



DEAF

FOCUS

GROUP

REPORT

SEPTEMBER

2020

Second Edition

healthwatch
Sandwell



Engaging
Communities
Solutions



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Introduction

The purpose of this report is to give an overview of the focus group that was held 22nd September 2020 in partnership with Sandwell Deaf Community Association (SDCA) and Healthwatch Sandwell (HWS) using Zoom.

It was attended by 6 people, 2 British Sign Language (BSL) Interpreters, and staff from SDCA and HWS.

This was the second focus group and there were some different attendees from the first one.

Background

HWS in partnership with SDCA have created a focus group for deaf and hard of hearing people to share their health and social care experiences in Sandwell. The first report made recommendations to improve services in Sandwell see appendix 1.

These recommendations are still outstanding and will need to be addressed.

The agenda for 22nd September was to focus on people's experiences during Covid 19.

People's experiences accessing health and social care during COVID 19

The group stated that they appreciated that COVID 19 has brought about many challenges for all people and that they were trying to be patient. However, being hard of hearing or deaf, the pandemic has exacerbated many of their difficulties with regards to communication and care. It was stated that at first, in March 2020, that there was a general feeling of panic in the Black Country when COVID 19 emerged, but things have calmed down and people are getting used to the restrictions now.

The group's feedback has been divided into 6 themes, as follows:

1. Feelings and emotional well-being/mental health

People described feeling isolated due to shielding and a loss of confidence due to not going out. Some people were worried about going outside and meeting others for the fear of contracting COVID 19.

People described feeling down, and although some have kept in touch using digital technology they have still felt alone.

One person informed the group that at one point the Crematorium was closed to visitors and that this had interfered with their mourning process that they were experiencing. The decision to close the Crematorium caused frustration as people could freely visit supermarkets at that time so therefore did not make sense to them.

It [the pandemic] makes me anxious...it is very stressful, and I have been in panic mode. I have not found it easy at all. It has had a huge impact on my life.

2. Coping mechanisms during COVID 19

One person advised the group to do what helps them cope and what makes them feel good. People described using humour as a way of coping: naming various rooms in the house by geographical areas e.g.: the kitchen was Las Vegas.

3. Communication Issues

The group have previously identified various communication issues which are listed in the 1st report published in June 2020: especially the need for an accredited British Sign Language Interpreter in





healthcare settings including audiology and access to reliable hearing aids.

<https://www.healthwatchsandwell.co.uk/wp-content/uploads/2020/06/Deaf-Focus-Group-Report-1.pdf>.

The group recognise the need to protect each other and themselves by wearing face masks, however they interfere with lip reading, and communication is further impaired when there are no BSL interpreters.

An example was cited when a person had a medical health emergency, so they text 999. When the paramedics arrived, the person had to lip read but they were wearing masks. They wrote down information, but the person does not read English as BSL their first language. The person repeatedly asked for an interpreter but was refused and had to wait 2 hours for an interpreter to be booked even though it was a medical emergency. The hospital tried to engage with a BSL level 1 signer, but this was not effective.

‘It’s so hard to talk about my problems – it should be on the computer that I’m deaf and need to be identified as deaf’

People described the frustration caused when there was a lack of communication from their GP practice about cancelled appointments, especially when the person made the effort to go to the Practice.

GPs were required to be accessed at different venues, which in itself was unsettling, but this was made worse by the fact at the different venue when names were called out for their consultation, they could not be heard so

¹ eConsult enables NHS based GP practices to offer online consultations to their patients. This allows patients to submit their symptoms or requests to

appointments were missed, causing frustration and embarrassment.

4. Care

People had used e consult¹ and medication was prescribed, but on arrival at the pharmacy no prescription had been received this meant the patient was without antibiotics all weekend. Contact was made with the GP on Monday, it transpired the prescription had not been signed. This caused a lot of anxiety for the patient.

A patient had been diagnosed with cancer at the Queen Elizabeth Hospital (Universities Hospital Birmingham NHS Foundation Trust) in March 2020, but treatment was postponed due to COVID 19, this is to be reassessed in November, some 8 months later. This delay has caused much concern to the patient for their prognosis.

A wheelchair user described feeling ‘invisible’ as healthcare professional only talk to their partner at appointments and that the hand sanitiser was not accessible as it was too high.

5. Hearing Aids

A patient requested access to the audiology clinic at Rowley Regis Hospital as it is closer to their home instead of going to the Lyng (West Bromwich) – HWS to pursue access criteria for audiology clinic at Rowley Regis Hospital.

Hearing aids had been sent to the Lyng for adjustment and the patient was without them for several weeks. Upon return of the aids there was no instructions of what to do with them. Fortunately, a volunteer from SDCA assisted.

6. Recommendations

- All patient records to indicate that the person is a BSL user



their own GP electronically and offers around the clock NHS self-help information, signposting to services, and a symptom checker.



and requires an accredited BSL interpreter.

- At appointments names on board would be helpful when it is the patient's appointment. Something visual would be helpful not just audio.

The way forward.....

It was agreed the next focus group would be around mental health and COVID 19. HWS to organise and facilitate.

Then in the new year to invite representatives from Sandwell and West Birmingham NHS Trust and the Clinical Commissioning Group to the meeting.

Appendix 1

Advice and Recommendations to commissioners and providers of health and social care services from first report:

- Put yourself in patients' shoes and empathise, try and understand how difficult and challenging life can be. Perhaps commissioners of services and Senior NHS Bosses need to meet deaf people at SDCA.
- Please be more accountable to and transparent the deaf community especially how money is spent.
- A British Sign Language Interpreter to be booked in advance and 3 BSL Interpreting is the process of transferring a spoken or signed language into another spoken or signed language to ensure that effective provided at each consultation with a medical and social care professional.
- Only engage Registered Sign Language Interpreter (RSLI) – Yellow Badge as recommended by National Registers of Communication Professionals working with Deaf and Deafblind People.
- Healthcare and social care professionals including GPs and receptions to understand the role of BSL interpreters.

- Commissioners and staff to be familiar with the National Commissioning Framework for Hearing Loss Services (2016) and to implement its recommendations.
- People who are hard of hearing or deaf need extra time for a consultation, 10 minutes is not enough at the GP.
- Consider different ways of having an appointment e.g. SKYPE with sub titles.
- Ensure that there are adequate and timely GP appointments.
- Use videos with sign language interpreters and/or sub titles explaining information in reception areas.
- Add individual needs to patient records, especially the need for a BSL interpreter.
- Ask the deaf community for feedback on effectiveness of BSL interpreters.
- To understand the service that is be commissioned, talk communication takes place. S/he usually interprets simultaneously, i.e. at the same time as the language is spoken or signed to Sandwell Deaf Community Association.
- Provide better hearing aids (NHS), as they do not last very long.

For more information:

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