



**Key Topic:**  
**Great Practice**  
August 2017



## Key Topic: Sensory Impairment

### About Healthwatch Blackburn with Darwen

Healthwatch gives people a powerful voice locally and nationally. At a local level, Healthwatch BwD helps local people get the best out of their local health and social care services. Whether it's improving them today, or helping to shape them for tomorrow, Healthwatch BwD is all about local voices being able to influence the delivery and design of local services.

Healthwatch was created by the Health and Social Care Act, 2012. We are part of a network of local Healthwatch which helps to ensure that the views and feedback from patients and carers are an integral part of the design and delivery of local service.

Every voice counts when it comes to shaping the future of health and social care, and when it comes to improving it for today. Everything that local Healthwatch does will bring the voice and influence of local people to the development and delivery of local services.

Find out more at:  
[www.healthwatchblackburnwithdarwen.co.uk](http://www.healthwatchblackburnwithdarwen.co.uk)

### Disclaimer

Please note that this report relates to findings from 54 individuals experiencing sensory impairment in

Blackburn with Darwen. Our report therefore is not a representative portrayal of the experience & views of all those experiencing sensory impairment in Blackburn with Darwen, only an account of what was represented at the time.

### Date of Project

Engagement activity took place  
**September 2016 - March 2017**

### Acknowledgements

Those experiencing sensory impairment who kindly shared their views & experiences with us, often sharing deeply personal stories for which we are grateful.

The following organisations for allowing us to engage with their clientele and supporting the project:

- Access Ability
- Blackburn with District Blind Society
- Royal Blackburn Teaching Hospital
- Your Support Your Choice

Healthwatch BwD Volunteers for supporting the project.

Karl Riding for providing illustrations throughout.



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## Executive Summary

Healthwatch Blackburn with Darwen worked in partnership to explore the views & experiences of those with sensory impairments in regard to local health & social care provision.

The report details the findings which briefly found:

- The majority of individuals were happy with services & support & no serious issues were identified
- Difficulty for some in accessing or contacting health & social care services
- A lack of consistency amongst services in the support they offer
- Appointment times not long enough for some individuals
- A lack of awareness of one's sensory impairment by some services
- A lack of mental health support after diagnosis

## Introduction

### Aim of project

To better understand the experiences of those with sensory impairments &

their access to local health & care provision, exploring how their needs are met & how in the future they could be improved.

## Statistics

### England

According to Action on Hearing Loss

- In 2015 there are approximately 250,000 people in the UK with both sight & hearing loss, of these 220,000 are aged 70 or over
- There are more than 11 million people in the UK with some form of hearing loss, or 1 in 6 of the population
- More than 900,000 people in the UK are severely or profoundly deaf
- More than 70% of 70 year olds & 40% of over 50 year olds have some kind of hearing loss
- On average it takes 10 years for people to address their hearing loss
- As of 2015 over 2 million people in the UK are living with sight loss, that's approximately one person in 30
- 1 in 5 people over 75 and above live with sight loss, 1 in



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- 2 people aged 90 and over are living with sight loss
- Nearly two thirds of people living with sight loss are women
- People from black & minority ethnic communities are at greater risk of some of the leading causes of sight loss
- Adults with learning disabilities are 10 times more likely to be blind or partially sighted than the general population

### Lancashire

- In 2014 Lancashire had an estimated 124,852 adults aged 18 and over living with a moderate or severe hearing impairment
- According to data published by the Royal National Institute for Blind in 2011 Lancashire had an estimated 37,090 people living with visual impairment. This is around 18% of the region's total number of visually impaired.
- By 2020 this figure is predicted to rise to 44,780, an increase of 21% due to an ageing population and there is a growing incidence in key

underlying causes of sight loss, such as obesity & diabetes. This means without action, the numbers of people with sight problems in Lancashire are likely to increase dramatically over the next 25 years.

## Research methods

### Questionnaire

A questionnaire was devised with the support of the project task group which included volunteers with lived experience & professionals.

The questionnaire was completed by staff & volunteers whilst speaking to individuals with a sensory impairment, while also being sent out by post & completed online.



