



# **Health Needs Assessment**

# **Deafblind and Deaf communities**

**Summary Report** 

November 2017

### 1. Introduction

Deaf and Deafblind communities experience significant health needs and NHS Greater Glasgow and Clyde (NHSGGC) continues to improve its response to these needs (1-2). Following a health needs assessment in 2012 a further Health Needs Assessment has been carried out in 2016. The summary below compares some of the findings from 2012 to the present health needs assessment of 2016.

NHS Greater Glasgow and Clyde (NHSGGC) has provided funding to Deaf Connections and Deafblind Scotland for a number of years and has a history of working with communities with sensory impairment to assess health needs (3-5).

This funding and partnership with the voluntary sector has ensured that:

- service users receive adequate interpreting services (e.g. Deafblind communicators, British Sign Language (BSL) interpreters);
- appropriate engagement, consultation and research is facilitated;
- health improvement activities are maintained for these communities including facilitating access to health improvement activity, as required, in all NHSGGC local areas;
- Advocacy is provided for the communities.

### 2. Health Needs Assessment

#### 2.1 Approach

The Health Needs Assessment was facilitated by Deaf Connections and Deafblind Scotland. These two organisations worked together to plan and report on the Assessment.

#### 2.2 Methodology

300 questionnaires were distributed in standard, large and extra large print, Braille and in voice recordings. One to one and small group meetings were arranged and communication support was provided as required to ensure meaningful participation. 45 questionnaires were returned from Deafblind people and 60 from Deaf people in 2012. In 2016, 44 questionnaires were returned from Deafblind people and 58 from Deaf people.

## 2.3 Findings

An analysis of the 2016 survey and comparisons to the 2012 survey found that:

- Respondents were attending 37 GP practices/health centres across the Greater Glasgow and Clyde Health Board area;
- In 2016, 31% of both groups (Deafblind and Deaf people) felt NHSGGC had improved its approach to their communication needs in the last few years; 31% same and 12% worse;
- In 2012, 18 people out of 45 said they were Deafblind, however, in 2016 only 10 out of 44 described themselves in this way. A higher proportion describe themselves as Blind with Hearing Impairment;
- In 2012 it is interesting to note that 40 out of 45 communicated using Speech and Hearing, however, in 2017 it has dropped down to 31 out of 44. Another interesting finding is that Lip reading and Speech to Text has increased;
- 34% of Deafblind people in 2017 live independently in the community compared with 66% in 2012. An opposite trend was found for Deaf participants (48% 2017: 28% 2012);
- In both time periods, over 50% of Deaf participants were BSL users;
- Deafblind people often used two communication methods at the same time e.g. hearing and lipreading, BSL and Deafblind Manual, or BSL and writing things down;
- Only 36% of Deafblind people had a regular guide/communicator service for purposes other than for health reasons. NHSGGC funds a service in health settings, which is vital to Deafblind people;
- 100% of participants reported that dual sensory loss and hearing loss undoubtedly had a negative impact on their health:
  - > They were unable to access information
  - ➢ 60% found hospital appointments difficult
  - > 58% don't hear what the staff are saying
  - > 60% reported that making appointments is difficult
  - 60% can't check food labels to ensure healthy eating choices
  - ➤ 45% can't see changes in their body

- Not one Deafblind person was medication free (only around 10% Deaf people) in both time periods, with multiple medications reported for most people;
- Over both time periods, over 40% of both groups were unaware of the potential side effects of the medication they were taking
- Overall in 2016, under 50% felt the hospital understood their sight and hearing loss and the difficulties created;
- In 2016 It was reported around 40% of health services did not know about, or did not mention, the availability of a guide/communicator service;
- 34% of deafblind people were in receipt of specialist hospital services in 2016, 7% had been a hospital inpatient in the last year, 9% had difficulty getting around in a hospital setting and 5% thought communication was a major problem;
- in 2016 59% of Deafblind people were unaware of services provided by their local surgery;
- Over 70% who took part in the survey felt isolated sometimes or most days, with 45% feeling low or depressed both in 2012 and 2016;
- In 2016 66% reported taking one hour or more of exercise per week with walking being the most common exercise;
- In 2016 39% of those who responded reported "getting out and about more with communication support" as the most important factor in feeling better;
- The most important services in this assessment were the provision of a guide/communicator service and BSL interpreters, information being provided in alternative formats, and the respondees wanting staff to be trained in deafblindness and deafness

## 3. Conclusions

The comparison between 2012 and 2016 of Deafblind and Deaf people's health needs indicates that although only 12% of survey participants feel NHSGGC has faired worse in meeting their needs, however there remains a high level of health need for these communities of interest.

The findings reinforce previous work which showed that mental health, isolation and use of multiple medications are key health issues for these communities. Communication support and access to information remains a real challenge. A key request from participants was training for staff.

#### 4. Next steps - NHSGGC

- NHSGGC is delivering sensory impairment training for staff in acute services which utilises trainers with lived experience;
- An outcome on sensory impairment is included in NHSGGC's Equality Scheme 2016-20;
- The participants in this Health Needs Assessment will receive feedback on what issues were raised and how NHSGGC will respond;
- The Health Needs Assessment often showed that Deaf and Deafblind people are unaware of sources of support. A pilot of an accessibility audit is taking place in Health Centres which will cover access and support for Deaf and Deafblind people. This will inform whether further materials are required to promote services to Deafblind and Deaf people;
- NHSGGC pharmacy services have carried out an audit of current approaches to sensory impairment and an improvement plan is in place;
- Communication support which is appropriate, easily accessed, in their preferred method and given timeously and discreetly, is essential in health and social care settings. There needs to be more awareness for NHS staff on how to provide communication support. NHSGGC is currently reviewing its Interpreting Service to ensure it is fit for purpose and continues to communicate to staff the need to provide this support.
- NHSGCC has piloted on-line access to BSL communication support and this is now being widely used in emergency settings.

#### 5. References

1. Alexander A et al (2012) Deafness might affect your health. The Lancet 9820: 979-981.

2. Atkinson J, Woll A (2012) The health of deaf people The Lancet **9**833: 2239.

3. GGHB (2002) Are you listening? A report on Deaf Issues in Health Services, Glasgow: GGHB.

4. FMR Research (2002) Drug and alcohol issues affecting those with a sensory impairment. Glasgow: FMR Research

5. Deaf Connections (2012) Wellbeing interventions for Deaf people. Glasgow: Deaf Connections