

Best Practice Guidance

Creating accessible primary care services for people with sensory loss







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Introduction

The purpose of this document is to provide guidance for Commissioners, Health and Social Care Trusts, GPs, nurses and Practice Managers to help improve access to primary care services for people who are deaf, have a hearing loss, are blind or partially sighted.

WITH HEARING LOSS IN NORTHERN IRELAND

One in six people in Northern Ireland have a hearing loss – around 300,000 people. Around 50,000 people here have significant sight difficulties. Deafblind charity SENSE estimates there are approximately 250,000 deafblind people in the UK. Many people, particularly elderly people, experience joint sensory loss and, as our population ages, these figures are likely to rise. This means that a substantial proportion of our population will have additional needs when accessing primary health care.

This guidance has been developed by Action on Hearing Loss and RNIB Northern Ireland, with the support of the Health and Social Care Board. in response to the findings and recommendations identified by Action on Hearing Loss, RNIB and the British Deaf Association in their research report Is It My Turn Yet? (2009). Many of the respondents in that research indicated that they needed guidance

and help in ensuring their services were fully accessible. We hope that the steps outlined in this document will provide a practical approach to improving access to and awareness of the needs of people with sensory disability when accessing primary care.

This guidance focuses on their needs when attending a doctor's appointment but can equally be applied in other primary health care settings.

For the purposes of this guidance, we use the term 'people with a hearing loss' to cover all kinds of deafness. We use the term 'people with a sight loss' to cover all degrees of significant sight loss.

Background

Research in the UK, and much anecdotal information provided to the leading sensory disability charities, indicate that people with sensory disability are finding primary health care services difficult to access.



72% of people a with sight loss cannot read information given to them by their GP"

Is It My Turn Yet? showed that less than half (47%) of the GP practices surveyed had made 'reasonable adjustments' specifically for people with a sensory disability, despite the provisions of the Disability Discrimination Act 2005.

The findings also revealed that there was a general lack of awareness of the needs of people with sensory disability when accessing primary care, a lack of training for staff in this area, a shortage of suitable assistive technology and gaps in policy and procedures to meet the communication and mobility needs of service users with a sensory disability.

Poor access to services has a detrimental effect on those who need them. For example, Action on Hearing Loss's recent Access All Areas (2013) research indicated that one in seven respondents (14%) had missed an appointment because they had

not been aware of their name being called in the waiting room. Around one-guarter (26%) had been unclear about health advice they were given.

RNIB research indicates that 72% of people with sight loss cannot read information given to them by their GP.

And 1/5 (22%) of service users have missed an appointment due to information being sent in a format that they could not read.

The consequences of poor access can be serious – if service users are not properly informed that their appointment time is due or if they are not able to access the consultation room by themselves, vital appointments can be missed. If service users do not understand or cannot read information regarding medication, this may lead to the wrong dose being taken.

The right of people with sensory disability to access healthcare services is enshrined in law. **Providers of primary healthcare** services are obliged to take action to ensure their services are accessible to all.

The Disability Discrimination Act 1995 (DDA) aims to stop discrimination against people with disabilities.

The DDA seeks to give people with disabilities equal and enforceable rights and access to employment, education, property, transport and goods, facilities or services. The DDA says that service providers, employers and similar are not allowed to discriminate against disabled people by refusing to provide a service or offering a service of a lower standard or on less favourable terms, because of their disability.

The DDA applies to all healthcare providers. These include GPs, hospitals, pharmacies, health centres, paramedics, dentists and opticians.

The DDA requires service providers to make changes to their services to ensure that disabled people can make use of them. This is known as the 'duty to make reasonable adjustments'.

'Reasonable adjustments' include providing additional aids, for example loop or infrared broadcast systems and

additional or accessible information, for example, in Braille. Or additional services, for example, communication support such as a BSL/English interpreter, to enable disabled people to access a service or make it easier for them to do so. Service providers have to make adjustments required even if it means making a change to their premises or fixtures and fittings.

The practices, policies and procedures of an organisation are covered by 'reasonable adjustments'. This means that if the way you operate makes it impossible or unreasonably difficult for disabled service users to use your service, then you need to change the way you operate.

If a service provider does not make a reasonable adjustment, and it is 'impossible or unreasonably difficult' for a disabled person to use the service, then the DDA says that this is discrimination.