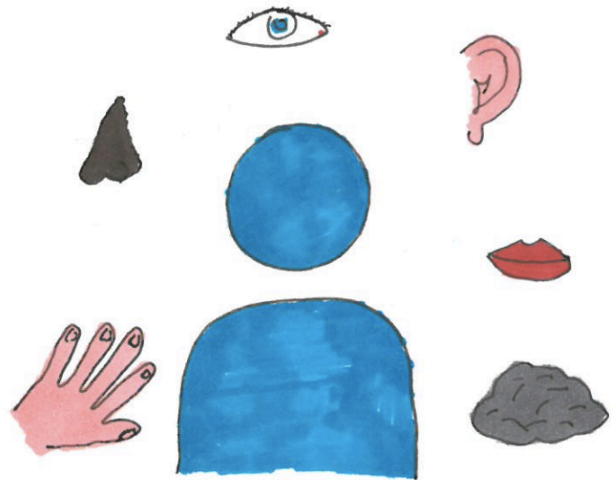
# Key Topic: Sensory Impairment

## Who we spoke to?

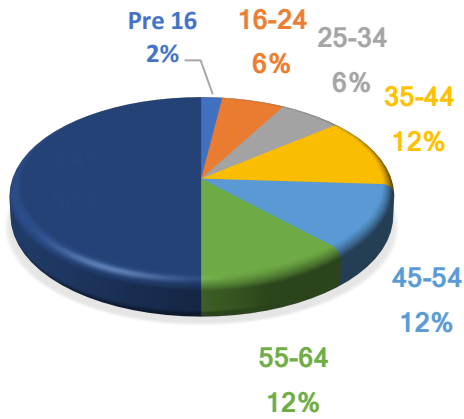
- We engaged with 54 individuals over the course of the project

### Age of participants:

- Pre-16 2%
- 16-24 6%
- 25-34 6%
- 35-44 12%
- 45-54 12%
- 55-64 12%
- 64+ 50%



### AGE OF PARTICIPANTS





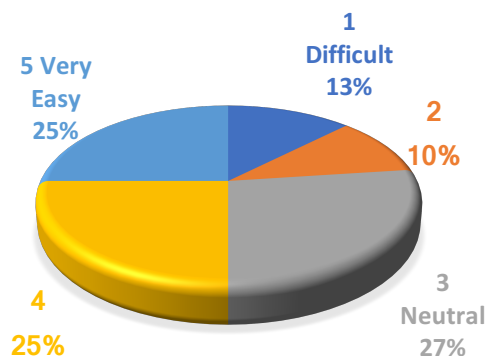
## Key Topic: Sensory Impairment

### Findings

#### Accessing/contacting health and social care services to make appointments

- 50% of participants found it easy or very easy accessing/contacting health & social care services to make appointments.
- 23% of participants found it difficult or very difficult accessing/contacting health & social care services to make appointments.

#### HOW DID YOU FIND ACCESSING/ CONTACTING HEALTH AND SOCIAL CARE SERVICES TO MAKE APPOINTMENTS?



*'Hospital good, GP is worse, no availability, wait till tomorrow 8.30am if miss time no appointments left'*

Male 35-44

*'My mum usually takes me. Get seen next day at Ewood Medical Centre'* Male 45-54

*'Difficult to make appointment but I have that many appointments I get text message to remind me which is helpful'*

Male 25-34

#### Recommendation 1

All health & social care services should have a clear & consistent method for residents with sensory impairments to access or contact them. Residents with a sensory impairment should be able to access or contact services with parity of those residents without an impairment.

#### Have you experienced any particular difficulties/challenges associated with your sensory impairment when using services?

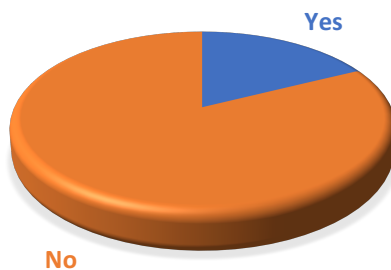
- 83% of participants had not experienced a difficulty or challenge associated with their sensory impairment when using services



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- 17% of participants had experienced a difficulty or challenge associated with their sensory impairment when using services

HAVE YOU EXPERIENCED ANY PARTICULAR DIFFICULTIES/ CHALLENGES ASSOCIATED WITH YOUR SENSORY IMPAIRMENT WHEN USING SERVICES?



*'No - Not really any problems. GP is fantastic with me, also use Royal Blackburn eye clinic. Rob Watt from Adult Services at Canal is brilliant. He's helped me. Got me in contact with Action for Blind People & Galloways'* Male 45-54

*'Yes - Dentist - Accrington Road, Blackburn. Each time I go they want me to complete a form about medical history and I am registered blind, I can't read braille either'*

Female 64+

### Recommendation 2

Health & Social care services should have provision in place to support those with a visual impairment with completing forms. Services should not assume those with a visual impairment can read braille as often this isn't the case.

Do you feel that service providers have the correct system or facilities in place to support your access needs?

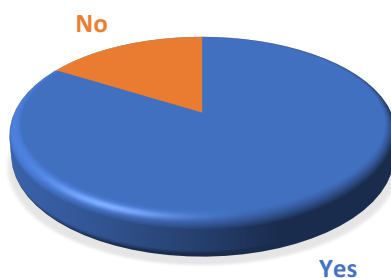
- 84% of participants felt service providers had the correct system or facilities in place to support their access needs
- 16% of participants felt services did not have the correct system or facilities in place to support their access needs





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DO YOU FEEL THAT SERVICE PROVIDERS HAVE THE CORRECT SYSTEM OR FACILITIES IN PLACE TO SUPPORT YOUR NEEDS?



