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# Equal treatment?

The experiences of older people with hearing loss in accessing local health services in Scotland





# Contents

- Foreword . . . . . **4**
- Background to our Access to Health Services survey . . . . . **5**
- Survey design, methodology and recruitment of participants . . . . . **6**
- Details about research participants . . . . . **7**
- 1. Contacting GP surgeries, local health centres and hospitals . . . . . **8**
- 2. Accessibility of waiting area . . . . . **11**
- 3. Communication during medical consultations. . . . . **13**
- 4. Improving accessibility and experiences for patients who are Deaf or have hearing loss in Scotland’s GP surgeries, health centres and hospitals . . . . **16**
- Access solutions . . . . . **17**

## Foreword

An estimated 945,000 people in Scotland are Deaf or have hearing loss. And the number will grow as our population ages. Approximately 70% of people aged over 70 have hearing loss – and age-related hearing loss has contributed to an increase of around 95,000 since 2011.

We're a national charity that provides information and community-based services throughout Scotland, so people who are Deaf or have hearing loss often tell us about the difficulties they regularly experience when they try to book – and when they attend – hospital, health centre and GP appointments.

That's why we chose to gather hard evidence about whether the communication needs of people who are Deaf or have hearing loss are *currently* being met by local health services. Between October 2017 and January 2018, we carried out a nationwide Access to Health Services survey.

Why is this so important? Good communication with patients who are Deaf or have hearing loss is vital – from the time someone books an appointment, through to the wait in reception, to the actual medical consultation. Everyone has their preferred way of communicating, and their needs can be easily met if staff ask about and include communication preferences on patients' records and add alerts to the appointment booking systems.

Action on Hearing Loss Scotland welcomes the Scottish Government's Health and Social Care Standards and the first British Sign Language National Plan announced in 2017. We believe these can be genuine catalysts to improving the accessibility of health services – and patient experiences – for people who are Deaf or have hearing loss.

We believe the findings published in this *Equal treatment?* report are a significant starting point: they'll help inform health services in Scotland about the progressive steps – in particular, in terms of enabling people to use online technology to book appointments, recording individual communication needs and installing hearing loops – to help patients who are Deaf or have hearing loss to experience the same level of service as everyone else in our society.



*Teri Devine, Director  
Action on Hearing Loss Scotland*

## Background to our Access to Health Services survey

The Scottish Government introduced new Health and Social Care Standards in June 2017. These aim to make it easier for people who are Deaf or have hearing loss to access health care. The standards set out what people should expect when using health, social care or social work services in Scotland and seek to provide better outcomes for everyone; to ensure that individuals are treated with respect and dignity and that the basic human rights to which we're all entitled are upheld.

The standards have five guiding principles: 'dignity and respect', 'compassion', 'be included', 'responsive care' and 'support and wellbeing'. These are the aspirations for everyone in Scotland who uses health services:

- I am supported to communicate in a way that is right for me, at my own pace, by people who are sensitive to me and my needs.
- I receive and understand information and advice in a format or language that is right for me.
- I can access translation services and communication tools where necessary and I am supported to use these.

Scotland has also led the way in the United Kingdom by introducing the British Sign Language (Scotland) Act 2015. The Scottish Government's BSL National Plan, published in October 2017, sets out Scotland's ambition to be the best place in the world for BSL users to live, work and visit. It is framed around 10 long-term goals including health. Going forward, public bodies – including health boards – will be expected to produce their own plans in October 2018 to set out how they will meet the needs of BSL users.

As the Scottish Government-funded Deaf Sector Partnership is progressing its work to inform health services throughout Scotland about how they can become fully accessible for people who use British Sign Language, the scope of our research, *informing Equal Treatment?* focuses predominantly on the experiences of older people with age-related hearing loss who make up the overwhelming majority of Scotland's 945,000 residents who are Deaf or have hearing loss.

## Survey design, methodology and recruitment of participants

One of our Senior Research and Policy Officers put together our Access to Health Services survey. It comprised questions designed to obtain the views and experiences of people who are Deaf or have hearing loss regarding contacting and attending GP surgeries, local health centres and hospitals. This allowed us to produce a 'snapshot' of whether their communication needs are being met.

