



BARNSELY
Metropolitan Borough Council



LEEDS
involving
people

healthwatch
Barnsley



BSL Assessment and Care Management Engagement Event Report on findings

DRAFT



April 2016



About Healthwatch Barnsley

Healthwatch Barnsley (HWB) is contracted to Voluntary Action Barnsley (VAB). It is a community led, community driven organisation with a Strategic Advisory Board, responsible for determining the strategic direction of the organisation. HWB is also assisted by Healthwatch Champions who gather information, and prioritise areas of work, which ensures engagement with everyone living in the local community. This enables HWB to be representative of as many residents and health and social care service users as possible. HWB is part of a national network of Healthwatch organisations that involve people of all ages and from all sections of the community in local health and social care services. The views that are collected and then reported to the people responsible for local services which ensure that local people are involved in decisions about services and that these services are monitored. HWB also has a right to visit services, through a process known as Enter and View.

HWB regularly provides information to people about local health and social care services and how they can access them through their signposting service.

In some areas local Healthwatch organisations provide independent complaints advocacy for people making a complaint about NHS services. For people living in Barnsley service is provided by DIAL. DIAL's services locally are not limited to health services and also include social care services. You can find the contact details for DIAL at the end of this report.

About this piece of work

Healthwatch Barnsley were approached by the DEAForum, Leeds Involving People and Barnsley Metropolitan Borough Council in 2015 to work in partnership with them to plan their annual event to look at the barriers the Deaf community face when accessing Assessment and Care Management Services delivered by Barnsley Council. This event was planned for Saturday 5 March 2016 and was held at the Town Hall in Barnsley.

In preparation for the event a number of planning meetings were arranged and attendees involved in the planning included:

- Members of the DEAForum and Deaf Social Club
- Equality Team, Barnsley Council
- Leeds Involving People representatives
- Healthwatch Manager & Communications Worker
- Senior Rehabilitation Officer, South West Yorkshire Partnership Foundation Trust, Equipment, Adaptations & Sensory Impairment Services.

It was during these meetings that the agenda and days proceedings were planned and the method for engaging participants was decided.

The DEAForum wanted information stalls to be available for the Deaf community to engage with during admission to the event and at breaks. This was arranged by South West Yorkshire Partnership Foundation Trust, Equipment, and Adaptations & Sensory Impairment Services.

The Forum also wanted to work with a Deaf actor to raise awareness within social care teams about accessing social care services as a Deaf person. With this in mind, Leeds Involving People and the DEAForum with the support of the Equalities Team at Barnsley Council planned an interactive theatre session covering the following four themes:

- Assessment and care management
- A Deaf person living in Residential Care
- A Deaf person with depression and low self-confidence, living at home on their own
- A disabled Deaf person living in supported housing.

The aim of the interactive theatre sessions was to stimulate discussions with the audience about the different scenarios.

Healthwatch Barnsley, in our role of independent consumer champion, gathered and documented the views of the community expressed at the event. As well as the discussions that took place with service providers and commissioners. We will then co-ordinate the actions and communications, to reach a point of resolution after the event.

Gathering feedback at the event

52 people attended the event including 34 members of the local Deaf community. Councillor Platts, an elected Councilor and Cabinet Member of Barnsley Council attended to officially open the event. Councilor Platts was chosen to open the event because of her role as a spokesperson for the People directorate within Barnsley Council. She is also involved in the local Health and Wellbeing Board and has working with us and the Deaf community previously, looking at barriers to accessing health care services and Deaf health inequalities.

Councilor Platts led attendees into the Interactive Theatre Sessions which were compared by Khalid Ashraf, the Deaf Involvement and Development Officer from Leeds Involving People. Khalid's role is to support the DEAForum in Barnsley.

The main scenarios in the interactive theatre sessions were acted out by Simeon Hart from the University of Central Lancashire with the support of staff from Healthwatch Barnsley and South West Yorkshire Partnership Foundation Trust.

On the day, volunteers from the Deaf community took part in role play within the sessions to share their knowledge in relation to the scenarios that had been acted out.

The interactive theatre discussions stimulated discussions and debates which have helped us to formulate the key findings and recommendations outlined below. For details on the interactive theatre performances and the discussions that took place as a result, please see appendix 1.

