



April 2023

The tip cards are **colour coded**.

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-  2. Blind and Visually Impaired People
-  3. People with a Learning Disability
-  4. People with Mental Health Issues
-  5. Lesbian, Gay and Bi-sexual People
-  6. Trans People
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-  8. Young People
-  9. Black/Minority Ethnic People
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-  11. Autistic People
-  12. Asylum Seekers and Refugees
-  13. Deaf People (BSL users)
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-  16. Gypsy Travellers
-  17. People with money worries
-  18. People experiencing Gender Based Violence

Introduction



The way we communicate has a huge impact on how our services are perceived. How welcome a person feels affects their use of services and ultimately their health.

The language we use, whether verbal or written, should give a clear message that we value diversity and respect individual differences.

Derogatory language and other discriminatory behaviour violates equalities legislation and is not tolerated in NHSGGC.

Produced in response to staff requests, this resource covers some key tips for communicating with various groups of people. For further information go to **www.nhsggc.scot/equalities** or call the Equality & Human Rights Team on **07970 006631**.





What to do if you witness or experience discrimination

The communities we work in and the diverse patients we care for have a right to expect compassion, dignity and respect from healthcare professionals.

Our workforce of 43,500 people is also a diverse community where there is a zero tolerance of discrimination or prejudice from colleagues or patients on the basis of age, sex, race, religion, disability, sexual orientation, gender identity or social class.



If you witness or experience discrimination or prejudice:

- Tell the person responsible to stop the particular behaviour or action as soon as you can and record it on Datix
- If you feel unable to do this, you should record it on Datix and report it to your line manager as soon as possible.

NHSGGC has a Dignity at Work Policy which you can find on HR Connect for more information.

If the incident is a Hate Crime you should report it on Datix and it will be investigated.

A Hate Crime is a crime committed against a person or property that is motivated by 'malice or ill-will towards an identifiable social group'. The issues covered by this law are race, religion, sexual orientation, transgender identity and disability.



1. People who are Physically Disabled

If you use outdated language, people may think you don't know or understand their needs.

Do say

Disabled people

Don't say

The disabled, people with a disability, crippled, handicapped

Focus on the person, not the impairment, and always treat adults as adults.

If you offer assistance, wait until the offer is accepted and then listen for instructions. Don't be afraid to ask questions when you're unsure what to do.



1. People who are Physically Disabled

Do say

Wheelchair user

Don't say

Wheelchair bound

For those who use wheelchairs -

- Try to ensure your eyes are at the same level
- Communicate with the service user directly and not with their carer
- Don't lean on the wheelchair
- Always ask if assistance is needed

Be aware that not all physical disabilities are visible. Ask people how you can meet their individual needs.



2. Blind and Visually Impaired People

People with a visual impairment will vary in the extent of sight loss they experience.

- When you meet a Blind person, introduce yourself. If you leave and come back, state your name and who you are again, even if you've only been away for a short time.
- Offer assistance, but don't assume it's required. To lead the person, offer your arm to grip at the elbow and warn of any obstacles.
- A Guide Dog can accompany patients to appointments. Please do not feed or give attention to the dog while it's working. See the Assistance Dog Policy for more information.



2. Blind and Visually Impaired People

- Take the time to explain where things are, such as the toilets, call button and drinks.
- If medication is prescribed, explain how, why and when it should be taken and any possible side effects.
- Written information can be provided in Braille, large print and audio. This can be arranged through the 'Clear to All' accessible information service. Go to the Clear to All page at www.nhsggc.scot for details.
- Bear in mind that fewer than 7% of visually impaired people use Braille. The majority of people prefer audio or electronic versions (which can then be read on a computer using assisted technology).