Everyone who took part in the survey provided informed consent for us to use their data. Respondents had the option to withdraw their responses at any time and they could choose to remain anonymous. All responses were confidential and stored in a secure location.

The survey, which was available online in English and British Sign Language, was supplied to people attending lipreading classes, hearing loss groups, community hearing support services and local older people's forums. Regional and local newspaper coverage about the survey generated responses from across Scotland.

Everyone who took part received instructions and all the researchers communicating with respondents had completed deaf awareness training.

The survey centred on three aspects of patients' experiences: booking appointments, their experience whilst waiting for an appointment, and medical consultations.

When the survey finished, our researcher coded all paper copies of survey responses using the relevant NHS health board, and entered the responses, in electronic form, via SurveyMonkey. Data cleaning was carried out using Microsoft Excel.

## Details about research participants

Between September 2017 and January 2018, we received 597 responses to the survey. Responses were received from each of Scotland's 14 regional NHS health board areas as Table 1, below, shows.

**Table 1. Survey responses by health board area**

<b>NHS health board</b>	<b>Total number of respondents</b>
NHS Ayrshire and Arran	140
NHS Tayside	127
NHS Greater Glasgow and Clyde	61
NHS Lothian	57
NHS Fife	39
NHS Lanarkshire	30
NHS Grampian	19
NHS Forth Valley	14
NHS Dumfries and Galloway	14
NHS Highland	11
NHS Borders	10
NHS Orkney	5
NHS Shetland	5
NHS Western Isles	1
Uncategorised	64
<b>Total</b>	<b>597</b>

The majority of respondents (62%) who identified their health board area live in Ayrshire and Arran (26%), Tayside (24%) and Greater Glasgow and Clyde (11%) where Action on Hearing Loss Scotland runs community-based hearing aid support and information services.

The vast majority of survey participants (76%) are aged 65 and over – not surprising, as an estimated 70% of people aged over 70 have some kind of hearing loss. Many people in their later years, those supported at home and individuals with other conditions such as blindness or dementia, however, will have had less opportunity to access the survey.

63% of the participants are female. 37% are male and one respondent identified as non-binary.

## 1. Contacting GP surgeries, local health centres and hospitals

### Why accessibility matters...

Some people who are Deaf or have hearing loss may struggle to follow conversations over the phone. This can lead to confusion regarding appointment times. Others who can't use the phone at all may have to visit their GP surgery, local health centre and hospitals in person to book appointments; or they rely on other people to book appointments on their behalf, which may lead to reduced personal independence and privacy.

### Main findings

We asked people about how they normally book their health appointments as well as their preferred methods for making such bookings. As respondents could choose multiple options they weren't restricted to one answer.

Most respondents (83%) make their own health appointments but nearly one in five (17%) people ask a friend, relative, carer or support worker to make a booking for them.

As Tables 2a, 2b and 2c show, the majority of respondents revealed that telephone calls are both the most commonly used and the preferred method for contacting their GP surgery, health centre and hospital to book an appointment. Visiting in person was one of the ways for 44% of respondents to make an appointment with their GP, 31% at hospital and 34% at their local health centre.

Those tables indicate that health services are not meeting current demand for email, online and text messaging options to be available to book appointments. As Table 3 shows, two-thirds of respondents said they do not receive SMS text messages to remind them about upcoming appointments from their GP surgery or hospital and 75% are not texted by their local health centre.

**Table 2a: How people with hearing loss book hospital appointments**

<b>Hospitals</b>	<b>Contact method normally used by respondents</b>	<b>Preferred contact method of respondents</b>
By phone	71% (324)	58% (283)
I visit in person	31% (144)	16% (78)
By email	8% (37)	22% (106)
Online appointment booking services	3% (12)	17% (86)
By Text message	1% (6)	15% (73)
Total number of respondents who chose one or more option	459	490

**Table 2b: How people with hearing loss book health centre appointments**

<b>Health Centre</b>	<b>Contact method normally used by respondents</b>	<b>Preferred contact method of respondents</b>
By phone	64% (194)	57% (195)
I visit in person	34% (105)	17% (60)
By email	4% (11)	21% (71)
Online appointment booking services	4% (13)	19% (66)
By Text message	1% (2)	15% (52)
Total number of respondents who chose one or more option	305	343