Making reasonable adjustments now can help your service users, and save everyone time and money that could be used for service user care. If you are a manager, you need to support healthcare staff to provide the best possible care for people who are deaf or who have a hearing loss, and people who are blind or partially sighted.

The United Nations Convention of the Rights of People with Disabilities (UNCRPD) is an international treaty that aims to ensure that the dignity, human rights and freedoms of all people with disabilities in Northern Ireland are respected, promoted and protected. It also outlines the obligations on the United Kingdom to promote, protect and ensure those rights.

The Convention explains that all disabled people have and should be able to enjoy the same human rights as other people. It sets an international benchmark for the human rights of disabled people. The areas covered by the Convention include health, education, employment, access to justice, personal security, independent living and access to information.

Government and public bodies will be expected to make decisions and deliver services which take into account the rights contained in the Convention.

For example, the Government must:

- make sure that buildings and services are accessible to disabled people - including workplaces, schools, medical facilities and transport.
- provide information intended for the general public in accessible formats and technologies such as large print, audio, Braille or sign language.

Article 25

Article 25 of the UNCRPD outlines disabled people's rights to health services including the overarching right to the enjoyment of the highest attainable standard of health without discrimination on the basis of disability.

It states that the Government and public bodies shall take all appropriate measures to ensure access for persons with disabilities to health services; in particular:

- Provide persons with disabilities with the same range, quality and standard of free or affordable health care and programmes as provided to other persons.
- Provide these health services as close as possible to people's own communities, including in rural areas.
- Require health professionals to provide care of the same quality to persons with disabilities as to others, including on the basis of free and informed consent by, inter alia, raising awareness of the human rights, dignity, autonomy and needs of persons with disabilities through training and the promulgation of ethical standards for public and private health care.
- Prohibit discrimination against persons with disabilities in the provision of health.
- Prevent discriminatory denial of health care or health service.

4 Access to the practice

Consideration of the needs of people with a sensory disability should begin before an appointment is made. In 2009 only 46% of GP practices in Northern Ireland enabled service users to make contact by email and none provided an SMS option.



Do:

- Establish an email address to enable service users to contact the practice
- Publish the email address on headed paper, voicemail messages and promotional material
- Establish internal procedures to ensure emails are regularly monitored.
- Introduce the use of SMS (texting) systems for communicating with service users
- Provide training for staff on using Text Relay
- Provide a quick guide to using Text Relay and display this in reception
- Consider establishing an online booking system which is compatible with screenreading software commonly used by people with sight loss
- Audit any online booking systems for AA compliance with the guidelines set out by the World Wide Web Consortium's Web Access Initiative or compliance with Public Access Standard 78.
- Consider including key information on your website in video format with sign language translation and subtitling
- If a textphone is available in the practice, advertise the textphone number on all promotional materials and headed paper
- Provide training for staff on using the textphone
- Provide a quick guide to using the textphone and display this in reception
- Ensure services for prescriptions or results are accessible provided by email, SMS, Text Relay or textphone
- Consider providing an 'open surgery' system to allow service users to visit without having to make an appointment.
- Allow assistance dogs, such as Hearing Dogs for the Deaf (in a scarlet coat) and Guide Dogs for the Blind (with a yellow harness) into the practice
- Ensure the premises uses colour contrasts and is well lit with clear signage.
- Ensure walkways are kept clear of any hazards.
- · Offer a computerised 'check in' system at reception.

Don't:

Use automated call direction systems for Text Relay users.



Text relay

Text Relay is a national telephone relay service, letting people who are deaf or have a hearing loss use a textphone to access any services that are available on standard telephone systems.

It operates 24 hours a day, 7 days a week.

A practice does not need any new or special equipment to use Text Relay.

The link between the service user and the practice is a highly trained Text Relay operator, who provides a discreet and confidential service.

For outgoing calls from the practice to a UK landline or UK mobile number, the call should cost you no more per minute via Text Relay than it would for a voice telephone call – although it may take longer. Because calls from a textphone can take longer, some telecommunications providers offer a refund on textphone calls.

How it works

- The service user dials 18001 followed by the full practice telephone number from their textphone
- When the call is answered by the surgery, a Text Relay operator is brought into the call
- The service user types a message from their keyboard and the operator reads it word for word to the practice staff
- The practice staff then verbally respond, and the Text Relay operator types exactly what is said so that the service user can read the conversation on their textphone display panel
- Practice staff can also use Text Relay to contact a service user by dialling 18002, followed by the service user's contact number.

