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## Media Release

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### ***Deaf\* people ‘denied’ fair access to health services says RUH doctor***

**A Consultant Physician from the Royal United Hospital Bath says Deaf\* people are not given a fair opportunity when it comes to healthcare and for some this leads to errors in their treatment.**

Dr Andrew Alexander has co-written the article in this week's prestigious medical journal, **The Lancet**, with Dr Paddy Ladd from the Centre for Deaf Studies at Bristol University and Steve Powell, the Chief Executive of SignHealth, a Deaf healthcare charity. Dr Alexander, whose daughter has been Deaf since birth says,

*“In the article, entitled ‘Deafness might damage your health’, we look into how Deaf people aren’t given a fair opportunity when it comes to their healthcare and how poor communication can lead to medical error. For example relying on lip-reading is inadequate as lip-readers understand only part of a conversation and use guesswork to fill the gaps. Written notes are unsatisfactory too as many Deaf people have often had poor quality education and may have a lower than average literacy.*

*A qualified interpreter should always be present in a consultation between a clinician and a Deaf patient who uses BSL to enable better two-way communication. Without an interpreter, the clinician is unable to make an adequate assessment and the patient is denied the opportunity to discuss their concerns. However, interpreters are scarce and need to be booked well in advance, meaning patients often have to rely on friends and family to interpret, so patient privacy is compromised.”*

The article discusses how reduced access to health information and care could mean that, for example, control of diabetes in Deaf patients is inadequate, leading to increased risk of complications such as blindness, particularly devastating for people who rely on visual communication. Dr Ladd explains,

*“Good communication is key to the healthcare of Deaf people, and small changes made by healthcare professionals can make a big difference. Deaf awareness training is a priority and the medical records of Deaf people should be flagged with their preferred communication method, for example a BSL interpreter.”*

Dr Alexander, who has been instrumental in efforts to improve access for Deaf patients at the RUH, says his interest in highlighting health inequality for the Deaf community stems from having a Deaf daughter.

*“I have met so many Deaf people who have had bad experiences of health care because of poor communication. At the RUH we have provided staff deaf awareness training, improved BSL interpreter access including 24-hour online interpreter availability, and produced guidance for staff on booking and using interpreters. We are working with the local Deaf community to improve access further.”*

SignHealth is the only UK charity focused on improving the mental and physical health of Deaf people. Chief Executive Steve Powell added,

*“The article examines how we can help improve the healthcare of Deaf people by making small changes, including making access to interpreters easier, using text message and email to book appointments and contact healthcare staff, and having patient information leaflets and health advice available in British Sign Language.”*

According to Dr Alexander, Dr Ladd and Mr Powell, the Deaf community is at risk of poorer health because of a combination of poor quality education, threefold higher unemployment, increased mental ill-health and decreased availability and accessibility of health information. They say this risk is compounded by poorer access to primary and secondary healthcare provision.

The launch of the article ties in with national BSL Day on March 18. The day is a campaign led by the British Deaf Association to gain legal status for BSL as an indigenous minority language in the UK.

## ENDS

**There is an opportunity to interview a Deaf patient with an interpreter on Tuesday 13<sup>th</sup> March at the RUH between 11am and 2pm. For further information and interview opportunities with Dr Alexander and a Deaf patient, please contact Helen Robinson-Gordon at the RUH. 01225 825849. Email: [Helen.robinson-gordon@nhs.net](mailto:Helen.robinson-gordon@nhs.net)**

For further media details about SignHealth, please call Porcupine PR on 01278 446801, email [Kate@porcupinepr.co.uk](mailto:Kate@porcupinepr.co.uk) or visit [www.porcupinepr.co.uk](http://www.porcupinepr.co.uk)

### Notes to editors:

- \*It is the convention adopted within the Deaf community of using an upper case D when referring to those who identify themselves culturally and linguistically as members of the Deaf community. Typically they are prelingually Deaf and use British Sign Language (BSL) as their first language.
- To improve access for Deaf\* people the report has also been translated into British Sign Language (BSL) and filmed for [www.thelancet.com](http://www.thelancet.com) to tie in with its publication on Friday, March 16. It will also be available via the RUH website, [www.ruh.nhs.uk](http://www.ruh.nhs.uk)
- The Royal United Hospital Bath NHS Trust books face-to-face BSL/English interpreters whenever possible. For short notice appointments or emergencies it offers patients an on-line interpreter service, called SignTranslate devised by SignHealth. This uses a computer and webcam to connect the clinician and Deaf patient with a registered interpreter who is not present in person, but appears on the computer screen via a live internet link.
- Dr Alexander is a Consultant Respiratory Physician at Royal United Hospital, Bath and has a Deaf daughter.
- Dr Ladd is Reader and MSC Co-ordinator at the Centre for Deaf Studies at the University of Bristol.