*'Eye clinic, everything in order no problems'*

Male 64+

*'Eye clinic - better system than previously'*

Male 64+

*'Nothing in place for sight loss/impairment with many providers'*

Female 64+

### Recommendation 3

All Health & Social Care services should have systems & facilities in place to support those with a visual impairment.

### Recommendation 4

Individuals confidentiality & privacy should be respected at all times when any adjustments are made, as those with a sensory impairment often risk sharing details in a more public space.

If no what could be done to help you?

*'I feel sight loss is a difficult disability to deal with and live with and people in the roles are not understanding of this and we are not treat as individuals. We are discriminated against daily which isolates us as human beings'*

Female 64+

*'They could talk to me face to face instead of to the person supporting me'*

Female 64+

*'Nothing in place for sight loss/impairment with many providers'*

Female 64+

### Recommendation 5

Those with a sensory impairment should be treated equally & adjustments should be made to ensure they aren't discriminated against in any way.

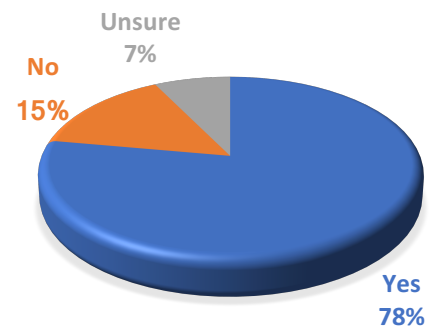


## Key Topic: Sensory Impairment

When you are meeting with Health Professionals are they aware of your sensory impairment/medical history and your needs understood?

- 78% of participants said health professionals were aware of their sensory impairment/medical history & understood their needs
- 15% of participants said health professionals weren't aware of their sensory impairment/medical history & understood their needs

WHEN YOU ARE MEETING WITH HEALTH PROFESSIONALS ARE THEY AWARE OF YOUR SENSORY IMPAIRMENT/MEDICAL HISTORY AND YOUR NEEDS UNDERSTOOD?



*'GP takes more notice and understands better than hospital'*  
Female 64+

*'They are aware but do not show any interest in your disability and nothing seems to get done'*  
Female 64+

*'Admitted to different hospital (Airedale) problems with no notes, medications - all should be online. Struggled for 24 hours should be able to find information anywhere'*  
Male 35-44



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*‘Most of the time although if in different place/doctor have to explain things more’*

Female 55-64

*‘I have to keep going through my medical history, health problems ever time along with all the medications I take. They don’t look at my file’*

Female 25-34

*‘When I see people they need me to explain although my specialist always knows and acknowledges and has read my file’*

Male 25-34

*‘I’m fine with my GP and chemist but dentist is not’*

Female 64+

### Recommendation 6

Patient records should be accessible to all health professionals, these should be read before seeing a patient & wherever possible patients should avoid having to go into detail about their medical history when it could be avoided.

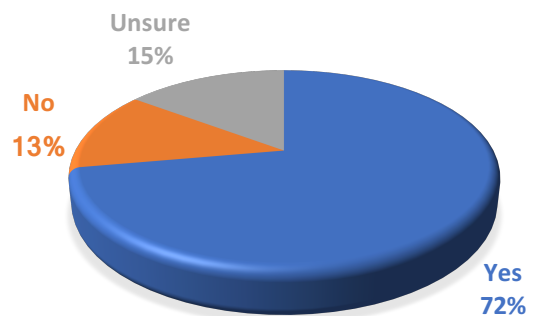
### Recommendation 7

Health professionals should show an interest in their patients & an empathetic approach should be encouraged.

**Do you consider the appointment times to be long enough for your sensory impairment needs?**

- 72% of participants felt appointment times were long enough for their sensory impairment needs
- 13% of participants felt appointment times weren’t long enough for their sensory impairment needs

**DO YOU CONSIDER THE APPOINTMENT TIMES TO BE LONG ENOUGH FOR YOUR SENSORY IMPAIRMENT NEEDS?**



*‘Doctor Jacob is really good, doesn’t rush me, takes the time to listen and understands problems’*

Male 45-54



## Key Topic: Sensory Impairment

*'Most of the time although sometimes it feels rushed'*

Male 25-34

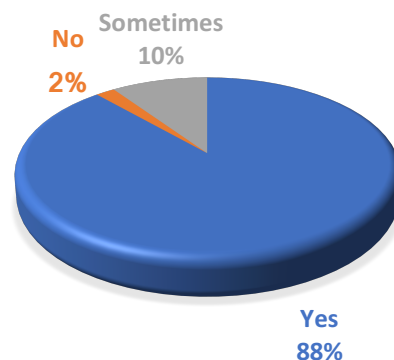
### Recommendation 8

Health Professionals should acknowledge those with sensory impairments may need longer appointment times & there should be flexibility to allow this to happen.