Booking communication support

Booking a sign language interpreter and other support

In Northern Ireland people who are deaf or have a hearing loss use various methods of communication including speech and lip reading, but British Sign Language is the most widely used method of signed communication.

If you want to book communication support for your service users, you can ask them if they would like one of the following:

- British Sign Language/English interpreters,
- Irish Sign Language / English interpreters
- · deafblind and partially sighted interpreters
- lipspeakers
- speech-to-text reporters
- · electronic notetakers
- manual notetakers.

Communication support services are in great demand, so it's best to book with as much notice as possible. When you book, give as much information about the assignment as possible, including dates, times and the full address of the venue. It also helps if you supply some background information in advance, for example, is it a consultation, how many people are involved, how long will it last?

It is imperative that communication professionals used by healthcare providers are registered with the National Registers of Communication Professionals (NRCPD). This ensures that they are qualified to the correct standard to enable accurate communication of vital medical information.

Registration means that the communication professional:

- · meets the national occupational standards for their chosen profession
- · is held accountable to a code of conduct
- updates his or her skills through compulsory continuing professional development
- meets the annual requirement to make the "fit and proper persons declaration" of their professional integrity
- has an enhanced criminal record disclosure certificate which must be available when requested
- holds professional indemnity insurance for all the work that they carry out.

5 Information



In 2009 only one GP practice out of 99 offered information in Braille"

Do:

- Review all your information to determine if it meets the needs of people with sensory disability
- Involve service users with sensory disabilities in producing accessible information
- Provide all information about the practice in at least 14 point and meet RNIB Clear Print guidelines for written materials
- On all information, the following sentence should appear in large print, at least 20 point: "If you require this information in accessible formats e.g. Braille, large print, audio CD etc then please contact us on _______"
- Arrange to provide information in another format after the appointment, if required, and within a period of no more than three working days
- · Provide all information in clear, plain English
- Consider making information available on DVD with signed and subtitled content
- Ensure that all staff know how and where to get information produced in a range of formats
- Check that service users understand the information you have provided to them.



Without learning some deaf-specific communication skills, it can be virtually impossible for a service user to follow what is happening in their appointment. Just being aware of the possibility that the service user you are speaking to may be deaf or have a hearing or sight loss, will help to change the way you communicate with them.



Do:

- With the service user's consent, prominently record service users' communication and mobility needs on their file, both on paper and electronically.
- Provide information to staff on how to meet service users' communication or mobility needs, for instance, a current telephone number to book an interpreter, or the mechanism for ordering an audio or Braille copy of a health information leaflet.
- Establish a mechanism to pass on service users' communication or mobility needs at referral

 for instance, by including a tick box on paper referrals.
- Publicise the fact that service users who are deaf or who have a hearing loss are entitled to receive communication support.
- Actively raise awareness of communication support services.
- Make a member of staff available, if needed, to guide the service user into the waiting room and up to the reception desk.

- As well as providing an audio alert to the service user, a member of staff should approach the service user to let them know that their appointment time has arrived.
- Reception staff should identify themselves to the service user and make it clear that they are addressing them.
- When calling service users forward for their appointment, offer whatever assistance may be needed. This will include basic things such as calling a person's name and waiting for them to stand up, then offering an elbow to escort them; or tapping a person who is deaf, on the shoulder, to let them know it is their turn.
- Routinely offer to escort people with sight loss to their destination within the practice or health centre.
- At the beginning of a consultation ask any service users who are deaf, who have a hearing loss, or are blind or partially sighted whether the room is suitable for communication – for example, in terms of lighting, position of doctor in relation to the service user.



Clear communication means understanding and feeling understood." (DHSSPS 2008)

- Meeting rooms should be well
 lit and equipped with working
 loop systems. Wall décor should
 be plain. Background noise
 should be kept to a minimum.
- Check with the deaf service user and sign language interpreter that everyone is positioned in a way that ensures optimum communication.
- GPs/nurses should escort service users with sight loss back to the waiting area or to the main exit after the appointment if they require this.
- Ask service users whether, and what kind of, communication support is required.

