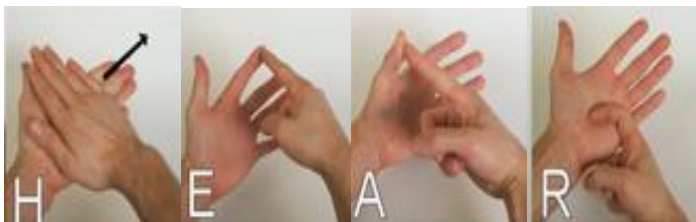




Health & Care Together - Wigan Borough Local Involvement Network (LINK)

What People with a Hearing Problem say about Health and Care Services in Wigan Borough

March 2011



Working With People Who Have a Hearing Problem in Wigan Borough

Members of Leigh Deaf Club invited the Community Engagement Officers from Health and Care Together along to their meeting on 10 November 2010.

Gail Gregory and Julie Darbyshire, Community Engagement Officers from 'Health and Care Together', the Wigan Borough Local Involvement Network, went along with two British Sign Language Interpreters and staff from the Deafness Resource Centre at St Helens, to record issues that were of concern to people there.

Using a Lip Speaker, Gail and Julie met with members of Wigan Hard of Hearing Fellowship on 9 February 2011 and recorded their concerns too.

All the concerns are included within this report for you to read.

Leigh Deaf Club – Wednesday 10 November 2010

at Leigh Sports Village

The following comments were recorded by the Community Engagement Officers:-

Issue

No.

1. I arrived at the doctor's surgery and didn't hear my name being called. I ended up waiting a long time.
2. Throughout my treatment at Royal Albert and Edward Infirmary and Christies no interpreters were provided.
3. I know of incidents where a level II interpreter has been provided when a level VI is the standard qualification.
4. I had 2 appointments at the Dermatology clinic before an interpreter was there.
5. When I booked my GP appointment I was told that it was too late to arrange an interpreter. My GP thought it was ok to write information down but my language is not English but British Sign Language.
6. It would be best if there was continuity with interpreters.
7. At appointments for my husband over 3 years we have had lots of problems – we have waited ages and then been sent home as there was no interpreter, interpreters have been sent home as the nurses didn't know where to send them, interpreters hadn't been given the details of his appointments or didn't realise there were two appointments.
8. What is the best way to book an interpreter? The hospital should book them but 80% of patients are booking them themselves.
9. Receptionists should have basic sign language or use picture cards.
10. How do I tell the chemist or a dentist I am in pain?
11. Some hospitals will book an interpreter with the appointment and some won't.
12. Doctors won't look at me but look at the interpreter. They worry that they won't understand me. They even hand the prescription to the

interpreter.

13. Complicated medicines are not explained.
14. The dentist keeps his mask on when he speaks to me.
15. I'm asked to read something at my appointment with the optician.
16. There's not enough time the doctor told me and I've been asked to book a double appointment.
17. Patients panic when they wait a long time as they worry that their time with the interpreter will run out.
18. Hospital appointments staff will only speak to the patient even though they are not able to hear! They won't even speak to my daughter who could tell what is being said.
19. Services won't always speak to interpreters.
20. Minicomms are not used or don't work.
21. No one seems to check the hearing loop systems and presumes they are on if the lights are lit up.
22. I have had difficulties in booking patient transport. Staff need deaf awareness and don't understand someone 'signing'.
23. Citizens Advice Bureau refused to book an interpreter for me.
24. Banks won't provide an interpreter.
25. Solicitors won't provide an interpreter and access to a solicitor is terrible.
26. You can register your name with the police and fire services to indicate on their systems that you are deaf.
27. How do I contact the police in an emergency?
28. Social services have taken a year to organise a repair to my careline necklace. My husband fell and I was frightened because I didn't hear him.
29. Cleaning of hearing aids in residential care homes needs to be routine.

30. Wigan doesn't have a place where deaf people can go for help and advice.
31. Health prevention/promotion information for deaf people needs to be in an accessible format which the deaf community can transfer and spread.
32. Deaf Person not given diagnosis of a very serious illness (cancer) in a timely manner due to an interpreter not being available leading to delay starting treatment.

Feedback from our comment cards

	What's good?	What's bad?	
187		I pressed my careline; it took them over 1.5 hours to come. They could not sign so it was difficult to tell them what was wrong. They called ambulance and I was put on a ward where nobody 'signed' so I did not know what was happening.	
188	Having an interpreter for hospital. Doctors don't have these at surgeries.	When I go to my GP I find it hard to understand what he says. I can't book a hospital appointment myself; I have to ask a friend. This makes me feel worse when I am ill.	
189	Some hospitals given an interpreter without problems. Things are fine when deaf person has an interpreter this is very important for a diagnosis of illness.	Not deaf aware. Doctors and hospitals have changed the way appointments are made e.g. Phone for a date and give a password. Some letters can be complicated giving a date; when this date is to ring up. Doctors need to do this for deaf people.	
190		Doctors and dentists do not have sign language users to help deaf people. No text only service.	