Key Findings and recommendations:

Key findings	Recommendations	Responding departments
<p>1. The Deaf community stated that they do not have the information they need to enable them to initiate contact with the assessment and care management services.</p>	<p>Barnsley Council and associated services need to look at how they are communicating what they offer to the Deaf community and seek support from the DEAForum and Deaf Social Club to help them to improve communications.</p>	<p>Assessment and Care Management Teams within Barnsley Council, Barnsley Council Communications Team, all Commissioned Services.</p>
<p>2. Assessments are carried out with a BSL interpreter present and the Deaf community would prefer access to a Deaf social worker or a social worker who is proficient in BSL and has an understanding of Deaf Culture.</p>	<p>At the event Barnsley Council outlined that this will not happen. the Deaf community need to understand how and why Barnsley Council have arrived at the decision not to provide a social worker who is proficient in BSL.</p> <p>Can Barnsley Council look at working in partnership with other local authorities within South Yorkshire to understand the services that they have in place for the Deaf community, and explore the possibility of joint funding a Deaf Social Worker?</p>	<p>Barnsley Council Adult Joint Commissioning</p> <p>BMBC and Adult Joint Commissioning.</p>
<p>3. Assessments and follow up communications often left the Deaf community feeling confused.</p>	<p>Barnsley Council needs to undertake an audit of communications with the Deaf community, to ensure that they are adhering to the new Accessible Information Standards.</p>	<p>Barnsley Council and all commissioned services providing a support to the Deaf community.</p>
<p>4. The Deaf community feel that the Deaf advice service ran by the Citizens Advice Bureau (CAB) on Wednesday mornings is not meeting</p>	<p>At the Event Barnsley Council outlined that funding was the main reason for the sessions at CAB being limited to a Wednesday morning. Can the</p>	<p>Barnsley Citizens Advice Bureau</p>

<p>their needs.</p>	<p>CAB undertake a usage audit of this service and an evaluation with the individuals accessing the Deaf Advice Service?</p> <p>The findings might highlight gaps in the service for the Deaf Community and could be used to attract additional funding.</p>	
<p>5. The Deaf community often feels isolated and this isolation is increased when in a residential care setting or if the person is housebound.</p> <p>Isolation inevitably impacts upon the emotional health and wellbeing of an individual, increases potential safeguarding concerns and will also impact on their proficiency in BSL due to long periods of inactivity.</p>	<p>Barnsley Council needs to undertake an audit of Deaf people who are currently in receipt of Assessment and Care Management Services and who are either residing in a Residential Care home or are receiving support from a domiciliary care agency.</p> <p>Barnsley Council should work with the DEAFForum and Deaf Club to look at how Deaf people living in Barnsley can support with the creation of a volunteering or befriending service to ensure that people do not become isolated.</p>	<p>Assessment and Care Management Team, BMBC Adult Joint Commissioning.</p> <p>Barnsley Council Equalities Team, Leeds Involving People and the DEAFForum.</p>
<p>6. The Deaf community needs support in understanding how they can better safeguard themselves and where to go should they need support.</p>	<p>Barnsley Council needs to look at how they currently communicate information with the Deaf Community about how to safeguard themselves and members of their community.</p> <p>Barnsley Council should look at how they can set up training and support which will enable the Deaf community to pass this information on through their networks.</p>	<p>Barnsley Adult Safeguarding Board</p> <p>Barnsley Adult Safeguarding Board in Partnership with Barnsley Council's Equalities Team, Leeds Involving People and the DEAFForum.</p>

	<p>There needs to be information that is accessible about how the Deaf Community can safeguard themselves and where to go for support either through a websites, leaflets etc. This information needs to be Barnsley centric and in a format which can be easily understood by the Deaf community e.g. through a signed video.</p>	<p>Barnsley Adult Safeguarding Board.</p>
<p>7. Currently when services which provide information, advice and support to the Deaf community are decommissioned, the Deaf community does not receive information in an accessible format and therefore cannot voice their concerns.</p>	<p>Deaf people living in Barnsley need to be kept informed about the changes to the services they can access in a manner that is:</p> <ol style="list-style-type: none"> 1. Accessible 2. Provides the opportunity for the Deaf community to comment and respond. <p>BMBC must not rely on communicating changes to the services they provide or the services they commission to the DEAFForum which represents only a small section of this community.</p>	<p>Barnsley Council Adult Joint Commissioning Unit, Barnsley Council Equalities Team</p>
<p>8. The Deaf community would welcome the opportunity to volunteer to support other Deaf service users given the right training and support.</p>	<p>Barnsley Council need to work with the DEAFForum and Deaf social club to look at what positive action they can jointly take which will benefit the community, without the local authority placing sole responsibility for action with the Deaf community.</p>	<p>Barnsley Council, Leeds Involving People and the DEAFForum.</p>
<p>9. More awareness raising needs to be undertaken amongst social care staff who may come into contact with the Deaf community so that they have a basic understanding and</p>	<p>Barnsley Council should ensure that all Assessment and Care Management Staff receive Deaf awareness training.</p> <p>Barnsley Council can request</p>	<p>Barnsley Council Training Departments</p>