- Have policies and procedures in place to capture these requirements and enable communication support to be booked as and when required.
- Inform staff of the contact details for the sign language agency your Trust has a contract with
- Allow extra appointment time for sign language users, as communication can be slower.
- Consider using the services of an interpreter in a 'block' booking, i.e. making appointments for service users who are deaf back to back.

Don't:

- look at the computer screen while talking to someone who has a hearing loss
- leave the room without telling the person with sight loss you are doing so.





Tips for communicating with people who are blind or partially sighted:

- Address the blind or partially sighted person directly.
 Don't speak to the person accompanying them instead.
- 2. Identify yourself and others in the room.
- 3. Describe any new area to the blind or partially sighted person. This is particularly important when a person with serious sight loss encounters a new environment, such as entering a room for the first time. (Imagine leaving a blind person at the top of a flight of stairs and not telling them about the stairs.) It is important to describe the immediate environment, particularly if it is likely to be hazardous.
- 4. They may need to know where the exits, toilets and seating are in relation to their current position.
- 5. Explain where you place items, for example, 'There is a cup of coffee in front of you, just to the right.'
- 6. Use day-to-day words and phrases. Don't worry about using phrases like "See you later" or, "Did you see Coronation Street last night?"
- 7. Tell the person when you are leaving the room.

 Remember, people with serious sight loss don't have the visual cue of seeing someone leaving. It's also very important that they're not left standing around waiting after you've gone. You'll also need to let them know when you have re-entered the room.



Tips for communicating with people who are deaf or who have a hearing loss:

- 1. Don't be afraid to ask the deaf person how they would prefer you to communicate.
- 2. Find a suitable place to talk, with good lighting, away from noise and distractions.
- 3. Make sure you have the listener's attention before you start speaking.
- 4. Remember not to turn your face away from someone who's deaf. Always turn back to your listener so they can see your face.
- 5. Even if someone is wearing a hearing aid, it doesn't mean that they can hear you easily.
- 6. Speak clearly but not too slowly, and don't exaggerate your lip movements. Use natural facial expressions and gestures.
- 7. If someone doesn't understand what you've said, don't just keep repeating it. Try saying it in a different way.
- 8. The room should be well lit without having too much light behind you.
- 9. Keep a pen and paper handy in case you need to write anything down. Remember to write clearly and legibly.
- 10. Use plain language and don't waffle. Avoid jargon and unfamiliar abbreviations.

7 Training

Half of all staff in local GP practices have not had any training in dealing with people who are deaf and/or blind and partially sighted"

Do:

- Provide all reception staff with deaf awareness training
- Consider training for staff in tailored, work- related, basic British or Irish Sign Language
- Provide all reception staff with accredited visual awareness and guiding training
- Consider using a disabled person to deliver awareness training, as is best practice
- Nominate at least one team member to be responsible for this element of service user care throughout the practice
- Provide training to all staff on how to use Text Relay
- Provide training on the use of induction loop systems
- Include training on how to manage the evacuation of deaf and /or blind and partially sighted people as part of emergency evacuation training
- Provide this training as part of induction training and on a rolling basis as part of ongoing staff training.



3 Equipment and technology

Less than a third of GP practices had installed a flashing smoke alarm for deaf service users. This could have very serious consequences in the event of a fire.

Do:

- Install an induction loop system in reception areas. This can either be a permanent fixture or a portable loop system.
- Install an induction loop in all consultation rooms.
 If this is not possible, one or two dedicated rooms should be fitted with a loop and hearing aid users should have their appointments in that room
- Check the induction loop is regularly maintained
- Ensure staff know how to use the induction loop
- Display a sign advertising the existence of the loop system in a place clearly visible to service users.
- If a textphone is available in the practice, provide training for staff on using the textphone
- Provide a quick guide to using the textphone and display this in reception
- Provide a touch screen system to enable service users to check in for their appointment
- Install a combined visual and audio board to alert service users to their appointment
- Install a flashing smoke alarm in all areas which could be used by a person with hearing loss
- Ensure any television provided in the waiting room has subtitles enabled and switched on.







9

Policies and procedures

It is vital that the needs of people who are deaf, have a hearing loss or are blind or partially sighted, are taken into account when writing policies and procedures – this ensures 'foresight not afterthought' is applied to access.

