

# Consultation Recommendations

## DeafConnect

### Online and Easy Read Survey Response Summary

Around a third of respondents identified as being in each of the following categories; DeafConnect service users, work or volunteer in the area; interested members of the public. With respondents also identifying to a lesser degree with the other categories. Additionally, two-thirds of people who responded to the Easy Read Survey identified as being a service user.

Only one-third of responders' stated that they have not used DeafConnects' services in the last 12 months, which may correlate to the third of the responses from interested members of the public. All 11 responses to the question on the East Read survey version had accessed NAB service in the past 12 months. 'Information, Advice and Guidance came through as the most accessed service, however there was clearly as a significant level of access across all the DeafConnect services.

Specific comments from survey participants were limited, though what was provided can give an indication of the impact the DeafConnect service has for respondents;

*'Use translate English to BSL or help my bills, benefits and court etc. If no deafconnect that I will be lonely and no one help my needs.'*

Comments also suggest the requirement from healthcare professionals for such a service and the potential financial impacts of losing this service, for example;

*'I have not accessed them, but my patients have. Without such a service I see a possible devastating impact on the people, not only on their health, but wellbeing, social engagement; without replacing it the council is likely to be responsible to much worse health and wellbeing outcomes in people, with impact on demands for other services. This won't be cost saving except in the first few months. You will see costs rising quickly elsewhere making this not a saving, but a change that increases costs.'*

(NB SAME COMMENT WAS ALSO PROVIDED IN RESPONSE TO THE NAB CONSULTATION)

Twenty-seven respondents across the online and Easy-Read surveys regularly use DeafConnect's services out of a total of 66. This is however further significant as twenty-seven responders in total identified as service users. One respondent commented that they had used three of Deafconnects' different services in the last 12 months. Fifteen responders stated the specific adults' groups they attend and another that they hope to attend soon. A number of responders commented on the Children's groups that are attended. This is not specifically relevant to this consultation which is only looking at the aspect of the DeafConnect contract which is funded for adults, however the results will be shared with Children's First.

Twenty-eight responders stated attending groups weekly, two-weekly or monthly, and one responder stated attending 'as needed'. One responded additionally stated that they did not attend at all.

Thirty-six responders stated that the 'information, advice and guidance' service helped them the most. There was additionally at least 12 responses for all the other services, suggesting different aspects of the service are crucial to different service users at different times. None of the services offered were identified as not important.

One responded commented;

*'I asked for a door warning device but was told I would have to buy one myself, I understand there is no funding for this sort of thing any more'*

Respondents to the standard survey stated, on average on a scale of 1-5 (1 little, 5 big), a big negative impact of 4.35 (5.00 from the Easy Read response) would be felt if the NCC funding of around 10% of the current NAB service was cut. There were numerous references to impacts on health, through access to doctors, making appointments, impacts on NHS budgets, tinnitus, health related issues, poorer health, and many references to risks of social isolation and wellbeing.

One respondent stated;

*'I have not accessed them, but my patients have. Without such a service I see a possible devastating impact on the people, not only on their health, but wellbeing, social engagement; without replacing it the council is likely to be responsible to much worse health and wellbeing outcomes in people, with impact on demands for other services. This won't be cost saving except in the first few months. You will see costs rising quickly elsewhere making this not a saving, but a change that increases costs.'*

Other strong themes are the lack of any other support for hard of hearing people, no other avenues to learn BSL (British Sign Language), equalities, and the high level of value for money which the service offers. There were also references to the impacts on Children which will be shared with Children's First.

One respondent however stated;

*'I do not believe that this service is cost effective or impartial. There is often damaging advice that leads to excessively negative consequences for service users. The service is not empowering and does not provide informed choices for the users. The BSL video for this consultation itself and these questions are very leading and are give the impression that Deafconnect's service will cease to exist if this funding is withdrawn and that they are the only service provider in Northamptonshire.'*

The BSL video for the consultation was sourced through a DeafConnect provider therefore any leading detail in this was not the intention of Northamptonshire County Council (NCC). The online questionnaire was explicit in stating that NCC only funds a small portion of the total costs required to deliver the service.

The following question around the most important aspect of the service shows a strong link to comments in the previous question with the most important service coming through as 'Support to reduce feelings of isolation and to become part of the community to feel more included', closely followed by 'Information, Advice and Guidance'. All services areas scored highly in this question suggesting that different service users value different aspects of the service.

A slight majority of respondents stated that they didn't access voluntary or community groups. Those who did access community groups largely referenced those led by Deafconnect. However one respondent stated that;

*'We are still using the deaf social group services offered by Bedford's Access group and will continue until we make a good connection with the local services in Northamptonshire.'*

Evidence of support from any other setting, group or route was extremely limited. Most respondents stated that no other support was available with the exception being limited support from some Faith Groups.

Suggestions for future needs if the service was to be cut were to; reduce rent and running costs, provide better access to council events, provide funding support and knowledge and skills from elsewhere, develop new partnerships to levy money, use savings secured from other areas, councillors to use their own initiative, other organisations and NASS social care teams need BSL interpreter provision, phased ending to funding to be reintroduced when council finances are improved, set up and fund a local specialist mental health service for Deaf People, robust training for all frontline care and medical staff, provision for Deaf people's safety, more advocacy, befriending schemes, BSL support for managing bills employment and signposting, a deaf drop in service to explain letters, seek for the NHS to take over current funding arrangements, increase council tax to fund the service, ensure people know what services are available to them and how to access them, more places to be deaf aware e.g. health services are very inaccessible, work with voluntary/community groups and volunteers, funding on a project with objectives and outcomes based on the needs of the community. The strongest response coming through was not to end the service.