3. People with a Learning Disability

Do say

Person with a Learning Disability

Don't say

Mentally handicapped
or mentally retarded

- Use language that is clear and simple. Avoid jargon.
- Be specific, e.g. instead of saying “Please use the waiting area in reception” say “Please sit on the chair in the hospital reception and wait for the nurse”.
- Allow more time for explanations and make sure that the patient understands. Information repeated back to you does not mean a patient has understood. Try asking them to explain in their own words.
- Speak to the person, not the support worker - even if a person is non-verbal.



3. People with a Learning Disability

- Seek permission from your patient before asking carers for information.
- Ensure staff know the person may need someone to stay with them overnight, even if they are an adult.
- Written information can be provided in an easy read format. This can be arranged through the 'Clear to All' accessible information service. Go to the Clear to All page at www.nhsggc.scot.
- Identify stress triggers and try to avoid them. Use information from family /carers to interpret non verbal signs.
- Be alert to sudden behaviour change indicating distress or pain. Communication difficulties are often misinterpreted as challenging behaviour.
- Prepare your patient for procedures/interventions. Explain and allow for questions. Some people may require visits to observe equipment, environment and personnel beforehand.



4. People with Mental Health Issues

Do say

Mental health issue

Don't say

Mental condition or mental disorder

- Provide extra time to give you both time to explain and understand what is needed.
- Speak clearly and slowly, avoiding jargon. Engage the person in the process by asking opinions.
- Relax and stay calm, keeping your tone of voice positive and friendly. Listen and make eye contact (unless this is threatening).



4. People with Mental Health Issues

- Try to minimise distractions and be aware of contradictions between the person's verbal and non-verbal communication.
- Don't assume - clarify by asking questions - and avoid criticism or blame.
- If the patient has a diagnosis of, for example, anxiety or depression, you can use these terms when speaking with them.



5. Lesbian, Gay and Bi-sexual People

Making assumptions about someone's sexual orientation can make them feel excluded.

Say

Partner

They

Emergency contact

Instead of

husband or wife

he or she

next-of-kin

Don't ask 'Are you gay, lesbian or bi-sexual?'

Do ask 'How would you describe your sexual orientation?'





6. Trans People

Trans is an umbrella term for people whose gender is not the same as or does not sit comfortably with the sex they were assigned at birth.

Trans people may describe themselves using one or more of a wide variety of terms including (but not limited to) transgender, transsexual, gender-queer, gender fluid or non-binary.

Being trans is not a sexual orientation - trans people can be lesbian, gay, bi-sexual, straight or other.

Language is important. People sometimes worry about using the correct language when talking about gender identity and are often concerned about 'getting it wrong'. A person may change the term they use to describe their identity or use a new term which is unfamiliar. It's important to make sure that the words a person uses to describe their identity are respected and used by others.



6. Trans People

To avoid assuming someone's gender identity, you can use gender neutral pronouns such as they or them.

People can change their recorded sex and name on their medical records at any time by contacting their GP practice. The practice will update records and inform National Services Scotland who will adjust the person's Community Health Index (CHI) number.

If you are aware that a patient has a trans history, there are very limited circumstances when you can share this information with someone else. Make sure you always have the person's permission before sharing and that the information is relevant to their care.



7. Older People

Don't assume that an older person has certain issues because of their age. See the person and respond accordingly.

- Always speak directly to an older person, rather than to the carer or companion they are with. Use plain English and avoid jargon.
- Be aware of any communication issues, such as hearing or dementia. Speak clearly, but don't patronise by speaking too slowly or shouting.
- For anyone with a visual impairment, keep large print versions of documents handy. If the person has a hearing impairment, don't be afraid to ask about specifics, such as which side they have the most trouble hearing on.
- Remember that while an older person may be capable of understanding the information, they may need a little more time to absorb it.



- Ask, “What questions do you have?” when providing information. After asking, pause for long enough that they have a chance to think.
- Create opportunities to speak privately with an older person to check that they feel safe from harm from their carer or any other person.
- For advice on adult support and protection issues, contact the NHSGGC Public Protection Service
0141 451 6605



8. Young People

It's important to share decision making with the young person to agree decisions together about treatment options and next steps.