**Table 2c: How people with hearing loss book GP appointments**

<b>GP Surgery</b>	<b>Contact method normally used by respondents</b>	<b>Preferred contact method of respondents</b>
By phone	76% (380)	60% (307)
I visit in person	44% (222)	23% (120)
By email	3% (14)	18% (91)
Online appointment booking services	8% (42)	20% (104)
By Text message	3% (13)	15% (78)
Total number of respondents who chose one or more option	502	513

**Table 3: How many people are notified of appointments by text?**

<b>SMS text messages to patients about upcoming appointments</b>	<b>Hospital (492 responses)</b>	<b>Health centre (336 responses)</b>	<b>GP surgery (474 responses)</b>
Yes	21%	11%	23%
No	66%	75%	67%
Don't know/Don't have mobile phone	12%	14%	10%

**“I struggle when the hospital leaves messages regarding my appointments on my answerphone. They know I’m deaf and this is not the best way to contact me. I’ve had to get a family member to listen for me to ensure I have the details correct.”**

**“I gave my email and textphone details to the receptionist years ago and found in my notes that I apparently refused to give them my contact information.”**

## 2. Accessibility of waiting area

### Why accessibility matters...

Poor communication at reception and in waiting areas can cause confusion and considerable stress for patients who are Deaf or have hearing loss. Like everyone else, they don't want to be late or miss their allocated appointment.

### Main findings

Hearing loops amplify sound for hearing aid users and cut out background noise to help patients with hearing loss to follow a conversation at reception or in the consultation rooms – without staff feeling they need to raise their voices. If loops are installed and working and all staff are trained how to use them, people who use hearing aids will enjoy the same level of privacy as everyone else.

As Table 4 shows, more than 70% of participants don't know if loops are available in the reception areas at their GP surgery, local health centre or hospital. This is concerning: hearing loops should always be charged and switched on, regularly checked to ensure they are in good working order and signs should be clearly visible to indicate that such equipment is available.

**“Over 70% don't know if loops are even available in reception areas.”**

**Table 4: Are hearing loops available at reception?**

Hearing loop available in reception area	Hospital % and number of respondents	Health centre % and number of respondents	GP surgery % and number of respondents
Yes	20% (106)	16% (59)	17% (88)
No	7% (37)	9% (31)	11% (59)
Don't know	72% (376)	75% (268)	71% (368)

**“Local practices are aware of the needs of hard of hearing people and have installed a hearing loop in the waiting room and an alert on patient records.”**

As Table 5 indicates, below, staff calling out patients' names is, by far, the most common way for people to be alerted that it's time for them to be seen by the doctor or nurse. Verbally calling is, obviously, one of the least effective ways of alerting someone who is Deaf or has hearing loss and increases the risk of the patient missing their appointment because they didn't hear their name.

**Table 5: In the reception area, how do you know when it is your turn to see the doctor or nurse? (Please select all options that apply to you.)**

	Hospital	Local Health Centre	GP surgery
Staff call out my name	82% (410)	75% (212)	76% (392)
A family member or friend lets me know	15% (77)	16% (44)	11% (59)
Staff come over to me and speak face to face	11% (54)	9% (26)	10% (54)
There is a display screen which lets me know when it is my turn	5% (23)	11% (31)	17% (87)
There is a ticketing system	2% (10)	1% (4)	1% (3)
Staff come over to me and speak face to face	11% (54)	9% (26)	10% (54)
Total number of respondents who chose one or more options	500	283	517

**“I don't always hear my name being called due to the noise level surrounding me.”**

**“The most important thing I need is for people to tell me, when I am in the waiting room, that it is my turn for my appointment.”**

**“Could have hearing loop but, if they do, it isn't working and they don't know how it operates.”**

### 3. Communication during medical consultations

#### Why accessibility matters...

Poor communication during GP, hospital or health centre appointments increases the risk of people who are Deaf or have hearing loss misunderstanding key information about their diagnosis. This could be dangerous, if it means they can't follow medical advice or use medication correctly.