awareness of the needs of the Deaf community and their culture.	that Deaf Awareness Training is delivered to all staff when supporting individuals who are Deaf through their monitoring of residential and domiciliary care services.	Barnsley Council Adult Joint Commissioning Team
10. Technology is improving which can impact upon the Deaf Communities experience of Assessment and Care Management Services.	<p>Barnsley Council needs to look at the developing technologies and how they can be used to improve Deaf people's experiences of, and access to, services.</p> <p>When possible technologies are identified they need to be tested with the Deaf community to ensure that they are accessible.</p> <p>Barnsley Council also needs to look at training members of the Deaf Community to use these systems or look at how they can engage with the Device Doctors through Bernslai homes or work with ward alliances, as IT education has been set as a priority in some of these areas.</p>	Barnsley Council Communications Team

Outcomes to date:

Directly after the event Healthwatch Barnsley attended the Deaf Social Club to report back on the findings of the event and the next steps.

Members of the Deaf Club many of whom were present at the event felt that this report was an accurate reflection of their concerns and asked us to report back to them in September 2016.

After feeding back to the Deaf Social Club Healthwatch Barnsley met with the following providers:

- South West Yorkshire Partnership Foundation Trust, Senior Rehabilitation Officer, Equipment, Adaptations & Sensory Impairment Services
- Bernslai Homes Customer Services Manager

- Barnsley Metropolitan Borough Councils Head of Service, Mental Health, Disabilities and Professional Support, Vulnerable Adults and Older People
- And Barnsley Metropolitan Borough Councils Equality Team

The aim of these meetings was to better understand their service offer and identify where gaps may lie. This has enabled our team to gain a better understanding of what work is being undertaken and where more work needs to be done.

In light of Key Finding and Recommendation 6 above Healthwatch Barnsley also enquired with SignHealth to see if they had produced a signed video on how the Deaf community can work to safeguard themselves and the things they need to consider in order stay safe.

SignHealth, the national disability charity of the year, authors of the world's first large study of the health of Deaf people and home of the world's biggest collection of health videos in sign language responded to say:

“Thank you for your email. It's really great to see your considerations about deaf information and access.

We have yet to create this type of BSL video however having discussed your enquiry with the team, it is something we are quite interested in. We will discuss it in depth at our next Communications meeting, Monday 18th, and then get back to you”

This information on recommendation 6 seen as a priority was also fed into the Local Adults safeguarding board through the Pathways and partnerships meeting and they have highlighted the need for them to better engage with the Seldom Heard including the deaf community for 2016/17.

Healthwatch Barnsley will keep all stakeholders updated on how this area progresses and are now awaiting feedback from service providers on the Key Findings and Recommendations outlined within this report. Feedback expected August 30th 2016.

Next Steps

Once Healthwatch Barnsley has received the response we will then be working to make this response accessible and feeding back to the Deaf Community In March 2017.

