book appointments or rely on other people to book appointments on their behalf. This can lead to a loss of personal independence and privacy.

According to NHS England's 2017 GP Patient Survey, more than two-thirds (69%) of GP patients in England who wanted a same-day appointment got one. Our findings suggest that people who are deaf or have hearing loss may find it more difficult to get same-day appointments. This is because of the communication difficulties they experience when contacting GP surgeries – irrespective of the severity of their health condition or the availability of same-day appointments.

Following increasing demand for GP services in recent years, many GPs have also introduced 'remote' consultations (either over the phone or online), to increase the amount of time they have to see patients. Others have introduced remote consultations as a way of sorting requests for appointments, to help them decide which patients should be seen first.

A survey by the Royal College of General Practitioners (RCGP), in 2017, found that more than half (56%) of GP surgeries in England have introduced remote consultations.

Whilst this new type of consultation may be more convenient for some patients, phone consultations in particular may be inaccessible for many people who are deaf or have hearing loss. Without an accessible alternative to the phone, people who are deaf or have hearing loss may be forced to visit their GP surgery, or other NHS services, in person to get medical advice or clarify things about their treatment and care. This increases demand on already stretched services – and costs the NHS money.



The requirements of the Standard are **not** being routinely met for people who are deaf or have hearing loss

Recommendations for GP surgeries

- GP surgeries should offer a range of different contact methods for people who are deaf or have hearing loss, such as email, text/SMS message, textphone, Next Generation Text (NGT) and remote BSL video-interpreting services.
- Online access is a simple and accessible way for many people who are deaf or have hearing loss to book appointments, order repeat prescriptions or receive test results. Many GP surgeries already offer online access for their patients – given the obvious accessibility benefits, they could consider promoting these services directly to people who are deaf or have hearing loss.
- GP surgeries should ensure online services are genuinely accessible for people who are deaf. As a minimum, online information should be written in plain English. To make sure online services are accessible for everyone, GP surgeries should also consider producing BSL videos of key documents and other important information, such as complaints policies.

Visiting GP surgeries

Findings

We asked people who are deaf or have hearing loss how deaf aware practice staff who work at their GP surgery are – and whether they get the support they need to communicate well in waiting areas. Under the Accessible Information Standard, GP surgeries should have a process in place to ensure communication and information needs are met, as part of “business as usual”.

Our findings suggest that the requirements of the Standard are **not** being routinely met for people who are deaf or have hearing loss:



I rarely visit my GP surgery, but when I have to, I dread waiting to be called. Recently, when I arrived for an appointment, the receptionist said, “Wait next to the desk and we’ll ask someone to come for you”.

It was awful: everyone was staring at me, as if to say, why is she hanging around here? I felt like a child.

Mel Stubbs, Sandhurst

- Only one in 10 (10%) of survey respondents said that their GP surgery had asked them about their communication needs, and only 5% had been asked about their information needs.
- Worryingly, two-fifths (43%) said that staff at their GP surgery still let them know when it’s their turn to be seen, by the doctor or nurse, by calling their name out.
- One-quarter (26%) said a hearing loop system isn’t available at their GP surgery, and more than half (58%) didn’t know if one is available.

Why accessibility matters...

Poor communication in waiting areas causes considerable stress and anxiety for people who are deaf or have hearing loss. This may put people off visiting their GP surgeries altogether: forcing them to delay seeking help until their health gets worse and they can’t wait any longer. NHS England also estimates that the cost of people with hearing loss missing appointments – because they didn’t hear their name being called in the waiting room – could be as high as £15m every year.

Recommendations for GP surgeries

- GP surgeries should have a clear, standardised approach for asking people who are deaf or have hearing loss what support they need to communicate well and understand information – and for recording this information on patient records, in line with the Accessible Information Standard.
- Practice staff should be booked on deaf awareness training, to take place during work hours.
- People who are deaf or have hearing loss should be asked how they would like to be notified when it’s their turn to be seen.
- Hearing loop systems should be available on reception desks for everyone who needs them, and should be checked regularly to ensure they are working.



If I have to go to the doctor's surgery or hospital, it's worrying enough, but it's always more stressful for me because I know I'm going to have difficulty hearing what's said to me. Sometimes I can hear the person reasonably well, sometimes it's really difficult. It's a lottery.

Richard Coates,
Kings Lynn

Consultations

Findings

We asked people who are deaf or have hearing loss whether they ever leave their GP appointments feeling unclear about what they've been told by the doctor or nurse.

Our **Access All Areas** report shows that, after attending an appointment with their GP, more than one-quarter (28%) of the respondents to our 2013 survey came away feeling unclear about their diagnosis. Nearly one in five (19%) were unclear about their medication. And around two-thirds (68%) of survey respondents who asked for a BSL interpreter, for their GP appointment, did not get one.

Five years on from **Access All Areas**, our findings suggest that there is still room for improvement in how doctors, nurses and other GP surgery staff communicate with people who are deaf or have hearing loss:

- Nearly two-thirds (64%) of survey respondents said they feel unclear about the information they've been given at their GP appointments, at least some of the time.
- When asked why they felt unclear, more than half (52%) of survey respondents with hearing loss said doctors or nurses spoke too quickly – or didn't check whether they'd been understood.
- More than half (57%) of survey respondents who are deaf said they felt unclear about their health advice because a sign language interpreter was unavailable for their appointment. More than one in eight (13%) also said that the quality of sign language interpretation wasn't good enough.



Because of communication difficulties, people with hearing loss cost the NHS £76m in extra GP visits every year.

Why accessibility matters...

Poor communication in appointments may force people who are deaf or have hearing loss to make a return visit to their GP surgery, to clarify important information about their treatment and care. Others may leave their appointments not knowing how to take their medication correctly, which could put their health at risk. The Ear Foundation estimates that, because of communication difficulties, people with hearing loss cost the NHS £76m in extra GP visits every year.

