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Margaret Kilner  
Chief Officer  
Healthwatch Sheffield  
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Dear Margaret

**Not equal: The experience of Deaf people accessing health and social care in Sheffield.**

Thank you for sending us a copy of this helpful and informative report, and for highlighting the issues faced by Deaf people. We welcome the recommendations in the report and are looking at how we can best implement them.

Sheffield Clinical Commissioning Group is a commissioner rather than a provider of healthcare and therefore the recommendations that are most relevant to us are recommendations 2 and 3.

Recommendation 2 is that commissioners should consider the use of measures and /or incentives to ensure the Accessible Information Standard is being implemented by providers.

We actively encourage our providers to implement the Standard. The National Core Contract requires providers to comply with the Accessible Information Standard. General Practices are also asked to record any issues that they have with communication on their systems, which should trigger an alert. As a result of the Healthwatch report we are checking with providers that these processes are active and working.

We are ensuring that, as we re-commission services, requirements to meet the Accessible Information Standard are clearly articulated and we are looking at ways to monitor compliance with this. As a result of this Healthwatch report we are revisiting what we can do to encourage providers to implement the Standard, particularly in relation to British Sign Language (BSL).

As part of our response to the Healthwatch report we are identifying ways to engage with Deaf people through some of our primary care forums in order to identify what we can do support practices to implement the recommendations in the report. We also have regular learning programmes for GPs, receptionists and practice managers and we will look at how we could use these to increase awareness of the Accessible Information Standard as well as the needs and experiences of Deaf people.

Recommendation 3 is that contract monitoring of LanguageLine Solutions should include the experience and views of Deaf people. We agree with this recommendation. The contract held by the CCG with LanguageLine sets this out the requirement to seek feedback from patients about their experience. Based on the findings of this report we think there is more we could do. We commission interpreting services for Primary Care and for Continuing Healthcare and therefore will focus on these areas. To increase the information we have in relation to experience and views of Deaf people we will engage with them directly to find out how we can best encourage people to give us feedback and how we can make it easy for them to do so. We will improve our links with organisations that support Deaf people and ask them to let us know on a regular basis of any concerns or examples of good practice that they are aware of. We will then ensure that the feedback that we receive is used as part of our contract and quality monitoring.

Although the other recommendations are for providers they are also relevant to some of the activities of the CCG and so we are seeking to implement them within our own organisation.

Although the Accessible Information Standard is applicable to providers rather than to commissioners we recognise that the Standard represents best practice and that it is therefore useful and relevant to the areas of our work in which we have direct contact with patients, such as Continuing Healthcare. A programme of work is currently underway, including a review of the letters that we send to continuing healthcare patients and relatives, and the actions suggested by Healthwatch will be incorporated into this.

CCG staff undertake mandatory training in equality and diversity. We will identify whether there are gaps in our staff's knowledge and understanding of the needs of Deaf people and if there are we will take appropriate action to address this.

The CCG's complaints and feedback policy is currently being reviewed. As part of that review we will engage with organisations such as Citizens Advice Sheffield's Deaf Access Team, Disability Sheffield and Voiceability to identify whether there are any barriers to Deaf people accessing our feedback mechanisms and, if so, what we can do to address those barriers. We will ensure that BSL interpreting is easily available to Deaf people who want to provide us with feedback. We will produce a BSL video explaining how patients and carers can provide feedback to the CCG. We will ask organisations and groups that support Deaf people to help us promote our complaints processes.

Finally, we would like to thank Healthwatch, the Citizens Advice Sheffield's Deaf Advice Team, Disability Sheffield and all those who participated in the workshops and the production of the report.

Yours sincerely



Dr Tim Moorhead  
Chair NHS Sheffield CCG



Maddy Ruff  
Accountable Officer