- Explain your service's policy on confidentiality to a young person at the start of every consultation.
- Listen to the young person and not the adult with them.
- Use plain language and ensure that they have the opportunity to ask questions.
- Don't swamp young people with written information and ensure that the information given is age-appropriate.



- Create opportunities for young people to speak with you privately to check that they feel safe from harm and bullying.
- For advice on child protection issues, contact the NHS GGC Public Protection Service 0141 451 6605



9. Black/Minority Ethnic People (BME)

BME and BAME are often used when referring to the Black and Minority Ethnic community.

Do not assume because of a person's appearance that they won't speak English. If English is not the patient's first language, use short, simple sentences and avoid jargon. Always arrange interpreting support if required (see over).

All written information can and should be provided in alternative languages. Cards which can help you identify a person's language are also available.

Written information can be provided in the appropriate language either written or on audio – for those who don't read the language they speak. This can be arranged through the 'Clear to All' accessible information service. Go to the Clear to All page at www.nhsggc.scot



9. Black/Minority Ethnic People (BME)

NHSGGC has a responsibility to provide interpreters for patients attending any of our healthcare services. As the service provider it is up to you to arrange this. However, the provision of interpreting support is paid for centrally by NHSGGC, not by your service.

Check if your patient would prefer their interpreter to be male or female. Where this is possible this should be considered. Family members/friends should not be used as interpreters. We are not insured for unregistered interpreters.

Where possible all short appointments (under 46 minutes) should use **telephone interpreting**. This applies to all short appointments unless the patient is a child or has additional vulnerabilities. You can access telephone interpreting by calling or using the app.



9. Black/Minority Ethnic People (BME)

You will need your 6-digit department PIN. You will also need a code to use the app. If you do not know these go to the Interpreting Services page at www.nhsggc.scot

Telephone - call **0330 088 2443**

Mobile App - Download the **ILClient** App free from your app store

To book a **Face to Face Interpreter**

email: interpretingservice@ggc.scot.nhs.uk

For same day/next day requests and cancellations or out of hours call **0141 347 8811**.





10. Faith & Religion

Customs and cultures vary hugely, as do personal beliefs. The views of the individual or family concerned should always be sought and respected.

- Don't assume that you know what a person believes or requires - always ask.
- Prayer facilities should be available for all.
- Ensure that any communication needs are met, in terms of providing an interpreter, information in the appropriate language etc.

When specific guidance is required on spiritual care, contact the Chaplaincy Service via the switchboard or consult the NHSGGC's Culture, Religion & Language Guide available at

www.nhsggc.scot/equalities





11. Autistic People

- Try to give an Autistic Person the first or last appointment of the day. This may help reduce stress levels caused by busy environments and the impact on the person's ability to process information.
- For the same reason, where possible offer a quiet, less brightly lit space for the person to wait.
- Do not assume if someone is non verbal that they do not understand what is being said. Be clear in the language you use and check their understanding.
- Not all Autistic people will make eye contact.
- Autistic People may take things literally. If you say, "This will only hurt for a minute" then an Autistic person may well expect this to be the case.
- Autistic People may not realise when sarcasm, irony or metaphors are used.



11. Autistic People

- Always explain what you are doing and why. Let the person know beforehand if you are going to touch them.
- If an Autistic Person has a carer, enlist their support but do not talk over the Autistic Person.
- Autistic People can be over sensitive to light, sounds and smells (some people may be undersensitive - be guided by individual circumstance). Over-stimulation of an Autistic Person's senses can lead to a variety of reactions such as humming or rocking. They may also become less able to communicate their needs as they become overwhelmed by sensory input. Try, where possible, to limit noise, light and smells.
- Where possible, offer the opportunity for a pre visit and/ or increased information to enable an Autistic Person to reduce their anxiety levels about the whole experience. It may also aid your understanding of what they require.