**Do you feel that you are treated equally, with dignity and respect?**

- 88% of individuals felt they were treated equally with dignity & respect
- 10% of individuals felt they were sometimes treated equally with dignity & respect
- 2% of individuals felt they weren't treated equally with dignity & respect

**DO YOU FEEL THAT YOU ARE TREATED EQUALLY, WITH DIGNITY AND RESPECT?**



*'The first 2 assessments no, but the third assessment was much better'*

Male 35-44

*'Yes, apart from the dentist. Some 'co-ordinator' was unhelpful. I was told to complete a form when I can't see'*

Female 64

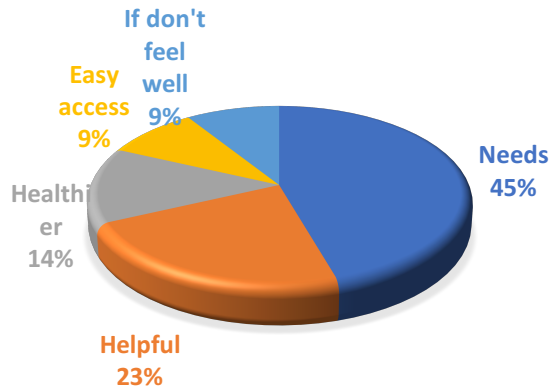
**What encourages you to access services?**

- Needs - 45%
- Helpful - 23%
- Easy access - 9%
- Healthier - 14%
- Only here if I don't feel well - 9%



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## WHAT ENCOURAGES YOU TO ACCESS SERVICES?



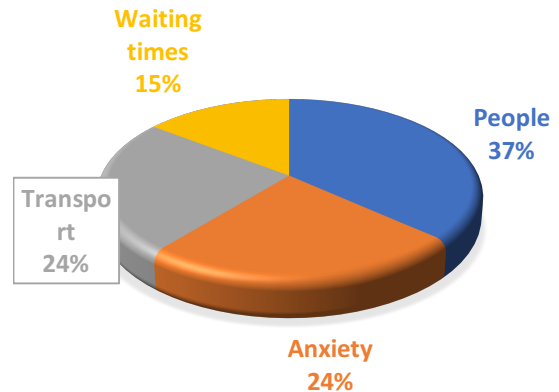
*'They visited us at home. I had my assessment at Burnley General hospital. I think they organised everything'*  
Female 64+

*'The hospital phoned me to remind me of my eye appointment. It would be good if other services could do the same. I have no mobile phone and I cannot read texts.'*  
Female 64+

## What puts you off accessing services?

- People - 37%
- Anxiety - 24%
- Transport - 24%
- Waiting times - 15%

## WHAT PUTS YOU OFF ACCESSING SERVICES?



*'The waiting times, if you're late they don't see you, if they are late they don't seem to care'*  
Male 25-34

*'Blind Society/Macular - change of premises from Mill Hill to Haslingden Road. I don't know how to get there. There is no one to take me'*  
Female 64+

*'Waiting times, parking at RBH, set of an hour earlier to park had to drive around to get blue badge spot'* Male 55-64



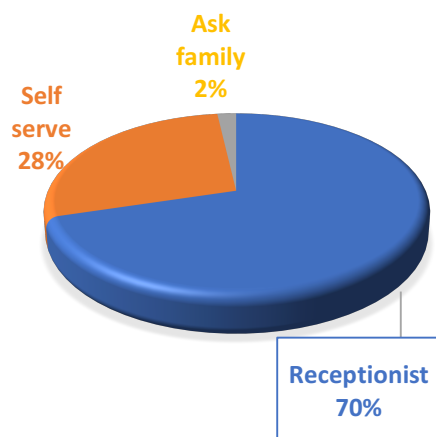
## Key Topic: Sensory Impairment

### How do you usually check in for your appointments?

The majority of participants checked in through receptionists, although this wasn't always an easy or pleasant experience. Several those who used self-service to check in had difficulties, which in some cases resulted in an extended wait time.

- Receptionist - 70%
- Self-Serve - 28%
- Ask family - 2%

#### HOW DO YOU USUALLY CHECK IN FOR YOUR APPOINTMENT?



*‘With receptionist - when I go to main reception information desk at RBH I ask for help to get to eye clinic, they do help but sometimes I know they don’t want to.’*

Male 45-54

*With Receptionist. Booked in for 2 appointments using self-service but second one didn’t register so waited 2 hours, told to check in with Receptionist next time”*

Male 64+

### Recommendation 9

All health care staff, including receptionists should receive training in sensory impairments to reduce stigma & discrimination. There should also be flexibility to allow for more time to support those with a sensory impairment.

### How are you usually informed when it’s your appointments?

Participants were informed of their appointments in a variety of ways including on a TV screen, their name being called out over a tannoy or by the receptionist or health professional. Those who knew their GP or receptionist well seemed to encounter few problems while those accessing more one of appointments sometimes experienced difficulties.

