

# CAUSE AND CURE

## *Guidance*



DEAFBLIND  
·UK·



# Cause and Cure: Deafblind people's experience of the NHS

## Recommendations Guidance

This guidance will enable NHS services to achieve the main recommendations of the Cause and Cure: Deafblind people's experience of the NHS report, and should be considered in conjunction with the report.

There are 3 areas that would benefit all people who are deafblind or have a progressive sight and hearing loss; awareness, interpreting services and accessible information. Each area then has 3 levels of guidance; basic, intermediate, and advanced.

## Awareness

### Basic

Key front of house staff who work in areas frequently utilised by people with combined sight and hearing loss such as reception, audiology and ophthalmology services, should undertake basic disability awareness training. This should include sensory impairments and cover communication methods and guiding.

### Intermediate

All front of house staff should undertake basic disability awareness training, which includes sensory impairments and covers communication methods and guiding.

### Advanced

Deafblind awareness training should be included in all disability, and equality and diversity training undertaken by any and all staff. PALS staff could undertake CACDP<sup>1</sup> training in deafblindness, as they would then be more able to help trouble shoot any issues for patients who are deafblind or have a progressive sight and hearing loss.



## Accessible information

### Basic

All letters, leaflets and appointment cards where possible (i.e. where sizes can be altered on a computer) should be printed in large print font size 18.

### Intermediate

Amend relevant policies to allow patients who are deafblind or have a progressive sight and hearing loss to arrange appointments etc by the use of email, fax, phone and Typetalk. Research services able to transcribe information into alternative formats like Braille, audiotape and Moon, ensure that any information needed can be transcribed in a short period of time.

### Advanced

Ensure that all letters, leaflet and appointment cards are all printed in large print font size 18 at all times. Make sure all frequently used information leaflets or documents are available ready printed in accessible formats like Braille and audiotape to be handed to patients as needed. Ensure all leaflets and documents are available in word formats for staff to enlarge the print easily for patients as needed. Make a contract with a transcription service to provide alternative accessible formats for patients who are deafblind or have a progressive sight and hearing loss as and when requested.

## Interpreting services

Deafblind people who have severe sight and hearing loss are at critical risk when accessing healthcare services especially in an emergency.

### Basic

Ensure that your services interpreting contract includes provisions for deafblind patients, including communication methods of clear speech, deafblind manual alphabet, and British Sign language (including visual frame and hands on signing). Check if this service includes collecting the deafblind patient from their home, guiding them to the service and guiding them home. Without this the patient will still have difficulty accessing the service. In some instances a communicator-guide may be preferable to an interpreter<sup>2</sup>. If you don't have this service please contact Deafblind UK interpreting service for details on our service. Ensure any request for interpreting support from deafblind patients is treated as a request for reasonable adjustments under the Disability Discrimination Act s.21. Make sure that staff are aware of the slower nature of communication through interpreters, and that deafblind patients will need longer appointments.

## Intermediate

Ensure that all key staff are aware of the need for interpreting support for deafblind people and that this includes guiding. Make sure all staff are aware of the services responsibility to fund this human support as an auxiliary aid under the Disability Discrimination Act s.21, and how to book this interpreting support. Consider adding this to the review of your services disability equality scheme (where relevant). Ensure that the individual booking interpreting support is responsible for booking a longer or double time appointment as communication will be slower.

## Advanced

Develop a method of identifying deafblind patients that regularly use your service, record their communication, accessible information and guiding needs. Ensure that accessing the individual's patient information flags up this additional information, this should include that a longer or double appointment must be made to allow for communication. Make sure once identified staff members can then access information on your interpreting contract, or alternative deafblind interpreting contract, and book an appropriate interpreting service for that individual. Ensure that any preferences of the deafblind individual are recorded, some may prefer to use their family / friends, or may have a preferred interpreter who they know they can communicate with more effectively. Once interpreting support has been booked ensure the deafblind patient is told and is happy with the arrangements.

## For More Information

To discuss your improvements for patients who are deafblind or have a progressive sight and hearing loss, please contact a member of the Policy, Awareness and Campaigns team on 01733 358100.

- 1 CACDP is the Council for the Advancement of Communication with Deaf People. CACDP are an awarding exam body for courses related to deaf and deafblindness including interpreting assessments.
- 2 The roles of communicator guide and interpreter have similarities but the level of training, ethics and professional standards are different. A communicator-guide may be more appropriate depending on the needs and wishes of the deafblind individual, especially if their main need for the appointment is guiding and not communication. The basic roles of a communicator-guide and a deafblind interpreter are; A Communicator-Guide acts as both the eyes and ears of a deafblind person. Their role is to enable a deafblind person to engage in various activities. They

provide support to meet the individual's communication, information (written and environmental), and mobility needs including guiding. An interpreter is a language service professional, they are trained to interpret information into an individual's preferred communication method i.e. Deafblind Manual, Visual Frame Sign Language, Hands On. All interpreters are registered with an appropriate body, and adhere to the ethical principles of interpreting as well as a Code of Practice for Deafblind Interpreters. An interpreter will guide a deafblind person within a venue; however it is not automatically their responsibility to guide to and from the venue, this should be discussed when booking an interpreting service.