12. Asylum Seekers and Refugees

An asylum seeker is a person who has submitted an application for Asylum in the UK home Office. A refugee is a person whose application had been accepted and is allowed to remain in the UK.

- Both asylum seekers (whether their application is pending or unsuccessful) and refugees are entitled to use our services.
- Remember that they represent a wide range of countries, languages and religions.
- Take time to explain the process/patient pathway - someone coming from another country is unlikely to understand how the NHS works.
- Be aware of any language and communication issues and ensure the patient's needs are met (see over).
- For more information and advice you can contact : Asylum Health Bridging Team on 0141 531 1501



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Where possible all short appointments (under 46 minutes) should use telephone interpreting. You can access telephone interpreting by calling or using the app. You will need your 6-digit department PIN.



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Telephone - call **0330 088 2443**

Mobile App - Download the **ILClient** App free from your app store

To book a Face to Face Interpreter
email:interpretingservice@ggc.scot.nhs.uk

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13. Deaf People (BSL users)

Do say

Deaf, profoundly Deaf,
Deaf without speech

Don't say

Deaf and dumb

Just because someone is wearing a hearing aid does not mean they can hear you. People who are hearing impaired vary in the extent of hearing loss they experience. Some Deaf people have British Sign Language as their first language.

- Do not shout.
- Do not assume you can communicate with pen and paper.
- Ensure you have the person's attention before you speak by touching their shoulder.
- Lip reading, gesture or any other form of communication is not enough for a clinical intervention. You must always book an interpreter.



13. Deaf People (BSL users)

By law, we must provide British Sign Language interpreting support for our Deaf patients - both at health appointments and when they are in hospital.

This support can be provided by booking a Face to Face interpreter or via our British Sign Language (BSL) Online interpreting Service, using NHSGGC's communication support iPads. Please note that online interpreting is not suitable for every BSL user - always check.

Friends, family members or staff with BSL skills should not be used as interpreters.

To book a Face-to-Face British Sign Language (BSL) Interpreter email: interpretingservice@ggc.scot.nhs.uk

For same day/next day requests or out of hours call

0141 347 8811



13. Deaf People (BSL users)

The BSL online interpreting service allows you to communicate with your Deaf patients 24/7. Patient communication support ipads are available across NHSGGC sites. Go to the British Sign Language Online Interpreting page at www.nhsggc.scot for details.

Check with your patients what method of communication works for them while waiting for an interpreter to arrive, or during hospital stays when an interpreter is not always present. This may include lip reading, writing things down, or online interpreting.





14. People who are hard of hearing

Do say

Person who is hard of hearing or person with hearing loss.

Just because someone is wearing a hearing aid does not mean they can hear you. People who are hearing impaired vary in the extent of hearing loss they experience.

- Do not shout.
- Ensure you have the person's attention before you speak.
- Move away from background noise and speak clearly and directly to them. Don't turn away or cover your mouth while speaking.
- Check if you have been understood.
- Do not call someone's name and walk away in a busy clinic, they may not hear you.



14. People who are hard of hearing

If a loop system is being used, check it is working and ensure the patient switches their hearing aid to the **T** position.

Some interventions require hearing aids to be removed, e.g. taking temperature, x rays. Always remember to allow the person to put the hearing aid back in before giving information.

Help the patient keep the hearing aids safe in wards when they have been removed.

Our patient communication support iPads provide access to the AVA app, which provides a written caption of what you are saying in real time for the patient to read. This is for patients with a hearing loss who would normally lip-read and cannot because of the use of masks.

The iPads are available at sites across NHSGGC. Go to the British Sign Language Online Interpreting page at www.nhsggc.scot for details.



15. Deafblind People

Do say

Deafblind

Dual Sensory Impaired

Don't say

Deaf

Blind

Deaf and Dumb

Deafblind is a term used to describe someone who has a dual sensory impairment. This means that they will have both a visual impairment and a hearing impairment. All Deafblind people are different. Each person will experience various levels of sight or hearing impairment.