*‘Difficulty at GPs with screen that runs across - have to sit close up.’*



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Male 64+

*'Name called out at hospital sometimes don't hear properly. At GPs the loud beep on the screen really affects/hurts my ears'*

Female 25-34

*'Name called out which sometimes I don't hear.'* Male 25-34

*'At GP Christine on Reception comes over and tells me it's my turn and helps me to the door, the GP knows me and comes to the door for me'*

Male 45-54

### Recommendation 10

Health services should have a variety of methods in operation to inform patients of their appointment, taking into consideration both TV screens & tannoys/speakers aren't accessible to all.

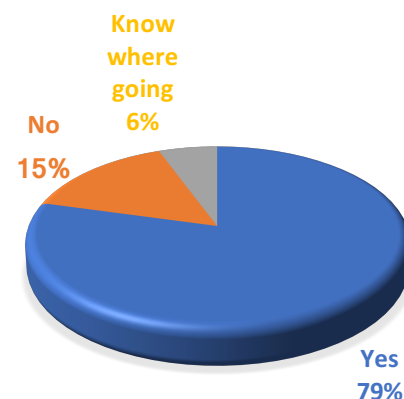
### Recommendation 11

Health services should have a system in place which flags up patients with a sensory impairment so they are aware they may need extra support whilst accessing appointments, including being informed of their appointment & help with directions.

### Are you given any help with directions to the room/GP etc.?

- 79% of participants were given help with directions to the room/GP
- 15% of participants were not given help with directions to the room/GP

#### ARE YOU GIVEN ANY HELP WITH DIRECTIONS TO THE ROOM/GP ETC?



*'The GP comes to the door for me. AT RBH eye clinic the nurses just should name and walk off which I feel is a really bad thing, they know people have sight problems and struggle to find the room. Jenny the eye clinic liaison officer tried to get the nurses to wait when they called name out - they only lasted a week or two, now they just walk off again.'*



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Male 45-54

*‘They walk with me when names called out’*

Female 64+

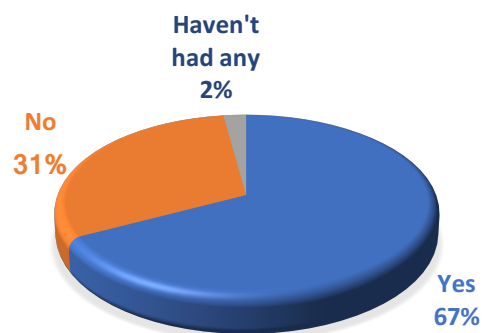
### Recommendation 12

All staff at RBTH should receive sensory impairment training & nurses should ensure patients understand when & where their appointment is before leaving them. Extra support should be available if the patient requires this.

Do you feel that there was enough social and mental health support when you were diagnosed with a sensory impairment?

- 67% of participants felt there was enough social & mental health support when they were diagnosed with a sensory impairment
- 31% of participants felt there was not enough social & mental health support when they were diagnosed with a sensory impairment

DO YOU FEEL THAT THERE WAS ENOUGH SOCIAL AND MENTAL HEALTH SUPPORT WHEN YOU WERE DIAGNOSED WITH A SENSORY IMPAIRMENT?



*‘I never took tablets before but after diagnosed with sight loss work got rid of me after 23 years. I do get frustrated at not being able to do what I used to and sometimes think what’s the point. I’m not suicidal or anything but all my emotions just build up inside me. Now take anti-depressants.’*

Male 45-54

*‘No - more help now from eye clinic and group meeting’*

Female 64+





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*I did contact CBT but still waiting to hear over year ago.'*

Female 25-34

*'I feel as though I am in a black hole, very alone'*

Female 64+

*'Originally under Bolton but since coming here seems to be very good'*

Male 45-54

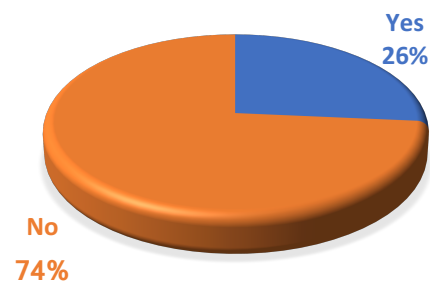
### Recommendation 13

There should be more support for individual's mental health when they are diagnosed with a sensory impairment & professionals should take into consideration how a diagnosis could impact an individual's wider wellbeing. Signposting to services & support should be actively encouraged.

### Do you have any additional carers or aids in your home as a result of your sensory impairment?

- 74% of participants had additional carers or aids in their home as a result of their sensory impairment
- 26% of participants did not have any additional carers or aids in their home as a result of their sensory impairment

### DO YOU HAVE ANY ADDITIONAL CARERS OR AIDS IN YOUR HOME AS A RESULT OF YOUR SENSORY IMPAIRMENT?



The most popular was grip rails followed by brighter lights and magnifiers. Other aids included bath or shower seats, washing machine adjustments, adjustments on cups, liquid level indicators and talking clocks.