We welcome Scotland's Health and Social Care Standards, which state that people should receive information "to communicate in a way that is right for me, at my own pace, by people who are sensitive to me and my needs".

Taking the simple steps of noting a person's hearing loss and individual communication needs in their patient record and ensuring there is an alert process to give sufficient time to book any required communication support, is vital to achieving this aspiration.

#### Main findings

Although the main aim of our research was to gauge whether patients were experiencing levels of communication, when using health services, which demonstrate best practice, we also gave participants the opportunity to personally rate the communication of health professionals and frontline staff. Table 6 shows clearly the vast majority are 'very satisfied' or 'satisfied'. Only 13% of respondents stated they were 'dissatisfied' or 'very dissatisfied'.

**Table 6: Patient satisfaction with healthworkers' communication**

<b>Satisfaction with health professional and frontline staff communication</b>	<b>Hospital % and number of respondents</b>	<b>Health centre % and number of respondents</b>	<b>GP surgery % and number of respondents</b>
Very satisfied	35% (179)	34% (102)	39% (198)
Satisfied	39% (204)	35% (107)	37% (188)
Neither satisfied nor dissatisfied	13% (68)	18% (54)	13% (68)
Dissatisfied	9% (47)	9% (27)	9% (44)
Very dissatisfied	4% (20)	4% (11)	2% (11)

But almost three in five (57%) respondents said that staff at GP surgeries, health centres or hospitals hadn't asked about their individual communication needs.

The fact that so many people have not been asked for such important details will explain why, as Table 7 shows, below, around half of all respondents don't know if their GP surgery or hospital has included details of their hearing loss and individual communication needs in their patient record, and 61% said likewise about their local health centre. Fewer than half of respondents said that such details are recorded.

**Table 7: Do your patient records include details of your hearing loss?**

<b>Details about deafness or hearing loss and communication needs in patient records</b>	<b>Hospital % and number of respondents</b>	<b>Health centre % and number of respondents</b>	<b>GP surgery % and number of respondents</b>
Yes	44% (224)	27% (87)	43% (220)
No	7% (36)	12% (39)	7% (36)
Don't know	49% (250)	61% (197)	50% (250)

Also, as Table 8 shows, below, only up to two in five (39%) of respondents said that they got all the information that they needed during their health appointments, which indicates that most respondents have left consultations without feeling fully informed.

**Table 8: Information needs met at health appointments**

<b>Got all information needed at health appointments</b>	<b>Hospital % and number of respondents</b>	<b>Health centre % and number of respondents</b>	<b>GP surgery % and number of respondents</b>
Always	32% (159)	30% (84)	39% (194)
Most of time	47% (233)	48% (134)	46% (227)
Sometimes	16% (80)	16% (45)	11% (56)
Not very often	4% (22)	4% (12)	3% (15)
Never	1% (4)	1% (2)	0% (1)

A few of the reasons respondents gave for not getting all the information they needed during health appointments, which are included in Table 9, below, suggest that doctors and nurses have not always demonstrated good deaf awareness, working hearing loops have not been provided for hearing aid users, and there have been issues with the availability and quality of communication support.

**Table 9: Reasons for not getting all the information you need during health appointments.**

	Hospital	Health centre	GP surgery
The doctor or nurse did not check I understood what was being said	54% (120)	49% (60)	49% (99)
The doctor or nurse spoke too quickly	53% (117)	50% (61)	46% (93)
The doctor or nurse did not face me	45% (100)	43% (52)	44% (89)
There was no hearing loop available	24% (53)	24% (29)	22% (45)
Communication support was not provided	12% (27)	14% (17)	12% (24)
Communication support was not good enough	9% (21)	14% (17)	11% (22)
The doctor or nurse didn't know how to use communication support	3% (7)	5% (6)	3% (7)
Total number of respondents who chose one or more option	220	122	200

**“I get information either because my wife is present and understands the medical terms or I ask for repetition.”**

**“Acoustics in the consulting rooms are very bad. The doctors and nurses speak to the computer and I have to ask them to face me.”**

**“I take responsibility to keep reminding the professional of my communication needs and they do try, most of them! But sometimes I still don't catch everything.”**

#### 4. Improving accessibility and experiences for patients who are Deaf or have hearing loss in Scotland's GP surgeries, health centres and hospitals

The results from Action on Hearing Loss Scotland's research suggest that, while respondents are generally positive about their experiences of accessing health services, there is still some way to go before the benefits of accessible communication and information are fully realised for everyone in the country who is Deaf or has hearing loss.