- A Deafblind person may be accompanied to their appointment by a Guide Communicator
- If the patient requires a Deafblind Guide/Communicator, contact Deafblind Scotland on 0141 777 7774.



15. Deafblind People

- If the patient requires a Deafblind Guide Communicator, contact Deafblind Scotland on 0141 777 7774.
- When you meet a Deafblind patient, talk to the person directly - not to the Guide or anyone else who may be with them.
- Some patients may have sufficient sight and prefer to use a British Sign Language interpreter to help with their communication. It is the responsibility of the NHS service that is providing the consultation to book a BSL interpreter. If an interpreter is required, contact the NHSGGC interpreting service on 0141 347 8811.



15. Deafblind People

- Information can be provided in a number of accessible formats that suit the needs of the patient. This might include written information in large print or Braille - always ask the person what their preference is. Translations can be arranged through the Clear to All accessible information service. Go to the Clear to All page at www.nhsggc.scot
- Take the time to explain where things are, such as the toilets, call button and drinks.
- If medication is prescribed, explain how, why and when it should be taken and any possible side effects. Make sure the patient is satisfied that they understand all the information you have given them.





16. Gypsy Travellers

Gypsy Travellers are not all the same group - there are many distinct Traveller communities.

- Travellers have the same rights to access health care, education and housing as the non-travelling community.
- Travellers often live in houses but still identify as being part of the Gypsy/Traveller community.
- Ask the person if they would like to be referred to as Gypsy Traveller or what they would like to be called.
- Be aware of heightened privacy issues, e.g. ask if there is anything that would make people more comfortable.



16. Gypsy Travellers

- Be conscious of possible literacy difficulties. Be ready to offer help in a sensitive way.
- Gypsy with a capital 'G', Traveller with a capital 'T'.



17. People with money worries

Money worries can impact negatively on people's physical and mental health and their recovery from illness.

Any one of your patients may be worrying about money and may benefit from some advice.

You can ask -

“Do you have any money or debt worries? “

“Would you like to speak with an advisor to discuss money worries or help you to claim any benefits that you may be entitled to?”

Simple referral routes to money advice services are available in the Health Improvement Directory

<http://infodir.nhsggc.org.uk>

Just click 'money advice' in the topics list.



17. People with money worries

The Support & Information Service can also make a referral for both patients and staff.

Contact sis@ggc.scot.nhs.uk



18. People experiencing Gender-Based Violence

The term Gender-Based Violence (GBV) covers a range of issues including -

- childhood sexual abuse
- commercial sexual exploitation (prostitution)
- domestic abuse
- harmful traditional practices (including FGM)
- rape and sexual assault
- stalking and harassment
- trafficking for sexual exploitation

As health workers we are in a unique position to respond to such abuse. You are not expected to be an expert or to provide everything a patient needs, but you can play a crucial part in improving the immediate and long-term health impact on all those affected.



18. People experiencing Gender-Based Violence

Identify – Be aware that GBV is a possibility. If you are concerned they may be experiencing domestic violence or abuse, offer to talk privately with them somewhere that they feel safe.

Respond– Listen to what they say, show empathy and ask what they need. If the person needs support to communicate, including an interpreter, use a professional who has a duty to maintain confidentiality. Do not use family and friends. For info on interpreting see the Interpreting Services page at www.nhsggc.scot

Support – Assess risk and agree a plan for their safety. Help them connect to support services.



18. People experiencing Gender-Based Violence

Domestic Abuse and Forced Marriage Helpline

0800 027 1234

NHSGGC Public Protection Service

0141 451 6605 - advice line for health workers dealing with child or adult support and protection issues

Rape Crisis Scotland

08088 01 03 02 - National helpline

Scottish Women's Rights Centre

08088 010 789 - info on legal rights, for women experiencing GBV and supporting services

Seek permission before you pass on information and get advice if you are in any doubt.