*'Rob Watt helped me out with all my aids and suggested some things I'd never even thought of like brighter lights. Have a magnet on cup when making a brew it beeps when really full. Things on washing machine which tell me what temp I'm turning it to. Have white stick and grip rails fitted which role sorted after I fell coming out of shower'* Male 45-54



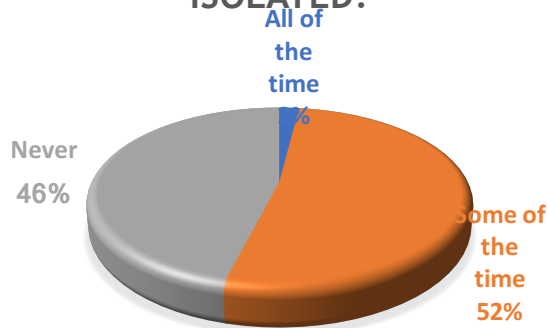
## Key Topic: Sensory Impairment

### Does your sensory impairment ever make you feel isolated?

- 2% of participants felt isolated all of the time
- 52% of participants felt isolated some of the time

46% of participants never felt isolated

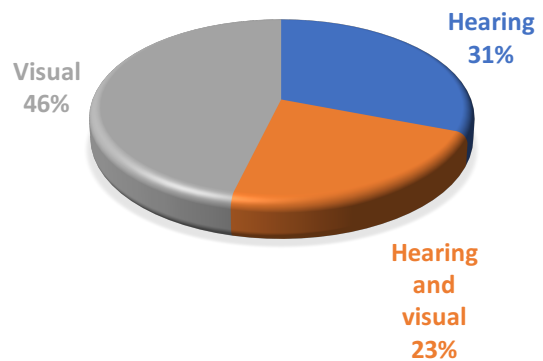
### DOES YOUR SENSORY IMPAIRMENT EVERY MAKE YOU FEEL ISOLATED?



### Do you have hearing or visual impairment?

- Hearing - 31%
- Hearing and visual - 23%
- Visual - 46%

### DO YOU HAVE HEARING OR VISUAL IMPAIRMENT?



### To what extent does this affect your day to day life?

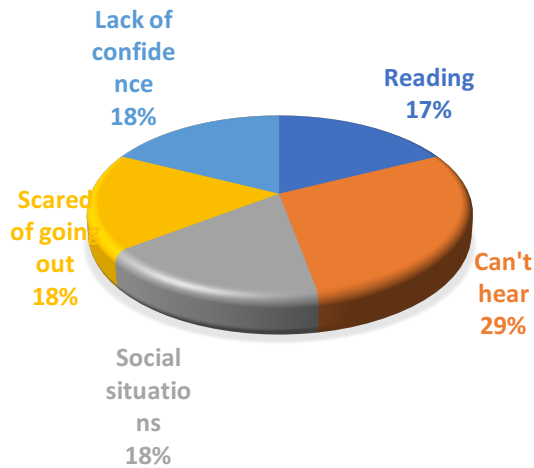
- Can't hear - 29%
- Social situations - 18%
- Scared of going out - 18%
- Lack of confidence - 18%
- Reading - 17%

*'During the week when my wife is at work and so are my friends. I was put in touch with Blind Society and went to coffee morning but it caters for me elderly age group. Galloways have sessions Wed pm at Blackburn Rifle Club for sight loss which is really good, lasers tell you'* Male 45-64



## Key Topic: Sensory Impairment

### TO WHAT EXTENT DOES THIS AFFECT YOUR DAY TO DAY LIFE?



*‘Can’t do things I used to, get frustrated with that. I want to set up a social group for younger sight loss people but am struggling to get others interested or promote it. Not enough in BwD for younger people with sight loss who don’t want to go to coffee mornings. May be want to set up a group where we can go walking, pub lunch, bowling’*

Male 45-54

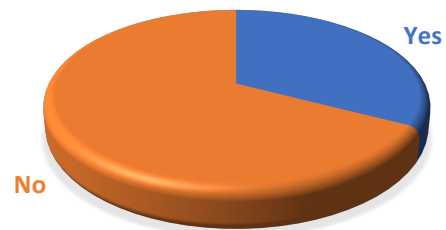
*‘I am scared of going out, lack of confidence become withdrawn, isolated.’*

Female 64+

### Do you live alone?

- 33% of participants lived alone
- 67% of participants did not live alone

### DO YOU LIVE ALONE?



### Conclusion

- 23% of participants found it difficult or very difficult accessing/contacting health & social care services to make appointments, some of these difficulties are likely to be experienced by the wider population but the impact was heightened for those with a sensory impairment.
- 16% of participants felt services did not have the correct system or faculties in place to support their access needs, this appeared to differ somewhat



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dependent on services accessed & consistency should be explored.