Do:

- Carry out a disability access audit across all aspects of the practice
- Establish a procedure to ensure incoming emails are regularly monitored and responded to in a reasonable time
- Establish procedures to book communication support such as BSL interpreters, lipspeakers or notetakers
- Have a protocol in place to undertake an ID check to ensure that communication professionals are registered with NRCPD
- Ensure that emergency procedures include helping to evacuate a person with sight loss or hearing loss from the building.
- Make complaints procedures fully accessible to people who are deaf, or who have a hearing loss, or are blind or partially sighted and promote them as such.



10 Example of best practice

The Hunter Family Practice, Craigavon

The Hunter Family Practice in Craigavon has undertaken significant work in recent years to ensure its services are fully accessible to people with hearing loss, sight loss and learning disabilities. It has been awarded the Action on Hearing Loss chartermark, Louder than Words®, and Management in Practice Awards for Customer Care and Innovation in Training. The changes to practice and procedures and the resulting improvement in access for deaf and blind and partially sighted people, have been led by the Practice Manager, Lorraine Hughes, who has received full support and encouragement from the practice owners, the Hunter family.

Specific examples of best practice include:

- All staff in the practice have received training in deaf awareness, visual awareness, Introduction to Signing (BSL), use of Text Relay and the textphone and RNIB Guiding training. Two staff have also gained Level 1 qualifications in British Sign Language.
- Update training takes place annually for all clinical and admin staff
- The practice purchased a mobile phone for those who prefer to text the
 practice and wrote to all deaf service users to promote the dedicated mobile
 phone number. The phone is kept at reception and staff check regularly for
 messages and use the phone to contact service users when necessary
- The practice has improved their record-keeping, including collating a register of all their service users who are deaf, have a hearing loss, are blind or partially sighted
- Electronic service user records have been amended to include a 'pop up' alert to make staff aware of any sensory disability needs.
- All literature in the practice has been provided in clear, plain English and in easy-to-read type
- The Practice Manager has completed a 'Plain English' course by the Plain English Campaign
- Policies and procedures include a 'Deaf/hard of hearing service user policy', a protocol for referral of deaf service users to the treatment room, a protocol for the booking a BSL interpreter or other language service, a protocol for induction loop testing, a protocol for home visits and a protocol for evacuation in an emergency.

- Staff have been provided with an information pack which provides support and resources and is useful for staff induction. The pack includes the finger spelling alphabet, communication tips, policies/ protocols, useful telephone numbers, instructions on using Text Relay/textphone, and Action on Hearing Loss resources
- RNIB Visual Awareness Training is given. Participants receive an information pack including notes on communication and guiding techniques
- Visual Awareness Training from the Southern Trust Sensory Disability team,
 who provided information packs for reception and treatment room staff
- The practice has established a relationship with Queen Alexandra College to arrange for documents to be converted into Braille, large print or audio quickly
- Induction loops have been fitted in all consulting rooms and reception areas
- A portable induction loop is available for house calls
- A visual and audio service user call system has been installed in the waiting room.
- A protocol has been established where the receptionist or GP will go to the waiting room to offer assistance when a service user with visual problems is called
- A digital television with subtitles enabled has been installed in the waiting room
- · Flashing lights linked to the fire alarm have been installed throughout the Health Centre
- · Clear evacuation plans are prominently displayed in the Health Centre
- These changes were communicated to service users by letter and all deaf and blind and partially sighted service users were surveyed to ensure access arrangements were appropriate and useful.





When I had an appointment with Dr Raymond he used sign language and I felt brilliant and pleased with him"

"I have very low vision and I loved that my doctors took the trouble to find out how best to help me when I come to the surgery"

"Dr Denise showed me the loop system. I am proud of this service. Please keep it up"

"All staff are very helpful when I come to the surgery. A receptionist or sometimes even my doctor comes to the waiting room for me when it is my turn"

"I have used Text Relay to order prescriptions and staff are very patient. Good service"

"I love the display in the waiting room and the poster to let deaf people know to ask for communication support"

"Everyone seems to know that I might need some extra help when I come to the doctor's and I really appreciate it"

Staff in the practice have also benefitted from the changes, feeling enthused and motivated and reporting an increase in job satisfaction as a result. Team working has improved, and staff have enjoyed raising awareness of their improved communications and receiving very positive feedback from service users. Changes to the practice have been possible through the use of prescribing savings, and training has been provided through regular Protected Practice Learning sessions.

