

Argyll and Bute Council: Equality and Socio-Economic Impact Assessment

Section 1: About the proposal

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| Title of Proposal |
| Joint Local British Sign Language Plan for Argyll and Bute |

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| Intended outcome of proposal |
| The Joint Local BSL Plan for Argyll and Bute 2018 - 2024 sets out the collective intentions of Argyll and Bute Council, NHS Highland Health Board and liveArgyll to improve communication with, and access to services for, people who use BSL in the period 2018-2024. (NHS Highland remain the responsible body in Argyll and Bute HSCP devolved services and this plan feeds into theirs). |

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| Description of proposal |
| The final plan sets out how we propose to use BSL in the operation of our functions; including communications with the public, key partners and our employees. It has been prepared in accordance with statutory criteria set out in the 2015 Act, the National BSL Plan, and guidance provided by the BSL (Scotland) Act Partnership; particularly in relation to the development of BSL Plans. |

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| Business Outcome(s) / Corporate Outcome(s) to which the proposal contributes |
| BO104 Our Communities Are Supported And Protected BO107 The Support And Lifestyle Needs Of Our Children, Young People And Their Families Are Met BO108 All Our Children And Young People Are Supported To Realise Their Potential BO109 All Our Adults Are Supported To Realise Their Potential BO116 We Engage And Work With Our Customers, Staff And Partners |

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|-------------------------------------|--------------------------------------------------------------------------------------|
| Lead officer details: | |
| Name of lead officer | Lisa Bond |
| Job title | Business Partner – Performance & Improvement |
| Department | Customer Services |
| Appropriate officer details: | |
| Name of appropriate officer | Jane Fowler |
| Job title | Head of Improvement & HR |
| Department | Customer Services |
| Sign off of EqSEIA |  |
| Date of sign off | 18/09/18 |

Who will deliver the proposal?

Argyll and Bute Council, NHS Highland Health Board and liveArgyll (a charitable trust which delivers leisure and library services on behalf of Argyll and Bute Council), who are responsible for some of the goals listed under the Culture and Arts, and Health (including social care), Mental Health and Wellbeing sections).

Section 2: Evidence used in the course of carrying out EqSEIA**Consultation / engagement**

Public Consultation ran from 2/8/18 – 2/9/18 inclusive. We published our draft Joint Local BSL Plan in English and BSL on Argyll and Bute Council's website, and promoted it through social media including the Council's YouTube channel, Healthy Argyll and Bute and the Facebook pages of 2 national deaf organisations. We also wrote to BSL users in Argyll and Bute who have had contact with our Sensory Impairment Team before and encouraged them to comment; and also to parents of deaf children, as well as deaf parents to draw their attention to our consultation arrangements. We held two public consultation events in Lochgilphead and Tarbert on 14 August 2018. We invited comments in the following ways:

- by completing our online survey
- by emailing responses to our survey in either English or BSL
- by phone using contactSCOTLAND-BSL (if appropriate)
- by attending our consultation events

Data

Six people came to our public consultation events and 27 individuals filled in our survey (1 hardcopy and 26 online). Respondents gave us their ideas, suggestions and, in some cases, details of their life experiences which helped us to gain a better understanding of some of the challenges which BSL users can face on a day-to-day basis, particularly where:-

- a) They are not known to a service
- b) Their communication needs are not stated on their records
- c) They need urgent support
- d) Staff are not deaf aware and use inappropriate forms of communication

We have published a separate report (“We Asked, You Said, We Did”) which contains the results of the consultation.

We set up a working group to develop our draft Joint Local BSL Plan, and this included representatives from NHS Highland Health Board, liveArgyll and the Council; including those who work with BSL users on a day-to-day basis. Members of the group also went to three BSL Plan Roadshows hosted by the BSL (Scotland) Act Partnership, and information from these (including feedback on research carried out by the National Deaf Children’s Society (Scotland), was taken into account when developing the draft Joint Local BSL Plan.

In the 2011 Census, the people of Scotland were asked if they used a language other than English at home. In Argyll and Bute 152 people of those aged 3 and over said “Yes – British Sign Language”. 6931 of respondents in Argyll and Bute indicated they had deafness or partial hearing loss which had lasted, or was expected to last, at least 12 months.

Other information

BSL is a visual mode of communication with its own grammatical structure and syntax conveyed by gestures, facial expressions and body language. It is not dependent on, nor strongly linked to, spoken English. It has no written equivalent and is a point often missed by professionals who often resort to the written word using English language phraseology, grammar and syntax which is not an effective mode of communication for many Deaf people.

Deaf people often struggle to access services as the average reading age of a Deaf person is 9 years old (Wauters, L.N., Agnes, E.J.M., Tellings, A.E.J.M., van Bon, W.H.J. & Mak W.M. (2007) Mode of acquisition as a factor in deaf children's reading comprehension. *Journal of Deaf Studies and Deaf Education*).

People of all ages who use BSL within Argyll and Bute may be affected by the introduction of this Plan. A higher proportion of men than women will develop hearing loss over the age of 40. This is possibly because more men have been exposed to high levels of industrial noise compared to women. Among the over 80 years of age population, more women than men have hearing loss, which is due to women living longer than men on average, not because women are more likely to become deaf (Action on Hearing Loss Information July 2011).

With an ageing population the number of people with deafness or partial hearing loss will increase and so will the demand on communication support services. More and more people will require support and assistance to be able to access Health and Social Care services across the region without the need to rely on carers/family and friends.

NHS figures suggest 40% of deaf children experience mental health difficulties compared to 25% of hearing children (NHS, 2005).