Respondents had an opportunity to provide other comments; One respondent commented on the quality and communication around the consultation and another on the costs of consultation. NCC took care to balance the ability to deliver an accessible consultation, alongside the costs of doing so to ensure that the consultation process and costs were proportionate to the value of the contract being consulted on. One respondent stated;

*'This funding has been given to Deafconnect without any accountability for many years. There has rarely been any disclosure of the actual work that is carried out by them and the impact that it has had upon the community. They service the same 30 clients year on year and do not listen to the needs of new clients, which causes them to go elsewhere or stop accessing any services which leads to greater problems further down the line.'*

The comments in this response are supported by some of the comments from other respondents to other questions already noted in this document and are a cause for concern.

The majority of respondents were based in Northampton suggesting that this is where the greatest level of need is. However, there was a balanced spread of the remaining respondents from all other areas of the county.

### Face to Face Consultation Events Summary Response

As with the responses to the questionnaire, there was a very strong theme of the significant impact cutting the DeafConnect service would have on the health of hearing impaired people, and the resultant increase in costs this could result in for the healthcare system. Comments included;

*'No available interpreter would mean waiting for hospital/doctor's appointments, this will worsen people's health; including physical and mental health. We all pay tax so why do we need to have cuts to Deaf organisations, my family are not nearby so cannot come to help easily.'*

And;

*'I recently went to the doctors and the interpreter supplied wasn't qualified, they didn't have a badge, and they didn't help me understand what went on in the doctor's appointment which was very stressful. Deafconnect helped me when I contacted them after that experience.'*

Again there were also many comments referencing the potentially negative impacts to mental health if the funding for the service was to be removed;

*'It took me 4 years to get acknowledged, my hearing loss was affecting my work. It became really difficult working in prisons as I had to lean in and ask people to speak up. I will potentially be using the services in the future so I was scared at seeing that cuts may be made. I want to have access to trusted service. Previously I have worked with the Deaf community and Deafconnect are very well regarded, they have a great reputation. I am already feeling isolated from losing my hearing, I want to be able to go somewhere to feel like there is a community to belong to.'*

And;

*'I am a Deaf professional at St Andrews hospital, when considering the potential discharge of patients what services will be available to them without Deafconnect? Deafconnect means people can be discharged to residential homes in Northampton from mental health beds as the available services here mean that Deaf people can manage better, if the services are gone then patients will be stuck in mental health facilities much longer. There is a domino effect with cutting costs, knock one all the rest will fall down, Deaf people cannot afford specialist fire alarms, doorbells, carbon monoxide sensors, the council are putting their lives at risk.'*

Many other comments were specific to all of the different aspects of the DeafConnect Service for example signposting and advice, support with IT and assistive technology equipment and specialist hearing impaired equipment such as fire alarms, engagement through various groups and activities, peer support, sign language lessons, interpreting, safeguarding and interpreting letters.

A strong theme coming through is that there is nowhere else for people to go to when they receive a health diagnosis of a hearing impairment for both emotional and practical support. Additionally many respondents spoke of the significant value for money the service provides, and how the NCC funding is crucial as a baseline fund for NAB, in order to be able to levy in additional funding.

What came through strongly in this consultation, even more than the need for the service Deafconnect does provide, was the huge isolation felt by hearing impaired people, the lack of wider understanding of deaf culture and the need for greater support for hearing impaired people and education and training for wider society to better understand and help to mitigate against the significant challenges felt by people with a hearing impairment. Respondents were also keen to communicate the varied and changing needs of people with a hearing impairment and the multifaceted response and support that is therefore required;

*'Deaf people can't be lumped into one group of people, there are those born Deaf, communicate verbally, full BSL, sign supported English, lip pattern with sign supported English, speech with sign supported English, those whose hearing is deteriorating and rely totally on lip reading, there is a whole rehabilitation involved with that group, there are varying degrees just at beginning when communication is starting to be hampered, or those where it is gone overnight. It is a massively diverse group of clients, and the staff are that*

*diverse, hard of hearing, profoundly Deaf, sign language, that is important for our client group, we break down barriers so there is masses of information that we give out to educate everybody, not just the Deaf community, to understand that it's not just one group but many with different needs, every individual is different, Deaf services treat individuals as individuals, including Deaf Hub and S4CS. Care all of this can only be done with expertise.'*

### Other Supporting Evidence

NCC additionally received a written note from five parties, one being the service provided. The aforementioned themes again came through very strongly. DeafConnect especially stressed the need for local authority funding as we transition to unitary authorities to ensure that this vital service is not lost as result of this transition.

An additional concern that was explicitly raised by respondents' were difficulties around the accessibility of the consultation process and a technical issue in the online questionnaire. NCC acknowledges these concerns. The technical glitch was as a result of an issue with the platform NCC uses for online consultations. NCC worked with DeafConnect prior to the consultation to deliver as robust a consultation as was possible within the current financial and timescale constraints. NCC is grateful to the advice DeafConnect provided in developing the consultation. NCC is of the view that to have directed more of the council's very limited resources on this consultation process would have been disproportionate to the size of the contract. The consultation received a good level of response through which NCC has been able to make a good level of analysis and a clear recommendation.