A tour of the practice and the changes made is available here: www.actiononhearingloss.org.uk/Hunterpractice

Hearing loss and deafness

Action on Hearing Loss NI

Harvester House, 4-8 Adelaide St, Belfast, BT2 8GA

Tel: **028 9023 9619** Textphone: **028 9024 9462**

Email: information.nireland@hearingloss.org.uk

Web: www.actiononhearingloss.org.uk

Action on Hearing Loss is the charity working for a world where hearing loss, deafness and tinnitus don't limit or label people, and where people value their hearing. If you need to book communication support for service users please contact **028 9033 1320** or email **csubelfast@hearingloss.org.uk**

If you need equipment, such as induction loops, you can find our huge range of products here: www.actiononhearingloss.org.uk/shop

If you need a technician to install your equipment, further information is available at: www.actiononhearingloss.org.uk/productinstallation

Action on Hearing Loss provides a consultation service and best practice charter mark, Louder Than Words®, to help you become fully accessible to people with a hearing loss. More information is available here:

www.actiononhearingloss.org.uk/louder-than-words

British Deaf Association Northern Ireland (BDA NI)

Unit 5C, Weavers Court, Linfield Road, Belfast BT12 5GH

Tel: 02890 437480
Email: bda@bda.org.uk
Web: www.bda.org.uk

The BDA's mission is to ensure a world in which the language, culture, community, diversity and heritage of Deaf people in the UK is respected and fully protected, ensuring that Deaf people can participate and contribute as equal and valued citizens in the wider society. BDA will achieve this through Community Advocacy Work, Community Development projects, Policy and Campaigns work including the BSL Charter and consultations.

Hands That Talk

116 Main Street, Dungiven, Co. Londonderry BT47 4LG

Tel: **028 7774 2776** Textphone: **079 1221 0803**

Email: info@handsthattalk.co.uk
Web: www.handsthattalk.co.uk

Hands That Talk is committed to improving the lives of the Deaf community and provide a range of services and opportunities.

If you need to book communication support for service users please contact us via the contact details above. We currently hold a contract for the Western Health and Social Care Trust and also operate an emergency communication support service for patients living in the Western Trust area. To book communication support for emergency purposes please contact us on 079 1221 0803.

The Northern Ireland Deaf Youth Association (NIDYA)

Office 16, Townsend Enterprise Park, 28 Townsend Street, Belfast BT13 2ES

Web: www.nidya.org
Email: info@nidya.org

NIDYA is a deaf youth organisation delivering support for deaf children and young people. They offer a weekly Children's Club for deaf children aged 4-11 and a Youth Club for deaf young people aged 12 to 17, delivered in different regions across Northern Ireland. The clubs enable deaf children and young people to fulfil their potential and pursue new opportunities. Social get-togethers are organised for deaf teenagers living across the province once a month in Belfast. Personal development and sign language sessions are also offered to deaf teenagers. Volunteering opportunities at NIDYA are on offer for anyone aged 16 upwards.

The National Deaf Children's Society

38-42 Hill Street, Belfast, BT1 2LB

Tel: 028 9031 3170 (v)
Fax: 028 9027 8205
Textphone: 028 9027 8177
Website: www.ndcs.org.uk

Further sources of information, guidance and support

Hearing Link Northern Ireland

23 Enterprise House, Lisburn Enterprise Centre, Lisburn BT28 2BP

Tel/SMS: **07534 563 451**

Email: northernireland@hearinglink.org

Helpdesk: enquiries@hearinglink.org

Website: www.hearinglink.org

Hearing Link is a UK charity that provides information and support to people with hearing loss, their family and friends and focuses on those who communicate by listening, lipreading and text-transcription. Hearing Link is a friendly and knowledgeable organisation and a great point of contact for anyone who is adjusting to hearing loss or managing the challenges that it can bring. Hearing Link is now offering specialised rehabilitation and self-management programmes in Northern Ireland. Information on these programmes is available via the contact details above.