More older people are likely to be affected by social isolation and there is a strong link between hearing loss and dementia. People with mild hearing loss are two times as likely to develop dementia, and this increases to three times for those with moderate hearing loss (Lin, F.R., Metter E.J., O'Brien, R.J., Resnick, S.M., Zonderman, A.B. and Ferrucci, L. (2011) Hearing loss and incident dementia. *Archives of Neurology* vol 68, no 2, pp. 214-20).

Not all Deaf people consider themselves to be disabled. Nevertheless, this Plan is specifically aimed at BSL users. It is acknowledged that not all Deaf/Deafblind people use BSL.

This group may also have additional disabilities, e.g. blind, partially sighted, learning disabilities, mental impairment and physical disabilities.

The needs of D/deaf people will be met no matter what protected characteristic they come under. There will be better access to services for all Deaf BSL users.

Gaps in evidence

The Council holds some information on its corporate systems about the BSL users who are supported by the Sensory Impairment Team, and also the deaf children in Argyll and Bute of pre-school and school age who are supported by the Teacher of the Deaf. There is no data source other than the census which was carried out in 2011, that would identify all adult BSL users in Argyll and Bute, as council services only hold data on the individuals who are accessing them. At present neither the Council nor NHS Highland Health Board collate information on the number of BSL users who are accessing their websites, and this is an action point which has been identified in the plan. The number of hits on BSL materials will be monitored once BSL materials have been made available on those sites though it is acknowledged that people other than BSL users may access these materials too. NHS Highland has also identified an action point to increase the amount of information held on their patient record system so that appropriate interpreter support can be arranged in advance of appointments as a matter of course.

Section 3: Impact of proposal

Impact on service users:

| | Negative | No impact | Positive | Don't know |
|-----------------------------------|----------|-----------|----------|------------|
| Protected characteristics: | | | | |
| Age | | | √ | |
| Disability | | | √ | |
| Ethnicity | | √ | | |
| Gender | | | √ | |
| Gender reassignment | | √ | | |
| Marriage and Civil Partnership | | √ | | |
| Pregnancy and Maternity | | √ | | |
| Religion | | √ | | |
| Sexual Orientation | | √ | | |
| Fairer Scotland Duty: | | | | |
| Mainland rural population | | | √ | |
| Island populations | | | √ | |
| Low income | | | √ | |
| Low wealth | | | √ | |
| Material deprivation | | | √ | |
| Area deprivation | | | √ | |
| Socio-economic background | | | √ | |
| Communities of place? | | | √ | |
| Communities of interest? | | | √ | |

Impact on service deliverers (including employees, volunteers etc):

| | Negative | No impact | Positive | Don't know |
|-----------------------------------|----------|-----------|----------|------------|
| Protected characteristics: | | | √ | |
| Age | | | √ | |
| Disability | | | √ | |
| Ethnicity | | | √ | |
| Gender | | | √ | |
| Gender reassignment | | | √ | |
| Marriage and Civil Partnership | | | √ | |
| Pregnancy and Maternity | | | √ | |

| | Negative | No impact | Positive | Don't know |
|------------------------------|----------|-----------|----------|------------|
| Religion | | | √ | |
| Sexual Orientation | | | √ | |
| Fairer Scotland Duty: | | | √ | |
| Mainland rural population | | | √ | |
| Island populations | | | √ | |
| Low income | | | √ | |
| Low wealth | | | √ | |
| Material deprivation | | | √ | |
| Area deprivation | | | √ | |
| Socio-economic background | | | √ | |
| Communities of place? | | | √ | |
| Communities of interest? | | | √ | |

If any 'don't know's have been identified, at what point will impacts on these groups become identifiable?

Not applicable

How has 'due regard' been given to any negative impacts that have been identified?

Deaf people of Black and Minority Ethnic origin may have additional cultural needs to be taken into consideration by service providers. The Plan is limited to British Sign Language. There are hundreds of variations of sign language used throughout the world. Foreign Sign Language users will potentially be disadvantaged but this would be mitigated by contacting a deaf relay interpreter if required.

Section 4: Interdependencies

Is this proposal likely to have any knock-on effects for any other activities carried out by or on behalf of the council?

Yes

Details of knock-on effects identified

The spirit and actions in the Plan should be considered when developing any new policies and/or procedures, for example when thinking about how service users can communicate with the Council, and offering a choice of communication options where possible. The plan will be promoted to all Council employees and elected members through the use of the website, 'The Hub' (which is the staff intranet) and newsletters. NHS Highland Health Board will make people aware of the plan through staff emails, the Integrated Joint Board for the HSCP, senior operational management meetings and NHS Highland website including the page for Argyll and Bute. Externally, the plan will be promoted through the use of social media sites e.g. Facebook; Twitter; Argyll and Bute Advice Network (ABAN); Healthy Argyll and Bute; Locality Planning Groups; Community Planning Groups and local and national deaf organisations.

Making materials available in BSL and developing a translation policy should help employees to communicate better with service users and benefit any employees who use BSL themselves.

Demand for interpreting and translation services may increase as well as requests for deaf awareness and BSL training as a result of developing and promoting the BSL Plan.

Section 5: Monitoring and review

How will you monitor and evaluate the equality impacts of your proposal?

The plan will be monitored each year by the Council's Policy and Resources Committee. Heads of Service will be responsible for updating the action plan in Pyramid; the council's performance management system. Some of the actions in the plan involve surveys which will be able to measure the impact of those measures for example it will be possible to see if the level of BSL held by teachers and support staff is increasing from the annual survey to be conducted by the Education Service.

No negative impacts have been identified at this stage. If any arise when the Plan is put into practice, attempts will be made to mitigate any adverse negative impacts.