- 15% of participants said health professionals weren't aware of their sensory impairment, which therefore meant their medical needs weren't always best met, and a full understanding of the patient was void. Individuals found it frustrating when they had to go back through their medical history due to lack of preparation or interest.
- A number of participants felt appointment times weren't long enough & their sensory impairment meant they needed longer which wasn't always possible.
- Access & the service received by dentists appeared to be the greatest challenge, perhaps as a service that doesn't directly deal with sensory impairments. This was frustrating for individuals & added to their anxieties. Residents spoke of how they were sometimes unhelpful.
- Several participants felt they weren't offered enough

support with directions when accessing services.

- 31% of participants felt there was not enough social & mental health support offered when they were diagnosed with a sensory impairment. Services should seek to work holistically & understand the wider impacts in an individuals mental & physical health.

## Recommendations

### Recommendation 1

All health & social care services should have a clear & consistent method for residents with sensory impairments to access or contact them. Residents with a sensory impairment should be able to access or contact services with parity of those residents without an impairment.

### Recommendation 2

Health & Social care services should have provision in place to support those with a visual impairment with completing forms. Services should not assume those with a visual impairment can read braille as often this isn't the case.



## Key Topic: Sensory Impairment

### Recommendation 3

All Health & Social Care services should have systems & facilities in place to support those with a visual impairment.

### Recommendation 4

Individuals confidentiality & privacy should be respected at all times when any adjustments are made, as those with a sensory impairment often risk sharing details in a more public space.

### Recommendation 5

Those with a sensory impairment should be treated equally & adjustments should be made to ensure they aren't discriminated against in any way.

### Recommendation 6

Patient records should be accessible to all health professionals, these should be read before seeing a patient & wherever possible patients should avoid having to go into detail about their medical history when it could be avoided.

### Recommendation 7

Health professionals should show an interest in their patients & an empathetic approach should be encouraged.

### Recommendation 8

Health Professionals should acknowledge those with sensory impairments may need longer appointment times & there should be flexibility to allow this to happen.

### Recommendation 9

All health care staff, including receptionists should receive training in sensory impairments to reduce stigma & discrimination. There should also be flexibility to allow for more time to support those with a sensory impairment.

### Recommendation 10

Health services should have a variety of methods in operation to inform patients of their appointment, taking into consideration both TV screens & tannoys/speakers aren't accessible to all.

### Recommendation 11

Health services should have a system in place which flags up patients with a sensory impairment so they are aware they may need extra support whilst accessing appointments, including being informed of their appointment & help with directions.

**Recommendation 12**

All staff at RBTH should receive sensory impairment training & nurses should ensure patients understand when & where their appointment is before leaving them. Extra support should be available if the patient requires this.



## Key Topic: Sensory Impairment

### Service provider responses

#### BwD CCG Feedback on Recommendations

Recommendation	Narrative
<b>Recommendation 1</b> All health & social care services should have a clear & consistent method for residents with sensory impairments to access or contact them. Residents with a sensory impairment should be able to access or contact services with parity of those residents without an impairment.	All service specifications detail expectations of providers relating to access and equity of service provision.
<b>Recommendation 2</b> Health & Social care services should have provision in place to support those with a visual impairment with completing forms. Services should not assume those with a visual impairment can read braille as often this isn't the case.	Service providers are required to meet the needs of service users which includes interpretation.
<b>Recommendation 3</b> All Health & Social Care services should have systems & facilities in place to support those with a visual impairment.	All service specification detail expectations relating to facilities. Service providers are required to provide facilities which are DDA compliant and suitable to meet the needs of all service users and provide an equitable service.
<b>Recommendation 4</b> Individuals confidentiality & privacy should be respected at all times when any adjustments are made, as those with a sensory	Service providers are required to maintain and respect confidentiality at all times, individual service user requirements will be addressed on an individual basis.



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<p>impairment often risk sharing details in a more public space.</p>	
<p><b>Recommendation 5</b></p> <p>Those with a sensory impairment should be treated equally &amp; adjustments should be made to ensure they aren't discriminated against in any way.</p>	<p>Equality impact assessments are completed for each service and include consideration of disability</p>
<p><b>Recommendation 6</b></p> <p>Patient records should be accessible to all health professionals, these should be read before seeing a patient &amp; wherever possible patients should avoid having to go into detail about their medical history when it could be avoided.</p>	<p>Going into hospital or attending a hospital or GP clinic can be an anxious time for anyone but is even harder for those with extra needs or impairments. A 'hospital passport' can help communication by providing a full, detailed overview of people's needs. The hospital passport is not a care-plan but is designed to offer additional information with regards to the person and is a very useful document that can support the person's clinical records. To support the hospital passport we have also provided a small discreet 'About Me' card that assists communication on a day to day basis. The 'About Me cards' have been developed to help people go about their everyday life without feeling frustrated or embarrassed due to the lack of understanding and awareness that people they come into contact with have of their needs. The About Me card can be used discreetly in all public places and assist better communication to enable people to feel more confident and independent.</p> <p>The video below is available to assist with staff training, It is being used across Lancs with Acute staff, special schools, police etc. to ensure they are aware of how important it is to use the passport.</p>