DRAFT V2

Appendix 1

Interactive Theatre Session 1 - Assessment and care management

Scenario	Feedback and Discussions
<p>The first scenario was about an older Deaf person who lives alone, has no physical disabilities, but has severe communication needs and can only communicate using BSL. They are not tech 'savvy', don't possess a computer/tablet/smartphone and they don't have family living in the area.</p> <p>During the scenario the Deaf person requests an assessment through Assessment and Care Management and is assessed by the relevant team (with a BSL interpreter present). However, the assessor struggles to fully identify and address the person's needs; (this seems to be mainly due to the assessor's lack of experience when asked to provide an assessment for someone without physical disabilities).</p> <p>E.g. their more usual service user will present physical issues, such as problems getting in and out of bed/ food preparation etc. and the assessor may not be aware of the problems associated with severe communication needs and the solutions that are available.</p>	<p>After the scenario was acted out the audience was invited to comment and discuss what they had just seen, what came out of these discussions are as follows:</p> <p>The audience felt that it was important that the individual carrying out the assessment had background information on the client and also had an understanding of the deaf culture. It was apparent in the scenario that the assessor had not worked with the deaf and when the interpreter was translating conversations the assessor was looking at the translator and not the client.</p> <p>They also had conversations about the client that were not being directly translated.</p> <p>The audience outlined that it was also important for the interpreter to relay the conversations verbatim and outlined that this does not always happen which meant the deaf person or the social worker were only receiving half of the information intended.</p> <p>There was also some confusion as to why the assessor kept asking the same questions and some discussion about how appropriate the questions were for the client.</p> <p>The Deaf Community outlined that their preference would be for assessments to be carried out by a social worker with experience and understanding of the deaf community and their needs. They advised that when assessments were done through a third person some of the important communications</p>

got lost in the translation, due to either questions not being fully understood or their responses not being translated in a way that they would understand.

Another attendee went on to explain; that often Deaf people do not feel confident in expressing themselves, their views and how they feel. If they are talking to another deaf person, they can be more open with them. A hearing person with established BSL skills is all well and good, but it would need to be at the very least someone who understands our culture.

The assessor could be for example someone with deaf parents, so they understand the culture of the deaf community. But this in itself was an issue as it narrowed the pool from which services can recruit.

Previously in Barnsley the deaf community has had access to a Deaf Social Worker, a post which is no longer fulfilled. The deaf community recalled how this person understood the culture as he was also deaf and detailed how this person had supported them.

Assessors also need to understand that English is not our first language.

The audience also challenged that even with some awareness training for hearing assessors about the deaf community, this would still not be sufficient to deal with the in depth support that the deaf community needed through assessment and care management services.

Interactive Theatre Session 2 - A Deaf person living in Residential Care

Scenario	Feedback and Discussions
<p>They are lonely and can't interact with staff or residents. They see other people laughing and feel excluded or ridiculed. A member of staff used to be able to sign, but they left a while ago. Key worker tries her best, writing notes or speaking slowly and loudly etc. but it's very hard to explain things this way.</p>	<p>I don't agree that old people should be in a home. It makes me angry. He was forgetting his BSL and was lonely. I had to tell staff to use BSL, so that he had someone to talk to. I got told off for reminding the staff that he was Deaf. If the staff don't use BSL, his sign language skills diminish. What about putting Deaf older people all in one care home, so that they can communicate and socialise with each other?</p> <p>Is there a care home specifically for Deaf older people? There is one in the south. Would BMBC pay for the person to move? The home mentioned in Leeds is just for Deaf people with mental health issues.</p> <p>They should arrange for Deaf people to get together, to collect them for a social event at a day centre. This could stop them being isolated.</p> <p>Deaf people should get together every day. Hearing people can talk to other people every day, so why not Deaf people too? They need to express how they're feeling too.</p> <p>Would it help if care home staff could communicate in BSL? Can it be put in universal training packages? Who would pay for the training? Why not employ Deaf care staff?</p> <p>Don't forget that it takes seven to ten years to learn BSL to a proficient level.</p> <p>It would be great if we had Deaf carers. If anyone would like to take up caring, BMBC can provide training.</p> <p>There are schemes where Deaf people can volunteer to</p>

	befriend other Deaf people, in their own homes or in a care setting.
--	--

Audience Recommendations

1. Could BMBC arrange for Deaf people to get together, to collect them for a social event at a day centre. This could stop them being isolated.
2. Could BMBC audit the homes to find out where patients with BSL needs are placed and work with the deaf community train them and set up a volunteering and befriending service for the Deaf which could then be extended to support people receiving care in their own homes who are isolated?
3. Mandatory staff awareness training of Deaf Culture where a BSL resident is placed.
4. Can BMBC advise and encourage residential care homes to employ Deaf Care workers or staff that have proficient BSL Skills?

