Equality Impact Assessment Template: Please complete alongside the guidance document

Title of work:	Date of completion:	Completed by:
British Sign Language (BSL) Plan, 2024-	September 2024	Naomi Watson & Susan Birse
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Description of work:

On the 22nd of October 2015, Scotland became the first part of the United Kingdom to recognise British Sign Language (BSL) as an official language. This has ensured that the cultural and linguistic identify of Deaf and Deafblind people who use BSL to communicate, is legally recognised. The BSL (Scotland) Act 2015, places a legal responsibility on the Scottish Government and listed authorities (including NHS Boards) to promote the BSL language and to consider how to deliver accessible services in BSL. The Scottish Government recognises BSL as one of the languages of Scotland, and therefore, it is an integral part in the lives of many Scottish people. The Scottish Government has an ambition to ensure that Scotland is the best place in the world for BSL users to live, work, visit and learn. To support this ambition, Scottish Government produces a National BSL Plan every six years, with the first plan covering the period 2017-2023, and the new plan from 2023-2029. Ensuring equal access, opportunity, representation, and inclusion for all BSL users is a fundamental right for all Scottish citizens.

The BSL (Scotland) Act 2015 requires NHS Highland to publish a plan every six years, showing how we will promote and facilitate the use and understanding of BSL in Scotland.

This Plan follows the BSL National Plan, published in October 2023. NHS Highland has produced a joint plan with The Highland Council, recognising the strength in partnership working and the many shared actions. Whilst preparing our Plan, we have undertaken engagement and consultation, liaising with:

- BSL users, carers, family members and people with a shared interest.
- British Deaf Association
- Highland Council
- NHS Highland staff
- Argyll & Bute Council
- Argyll & Bute IJB
- University of the Highlands and Islands

As part of the commitment to this six-year plan, NHS Highland and The Highland Council will establish a BSL Plan Panel comprised primarily of BSL Users from the d/Deaf and deafblind Community. The purpose is to monitor and review the actions within the BSL Plan and to work together to improve access to services for all deaf and deafblind BSL Users. This EQIA will be reviewed and updated on a regular basis in line with this ongoing work.

Analysis of the 2022 Census data shows that there are 8,324 BSL Users in the NHS Highland area (2.7% of the population), 6,188 of whom live in the Highland Council area (2.7% of the population), and 2,137 in the Argyll and Bute Council area (2.5% of the population). 114 individuals within the NHS Highland area listed BSL as their main language. This is particularly important to note when considering accessibility as, for many deaf and deafblind people, English will be a second language, emphasising the importance in communicating in an appropriate and accessible way. Under the Equality Act, all NHS services have a legal duty to make reasonable adjustments to provide Disabled people with information and communication in accessible formats and to provide communication support.

It is important to recognise that not all BSL Users will be deaf, and not all people who are deaf or deafblind will use BSL. Data around the number and location of deaf and deafblind people in the United Kingdom is limited to estimates. 2011 Census data indicates that there are 23,268 living in the NHS Highland Board area who are deaf or have partial hearing loss. Information derived from the census is based on self-reported data, and UK-wide Studies indicate that the figure is likely to be higher than this. A recent study estimates that one in six people in Scotland are deaf or have hearing loss. (Action on Hearing Loss, 2020)

NHS Highland and The Highland Council jointly deliver a Communication Support Service – a service that provides BSL Interpretation for BSL Users using NHS Highland and Highland Council services. Data indicates that there are ninety-two regular users of the service across Highland.

Outcome of work:

The expected outcome of the BSL Plan is that we will make progress in ensuring equal access to services and improved health outcomes for deaf and deafblind BSL Users.

The key outcomes, aligned with the actions in the BSL plan, are detailed below.

• **BSL Accessibility** – Access to services will be improved for deaf and deafblind BSL Users by ensuring that interpreters are booked for all NHS Highland appointments. This will be achieved through ongoing work with staff groups to improve

processes and improve awareness of the Communication Support Service, ContactScotland BSL, BSL 999, and Emergency SMS. We commit to increasing the amount of key information translated into BSL on the NHS Highland website.

• Children, Young People and their Families – Deaf children, young people, and their families will have the opportunity to learn about BSL identity and culture through the identification of d/Deaf Role Models.

Working alongside representative groups from Midwifery, Health Visiting, the Family Nurse Partnership, Allied Health Professionals and Audiology, we will have developed an approach as to how best to support understanding of the importance of BSL provision on child and family wellbeing.

- Access to Employment NHS Highland will be an accessible employer, offering career options for people of all abilities. We will have scoped options to make our recruitment process more accessible and by raising awareness of the UK Government's Access to Work Scheme, with managers, staff who use BSL and potential employees who are BSL users.
- Health and Wellbeing BSL Users will have equitable access to Health and Social Care services.
- **Celebrating BSL Culture** BSL and Deaf Culture will be visible throughout our work and will be routinely promoted throughout the year by NHS Highland.
- **BSL Data –** NHS Highland will have adequate systems in place to facilitate the understanding of BSL Users, d/Deaf and deafblind people across NHS Highland and will use this to support improved outcome for this community.
- Access to Services d/Deaf and deafblind BSL Users will have equitable access to NHS Highland services through accessible transport.
- **Democratic Participation** NHS Highland will work in partnership with the d/Deaf and deafblind BSL Users community to support co-production on service developments.