### Recommendations for health services:

-  Include in patient records preferred individual communication methods and any required communication support (a qualified British Sign Language interpreter or an electronic notetaker) that needs to be booked for people who are Deaf or have hearing loss.
-  Provide a range of different contact methods for people who are Deaf or have hearing loss to use such as email, text/SMS messages and online messaging.
-  Ensure hearing loop systems are available on reception desks and in consultation areas, and check them regularly to ensure they are working.
-  Follow simple communication tips: speak clearly, face the person and avoid obstructing lip movements with hands or other objects (this is particularly helpful for people who lipread).
-  Ensure health professionals and frontline staff are trained to be deaf aware.
-  Extend appointment times, if necessary, to support good communication.
-  Ensure people who are Deaf or have hearing loss can give feedback or make a complaint about the quality of care in an accessible way.

## Access solutions

Action on Hearing Loss Scotland welcomes opportunities to work with GP surgeries, health centres and hospitals to help make services more accessible for people who are Deaf or have hearing loss.

If you have any questions about our research, please contact us:

✉ [campaigns.scotland@hearingloss.org.uk](mailto:campaigns.scotland@hearingloss.org.uk)

☎ **0141 341 5330**

📠 **07388 227407**

For advice about the range of services and training provided by Action on Hearing Loss, book an appointment with an Access Solutions Consultant:

✉ [access.solutions@hearingloss.org.uk](mailto:access.solutions@hearingloss.org.uk)

☎ **0333 240 5658**

📠 **0333 014 4530**

Information about our Access Solutions services and training can also be found on the following webpages:

### Deaf awareness training

[actiononhearingloss.org.uk/training](http://actiononhearingloss.org.uk/training)

### E-learning packages

[actiononhearingloss.org.uk/elearning](http://actiononhearingloss.org.uk/elearning)

### Hearing loop installation and maintenance

[actiononhearingloss.org.uk/installation](http://actiononhearingloss.org.uk/installation)

### Communication support

[actiononhearingloss.org.uk/communication](http://actiononhearingloss.org.uk/communication)



## 3 in 5 respondents

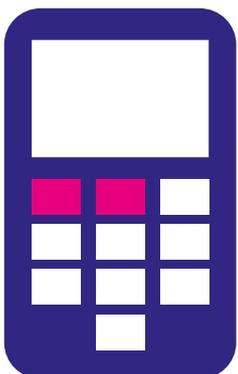
said they do not always get all the information needed at GP appointments

# Half

of those who don't always get all the info needed at health appointments said it's because the doctors/nurses didn't check if they were understood

## Only one in five

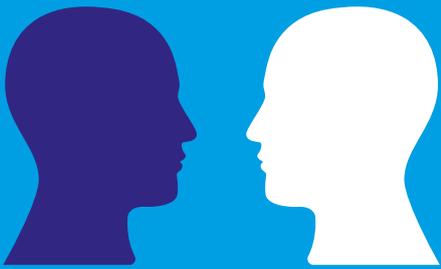
respondents said hearing loops are available at health service receptions



## 1 in 5 respondents

said they receive a SMS reminder about upcoming hospital appointments

# 3 in 5 weren't asked about their communication needs at their GP's, hospital or health centre



**2 in 5**

of those who don't always get all the info needed at health appointments said it's because doctors/nurses don't face them



**Only half of respondents**

said their hospital and GP surgery have their communication needs in their patient records



Half of those who don't always get all the info needed at health appointments said it's because the doctors/nurses **spoke too quickly**

**Action on Hearing Loss** Scotland is a charity that supports people who are Deaf or have hearing loss or tinnitus to live the life they choose. We campaign for equality, develop technology and treatments, and provide information and services to meet individual needs.

To find out more, visit **[actiononhearingloss.org.uk/Scotland](https://actiononhearingloss.org.uk/Scotland)**

Telephone **0141 341 5330**

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