**Key Topic: Sensory Impairment**

	<p><a href="https://vimeo.com/191817867">https://vimeo.com/191817867</a></p>
<p><b>Recommendation 7</b></p> <p>Health professionals should show an interest in their patients &amp; an empathetic approach should be encouraged.</p>	<p>Service user satisfaction surveys are required to be undertaken by providers and these together with any complaints are reviewed at provider/commissioner contract review/monitoring meetings. This process would highlight any shortcomings in the attitude of health professionals and would inform future requirements for provider improvement plans.</p>
<p><b>Recommendation 8</b></p> <p>Health Professionals should acknowledge those with sensory impairments may need longer appointment times &amp; there should be flexibility to allow this to happen. Refusing them access is discriminating &amp; denying them their first steps to recovery.</p>	<p>Service providers are commissioned to provide services and appointments that meet the needs of patients</p>
<p><b>Recommendation 9</b></p> <p>All health care staff, including receptionists should receive training in sensory impairments to reduce stigma &amp; discrimination. There should also be flexibility to allow for more time to support those with a sensory impairment.</p>	<p>Service specifications include service training expectations. Mandatory training includes equality and diversity</p>
<p><b>Recommendation 10</b></p> <p>Health services should have a variety of methods in operation to inform patients of their appointment, taking into consideration both TV screens &amp;</p>	<p>Service providers are required to meet the needs of all patients which will include a variety of methods to inform patients of their appointment</p>



## Key Topic: Sensory Impairment

tannoys/speakers aren't accessible to all.	
<b>Recommendation 11</b> Health services should have a system in place which flags up patients with a sensory impairment so they are aware they may need extra support whilst accessing appointments, including being informed of their appointment & help with directions.	Service providers have electronic disease registers and patient administration systems in place with the capability to identify those with specific requirements.
<b>Recommendation 12</b> All staff at RBTH should receive sensory impairment training & nurses should ensure patients understand when & where their appointment is before leaving them. Extra support should be available if the patient requires this.	Service providers develop workforce training and service training development plans to meet the needs of their customer group which are reviewed annually, individual staff's training requirements are reviewed through individual annual appraisals and personal development plans agreed thereafter. Discharge information including appointment information is provided on an individual basis to meet individual needs.

### East Lancashire Hospitals NHS Trust

Results of the report relating to East Lancashire Hospitals NHS Trust were given to Christine Pearson, Director of Nursing, who says:

“We take all feedback very seriously and constantly strive to ensure all our patients and relatives have a good experience when using the Trust's services.”

In response to the report, the Trust would like to make the following comments:

- All of the recommendations are incorporated in the NHS Accessible Information Standards which the Trust is implementing.



## Key Topic: Sensory Impairment

- The Trust works closely with the Royal National Institute of the Blind (R.N.I.B), Sign Communication North West, DisabledGO and the East Lancashire Patient Voices Group. These partnerships help ensure our facilities, services and communication channels meet the needs of patients, visitors and staff with sensory impairments.

The Trust supports people with sensory impairments in a number of ways, including:

- Clear signage and wayfinding maps at all sites
- Training and support for reception staff and volunteers on how to assist patients with sensory impairments.
- Outpatient staff have been made aware of the NHS Accessible Information Standards.
- Self-check-in machines which offer high visibility for people with low vision, and their use can be supported by a member of staff assisting.
- Provision of loop systems at key reception points.
- To support confidentiality, patients can confirm their details in writing with the reception team.
- Appointment times are pre-determined for each clinic according to the service, but the time taken to assess individual patients does vary. So if a patient with a sensory impairment requires slightly longer this will be accommodated.
- The Trust is in the early stages of trialling patient portal technology which will allow letters to be delivered via text in different formats including audio.
- Accessible toilets throughout our hospital buildings
- Lifts with automatic voice announcements at each floor, on some sites

The Trust recently reviewed its patient administration system to ensure the needs of patients with sensory impairments were recorded, information that all outpatient reception staff have been made aware of. In addition, the alert sheet within a patient's medical records contains a section to identify patient's needs, which includes sensory impairments.

At both the Royal Blackburn and Burnley General teaching hospitals, Eye Clinics and Blue Badge parking are located close to the main entrance, precisely to assist patients with visual impairments.



## **Lancashire Care NHS Foundation Trust**

As part of our commitment to keeping people at the heart of everything we do, as well our obligations under the Accessible Information Standard (AIS), Lancashire Care NHS Foundation Trust (LCFT) has created both a training package and an Accessible Communication toolkit to provide our staff with information, guidance and templates to support effective communication with patients, service users, colleagues and other stakeholders.

Building relationships with local sensory loss charities has helped LCFT to get a true understanding of people's needs and concerns so that we can meet them and remove the everyday barriers people face when accessing healthcare and we welcome any opportunities to engage with groups which can support us in this aim.



## Contact

If you would like more information about Healthwatch Blackburn with Darwen, a hard copy of this report or to find out how you can get involved in future projects please get in touch.

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