Who:

Stakeholders: (who will this work affect?)

The BSL Plan directly impacts d/Deaf and Deafblind BSL Users.

How do you know:

Stakeholder engagement: How will you know what impact this will have - please detail what work you have done to find this out? Remember to consider the way in which you use language matters.

An in-person engagement event took place on the 20th of January 2024 with representatives from NHS Highland, The Highland Council and The University of Highland and Islands. Support and interpretation were provided by BDA Scotland. Feedback was obtained and incorporated into the draft BSL Plan.

NHS Highland published a draft plan on the 6th of May, translated into BSL. It was published under the understanding that further engagement would be undertaken with the deaf and deafblind BSL Community in Highland, and that its contents may be subject to change.

A second in-person engagement event was held on the 13th of July 2024, in Inverness, involving NHS Highland, The Highland Council, with facilitation and interpretation from BDA Scotland. Again, feedback from this event was incorporated into the revised plan. It was agreed that NHS Highland and the Highland Council should produce a joint document, recognising the shared goals and the partnership approach that we are taking.

Over the course of the six-year plan, we seek to develop the relationship with deaf and deafblind BSL Users from one of consultation and engagement to one of co-production. We are aiming to do this by establishing a joint BSL Plan Panel, involving members of the Deaf Community from across the NHS Highland area. The aim is to work together to progress the actions in the BSL plan and to hold NHS Highland and the Highland Council to account. We also intend to establish a Sensory Group who will work with us to identify barriers and issues within our services, to address these, to improve access and ultimately to improve health outcomes.

What will the impact of this work be? (see appendix 1 for list of protected characteristics and other groups that you may wish to identify)

Research (SignHealth & The University of Bristol, 2014) has shown that whilst d/Deaf and deafblind people have similar health behaviours, they face worse health outcomes because of poorer diagnosis, treatment and management. This can largely be attributed to the barriers faced in accessing services, including poor communication and a lack of accessible information. Throughout the process of developing the BSL Plan, a key factor has been how we deliver services in a way that promotes equality of access and opportunity, reducing possible harms and improving health outcomes,

The Equality Act (2010)-

- Age Age has been considered and no negative impact has been identified. With an aging population, it is estimated that around 1 in 7 people will experience hearing loss. However, many BSL Users will be profoundly deaf, and will have been born deaf, or lost their hearing at a young age. As such, their first (and preferred) language is usually BSL.
 NHS Highland services are available to all ages. Consideration has been made to ensure that d/Deaf and deafblind BSL users, regardless of age, are able to access services and be involved in ongoing engagement sessions and meetings, with a variety of options available to meet varying needs and provide choice.
- Disability disability has been considered and the BSL plan will have a positive impact. Whilst many d/Deaf and deafblind
 people do not consider themselves to have a disability, we recognise that we have a duty and a responsibility to ensure
 that all NHS Highland services are accessible to all. This includes actions around the booking and availability of
 interpretation services and communication support, clear identification of BSL Users and their requirement of an interpreter
 within their healthcare records, and the provision of appropriate and accessible information on services and health
 conditions in BSL.

All commitments and actions contained in the plan seek to reduce barriers to obtaining healthcare, improve accessibility to services, improve the accessibility of information, reduce inequality and improve outcomes.

- Ethnicity ethnicity has been considered and no negative impact has been identified.
- Gender reassignment gender reassignment has been considered and no negative impact has been identified.
- Marriage and Civil Partnerships marriage and civil partnerships have been considered, and no negative impact has been identified.
- Religion religion has been considered and no negative impact has been identified.
- Sex sex has been considered and no negative impact has been identified.
- Sexual orientation sexual orientation has been considered and no negative impact has been identified.

• Pregnancy and maternity – pregnancy and maternity has been considered and the BSL Plan will have a positive impact.

Other Considerations:

While considering the protected characteristics, conversations were also had considering accessibility, transport, poverty (including the affordability of transport), the remote and rural setting for some d/Deaf and deafblind BSL Users, literacy, and digital literacy. Actions addressing these issues have been included in the BSL Plan. In addition, intersectionality of protected characteristics, and wider issues, can make circumstances more challenging for people.

Given all of the above what actions, if any, do you plan to take?

- To establish a BSL Plan Panel made up of BSL Users from the d/Deaf and deafblind community in Highland, as well as key staff within NHS Highland and the Highland Council. We will work together to monitor and review the actions with the BSL Plan, addressing issues as they arise with the aim of improving accessibility and outcomes for BSL Users in Highland. This Equality Impact Assessment will be reviewed and updated in line with the meetings.
- To ensure that all key individuals involved in this ongoing work have undertaken <u>Deaf Awareness Training</u>.

Approved by:

Susan Birse, Health Improvement Principal