Without access to a well-qualified communication professional, people who are deaf, in particular, are at risk of poor care and poor health. SignHealth estimates that the missed diagnosis and poor treatment of people who are deaf costs the NHS £30m every year.

Recommendations for GP surgeries

- Doctors, nurses and other GP surgery staff should follow simple communication tips such as speaking clearly and avoiding obstructing their lip movements (this is particularly beneficial for people who lipread). See top tips on page 3.
- GP surgeries should also ensure people who are deaf or have hearing loss have enough time to communicate in appointments, including extending appointment times, if necessary, in line with the Accessible Information Standard.
- An appropriately qualified communication professional, such as a BSL interpreter, should be provided for everyone who needs one.
- Hearing loop systems should be available in consultation areas for everyone who needs them. They should be checked regularly to ensure they are working.



A BSL interpreter didn't show up for my GP appointment. So, when I was in the consultation room, the doctor made me write everything down, even though I find this difficult. I hope I understood all the information correctly – if only the BSL interpreter had arrived!

Nicola Gray,
East Grinstead

Recommendations for monitoring performance

The Accessible Information Standard has the potential to transform the way people who are deaf or have hearing loss access health and social care. But the results from our survey suggest there is still a long way to go before the benefits of accessible communication and information are fully realised for people who are deaf or have hearing loss.

GP surgeries, NHS England, Clinical Commissioning Groups (CCGs) and the Care Quality Commission (CQC) should work together to ensure services continue to improve and that the requirements of the Standard are properly implemented and enforced. This duty is also reinforced by the forthcoming National Institute of Health and Care Excellence (NICE) Hearing Loss in Adults Guideline, which states that GP surgeries and other NHS services should take steps to ensure that people who are deaf or have hearing loss can participate fully in discussions about their care and treatment.

What action needs to be taken?

GP surgeries should:

- gather feedback from people who are deaf or have hearing loss on the provision of communication support and accessible information
- ensure people who are deaf or have hearing loss can give feedback or make a complaint about the quality of care in an accessible way.



I had to retire early from general practice nursing due to my hearing loss. I absolutely dread going to see the GP or nurse: I have to explain every time and feel I'm treated as stupid or a nuisance. My previous GP refused to look at me when she was speaking and the nurse knew nothing about deafness.

Sue White,
Southampton

NHS England and CCGs should:

- monitor the performance of GP surgeries against the Standard, publish the results annually and intervene if poor-performing GP surgeries do not improve
- provide funding, resources and training for GP surgeries to help them meet the requirements of the Standard.

CQC should:

- ensure the issues facing people who are deaf or have hearing loss, when accessing GP surgeries, are taken into account during CQC inspections
- meet their commitments in the CQC's Equality Objectives for 2017-19 to:
 - ensure CQC staff have good knowledge of the communication and information needs of people who are deaf or have hearing loss
 - provide accessible contact options to help people who are deaf or have hearing loss give feedback on the quality of care
- take action to help poor-performing services improve.

As an organisation, we'll continue to work with GP surgeries, NHS services and the CQC to help them monitor compliance with the Standard – and improve the way they communicate with people who are deaf or have hearing loss. We'll also continue to raise awareness of the Standard amongst the people we support, so that they know what to expect when they access GP surgeries – and know what action to take if their needs are not met.

Find out more...

To view the full results of our survey and the references for evidence cited in this report, please visit:

actiononhearingloss.org.uk/goodpractice

On the record

If you're deaf or have hearing loss, take a look at our new guide to your rights under the Accessible Information Standard. It also tells you what to do if your needs aren't met.

You can also download a communication card or template letter. Print it out, fill it in, then send it to your GP surgery to let staff know what support you need to communicate well and understand the information they give you.

We'll add new content to this webpage regularly to let you know what action you can take to improve the accessibility of GP surgeries and other NHS services in your area, so keep checking for updates!

To find out more, please visit:

actiononhearingloss.org.uk/ontherecord



GPs

If you work at a GP surgery and want to know what you can do to improve the accessibility of your services for people who are deaf or have hearing loss, we've got straightforward, practical information which sets out the legal requirements of the Standard, and provides top tips on making your services more accessible to people who are deaf or have hearing loss.

To find out more, please visit: actiononhearingloss.org.uk/gp

Access Solutions

If you work at a GP surgery or in other NHS services, our Access Solutions team offers a range of support and advice to help you meet the requirements of the Accessible Information Standard, and make your workplace more accessible for people who are deaf or have hearing loss.

To book an appointment with one of our Access Solutions Consultants, to discuss our training courses, or to find out more about the services we provide, call us and quote AIS:

 **0333 240 5658**

 **0333 014 4530**

 **access.solutions@hearingloss.org.uk**

 **actiononhearingloss.org.uk/business**

We've listed links to the services we provide below, but please do get in touch with us, as we can advise you on the most appropriate forms of support to meet your needs.

Deaf awareness training

actiononhearingloss.org.uk/training

E-learning packages

actiononhearingloss.org.uk/elearning

Hearing loop installation and maintenance

actiononhearingloss.org.uk/installation

Communication support

actiononhearingloss.org.uk/communication

Action on Hearing Loss (formerly RNID) is the largest UK charity helping people who are confronting deafness, tinnitus and hearing loss.

We give support and care, develop technology and treatments, and campaign for equality.

We rely on donations to continue our vital work.

To find out more, visit **actiononhearingloss.org.uk**

Contact our free, confidential Information Line:

Telephone 0808 808 0123

Textphone 0808 808 9000

SMS 0780 000 0360

(standard text message rates apply)

Email information@hearingloss.org.uk

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