Interactive Theatre Session 3 - A Deaf person with depression and low self-confidence, living at home on their own

Scenario	Feedback and Discussions
<p>Asks neighbour to help with their financial affairs, council tax bills, benefits, etc. Neighbour tells Deaf person stories, which scare them. Stories about how deaf people can't manage on their own are scammed by bad people etc. So, they are lucky they have her neighbour to help.</p> <p>The person thinks neighbour may be stealing from them, but doesn't know how to ask for help or even who to ask. Also worried that may lose the one person who visits and helps them.</p>	<p>Members of the audience asked if DBS checks, would stop the Deaf person being taken advantage of financially? These checks are usually for organisations.</p> <p>You could ask the neighbor for a receipt if they are handling money.</p> <p>Better not to use a neighbour for help with financial matters, talk to a social worker, a Deaf Advice Centre. However there isn't one in Barnsley.</p> <p>I would ask family or friends.</p> <p>I am angry with BMBC. We had our own welfare officer. Why has BMBC cut these services? It takes two or three weeks to get an interpreter for appointments and things just seem to get</p>

	<p>passed through departments at the council. We keep saying this but nobody listens.</p> <p>You could have a Deaf carer to help. Or a personal assistant. When my mum was alive she did everything for me. But she didn't explain things to me. My neighbors help, but they don't explain either. A Deaf personal assistant came to help me. I got letters from the bank and eventually found out that someone had been taking money from my account. The person that did this has since been arrested, but I didn't get all of my money back.</p>
--	---

Feedback Interactive Theatre Session 3

Audience Recommendations

1. More information on where to access services needs to be given to the Deaf Community. Whilst the Citizen's Advice Bureau runs a session on a Wednesday morning for the Deaf community, details of which are advertised on their website at <http://barnsleycab.org.uk/get-advice/> the attendees did not feel as if this was enough and that more needed to be done. Attendees also advised that they often sought help through a Deaf Advice services based in Sheffield although this support was decreasing due to this service being commissioned only for Sheffield residents.
2. The Deaf community in Barnsley do not have enough information on how to safeguard themselves and what to do if they feel that they are being taken advantage of. BMBC needs to think about how they will work with the Deaf community in Barnsley to ensure that they have information about how to safeguard themselves in the future to ensure events like the one mentioned above do not reoccur.

Disabled Deaf person living in supported housing

Scenario	Feedback and Discussions
The Deaf person is old and frail. She can only move around	I have met someone like that in my life. Could they write to

with great difficulty and pain. Has a bracelet that they can press and help will come. Forgets to take medication, and is at risk of falls. There is a care line service, where an operative can call every morning and evening, to make sure they are ok. However, this is voice only, so she can't use it very well limited to indicating that they are ok by vocalizing the best she can down the telephone. In this scenario she cannot rise from her chair as she is too weak and whilst she can answer the phone she cannot explain to the operative what the problem is.

each other? They can't sign.

The service should already understand about communication needs and medication and the caller should know too.

This can also happen to Deaf people. Key worker is busy and the care home is short staffed. The alarm should be checked daily.

I remember there was a warden that came around to check that people were ok and taking their medication.

There are other options available, such as Lifeline/Independent Living at Home.

How can Deaf people access the telephone service? There are adaptations.

Look at Rotherham, they have good services and offer personal assistants. Barnsley doesn't seem to offer this service. Should there be a budget for assistants?

Rotherham and Sheffield have dedicated teams, but BMBC seem scared that nobody will use the service. Nobody seems to want to acknowledge the rights of the Deaf community. We have been very patient.

Some Deaf people are apprehensive about direct payments. They don't want to be in charge of the payments.

Deaf people do not have to manage their finances in relation to direct payments. Like everyone else that is eligible, they

	have options as to how their benefits are administered. I like helping people but I get confused about who does what. I feed things into the forum. I don't have great English skills.
--	---

Feedback Interactive Theatre Session 4

1. BMBC needs to look at how they are communicating with the deaf community and improve access to assessment and care management services for the deaf community.
2. The Deaf community would like to know why the Berneslai Homes Warden service was discontinued and what has been put in its place?
3. The Deaf community do not have enough information about what is available to them, how can they receive this information taking into account the different levels of literacy?
4. What support if any can the Deaf community get through attending the Deaf Forum and Deaf Social Club?
5. What plans are being made to ensure that Deaf Children and Young People are learning skills which can support them in later life?