Wigan Hard of Hearing Fellowship - 9th February 2011 Crompton St Day Centre

The following comments were recorded by the Community Engagement Officers:-

1. My husband is deaf but has no choice but to telephone to make appointments – therefore I have to do this on his behalf.
2. If I want an appointment I have to walk to the doctor's surgery – I can't use the phone as I am deaf if I don't go to the practice my husband has to phone on my behalf
3. It's not too bad when I go to Thomas Linacre as I am known to them but at Leigh I was sat in the corridor waiting because they only shouted out names and I could not hear.
4. When I go to the hospital, there is a 'Hard of Hearing' sticker on my file so the staff tap me on the shoulder when it is my turn which works well for me.
5. 12 months ago at the Thomas Linacre Centre there used to be a 'drop-in' audiology service where no appointments were necessary. This service has now stopped and you have to ring up to make an appointment so have to use a hearing person to do this or walk there.
6. They say I can book appointments on the internet, but I don't have the internet!
7. In the Thomas Linacre Centre, ear, nose and throat department, they have changed the chairs around in the waiting room so we are now facing the wall – we need a white board on the wall so they can write our names on. But they said this would breach patient confidentiality although they are happy to shout names out!
8. Who pays for the interpreters? Some people don't know how to access an interpreter (most of the people in this meeting). No one tells them they have to book them.
9. Main problem is not being able to phone up, procedures are geared up for hearing people only – not good – some patients text their friends and ask them if they will ring up on their behalf.

10. There are difficulties at the dentist – I have to ask the receptionist (who is also a dental nurse), to go in with me as I can't tell what the dentist is saying behind his mask.
11. Chemists are always very helpful. Type -talk phone is good for me but lots of places don't have type-talk and they put the phone down on me.
12. I have difficulty understanding Doctors with foreign accents - I have to ask someone else to go in with me – and sometimes the receptionist can't understand the Doctor. I refuse to see the foreign Doctor as I can't understand him as I am lip-reading.
13. I can't activate my bank card as I have to ring them up and give them a password.
14. There used to be a special department in the job centre for disabled people , but now they just give you another phone number to ring or an email address but I can't phone and I can't email – husband has to do this for me.
15. Funding is difficult for my lip speaking class and we may have to close. People are referred to us from Social Services and the PCT.
16. I have never been able to use a phone since I was 12 – I have to rely on someone all the time.
17. Sometimes it is a sensitive issue and you don't want your family there to help you understand what is being said but I find it difficult to concentrate when I am lip reading and I go away and I can't remember what is said.
18. Interpreters keep things confidential.
19. There should be more support for people issued with hearing aids – 60% of hearing aids go in a drawer and aren't used.
20. There is a hearing therapist in Wigan but nobody knows about it.
21. Most deaf people live on their own - how do they get help in the night?
22. We don't bother going to anything as there are no lip speakers
23. When we rang the emergency doctor we were passed around from one to another

24. At my reassessment my care time has been cut in half to help me to get dressed and showered. When I and my carer asked questions I felt intimidated and my carer was told off. I have to be in the shower and all they will help with now is drying my legs - I don't know what time they will come. I was told you can have more help if you are willing to pay for it. I was asked why do you need a shower every day. I am now waiting for a letter so that I can appeal. I was also told you have to be housebound to have a 'careline'.

Summarising the Concerns Raised

- **There are difficulties in accessing interpreters for health, finance and legal appointments – patients do not know when or how to request interpreters for health related appointments and worry about who is responsible for their costs**
- **There are problems when making health related appointments as the system relies on telephone conversations with the patient**
- **Hard of hearing and deaf people find difficulties in working with any service who relies on a telephone based system**
- **There is an apparent lack of deaf awareness training and provision of support services within local and regional health services**
- **It is not clear how information is provided and shared in the deaf community by organisations providing health, care and emergency services. There is a concern that hard of hearing and deaf people do not receive equal access to health and care information from statutory services as information is not tailored to their needs.**
- **Deaf and hard of hearing people do not know where to access support and advocacy when facing the difficulties recorded above**

The Role of 'Health and Care Together'

A Local Involvement Network is a group of individuals and voluntary organisations who have come together to work to improve health and care services. Each town with a social services council department has an independent Local Involvement Network. The Local Involvement Network (LINK) in Wigan is called 'Health and Care Together'. Currently Health and Care Together has 727 registered participants and contacts.

Decisions about how 'Health and Care Together' works are made, in consultation with participants, by the 'Steering Group'. There is a support team which is responsible for finding out what local people have to say about their health and care services and helps 'Health and Care Together' work with providers to influence and improve local health and care services.

This report is presented to organisations providing the services referred to above to seek both comment and actions in response to the concerns raised by members of the deaf and hard of hearing community in the Wigan Borough.

'Health and Care Together' would like to express their thanks to:-

**Leigh Deaf Club
Wigan Hard of Hearing Fellowship
Deafness Resource Centre, St Helens
Ken Butterfield, Interpreter
Nora Tinsley, Interpreter
Joy Warland, Interpreter**

If you would like more information about the work of
'Health and Care Together'

Please contact their support organisation

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