Deafblind UK

Norman McCudden

Tel: **07950 033648**

Email: norman.mccudden@deafblind.org.uk

Deafblind UK Connections NI project is working with older people who suffer from a dual sensory impairment, i.e. a level of hearing loss and a level of sight loss, to provide peer support and befriending. Peer Support Groups are planned for Belfast, Newtownabbey, Antrim, Armagh, Downpatrick and Newry. The volunteer befriending service aims to reduce social isolation and loneliness experienced by people with dual sensory loss. People will be matched with a volunteer who will offer befriending services, in the person's own home or other convenient location, by telephone, or by email. Deafblind NI will also be introducing its members to the benefits of new digital technology to assist them with their day-to-day activities and needs. Connections NI accepts referrals via Social Services teams, other organisations working in the voluntary sector and directly from individuals, their friends and family.

Sight loss and blindness

RNIB NI (Head Office)

Victoria House, 15-17 Gloucester Street, Belfast BT1 4LS

Tel: **028 9032 9373**Email: **rnibni@rnib.org.uk**

Web: www.rnib.org.uk/northernireland

Our Pledge: To support blind and partially sighted people to live independently and to campaign for their full inclusion in society.

The Royal National Institute of Blind people is a registered charity and we have three clear priorities:

- 1. Stopping people losing their sight unnecessarily
- 2. Supporting blind and partially sighted people to live independently
- 3. Creating an inclusive society

RNIB provides advice on accessibility and awards service providers who meet its accessibility standards through its excellence programme. Information on this programme is available from RNIB Northern Ireland.

Guide Dogs Northern Ireland

Fiona Brown NI Manager

Tel: **0845 3727402**

fiona.brown@guidedogs.org.uk

Angel Eyes NI

Maxine Maugher - Chairperson

Tel: **07582 719429** mmauger@angeleyesni.org

SENSE

Colette Gray - Head of Services NI

Tel: 028 9083 3430 colette.gray@sense.org.uk

Albinism Fellowship

Rosaleen Dempsey

Tel: **028 90 329373**

rosaleen.dempsey@rnib.org.uk

RP Fighting Blindness

Mrs Marion McCabe
Tel: 028 38 339217
marion@rmcc.co.uk

Macular Society

Michelle Dutton - Group Support & Development Manager North

Tel: **0161 491 6081**

michelle.d@macularsociety.org

Text Relay www.textrelay.org/files/Typetalkleafletv7.pdf

www.allformats.org.uk **Alternative formats** Equality Commission www.equalityni.org

DDA www.equalityni.org/archive/pdf/ServProvFin.pdf

www.equalityni.org/archive/pdf/UNCRPDShortGuideF.pdf UNCRPD

Our Health in Your Hands

A campaign has been launched for the Deaf community to raise awareness of their right under law to have a qualified interpreter in a healthcare setting and how to make a complaint. www.ohyh.org.uk

Health and Social Care Trust Sensory Support Services

Belfast Health and Social Care Trust – BHSCT

Sensory Support Service

2nd Floor, The Bradbury Centre, 1-17 Lisburn Road, Belfast BT9 7AA

Tel: 028 9504 0200 Fax: 028 9091 2196 028 9091 2197 Textphone:

Sensorysupport@belfasttrust.hscni.net Email:

07738 883 116 (Text Message Only) Mobile:

Northern Health and Social Care Trust - NHSCT

All Referrals Telephone 0845 600 3111

Triangle, Ballymoney and Moyle,

Rathlea House, Mountfern Complex, Coleraine BT521JL

Antrim and Ballymena

Wilson House, 17 Raceview Road, Broughshane BT42 4JL

East Antrim – Covering Larne, Ballyclare, Carrickfergus and Newtonabbey The Beeches, 76 Avondale Drive, Ballyclare BT39 9EB

Mid Ulster – Covering Cookstown and Magherafelt Townlands Magherafelt CSC, 60 Hospital Road, Magherafelt BT45 5EX

Southern Health and Social Care Trust - SHSCT

The team covering Craigavon and Banbridge, South Down and East of the

Newry canal are based at:

Cherrytrees Resource Centre 1A Edenderry Gardens, Gilford Road,

Portadown BT63 5EA

Tel: 028 3839 4088 Fax: 028 3839 4095 028 3839 4738 Textphone: Mobile: 078 3492 9124

The team covering Armagh and Dungannon, South Armagh and West of the Newry canal is based at:

Sensory Disability Team Jackson Hall, Main Building, St Luke's Hospital, Loughgall Road, Armagh BT61 7NQ

Tel: 028 3741 2364 Fax: 028 3741 2087 Textphone: 028 3741 2421 Mobile: 079 1910 3501

Down Sector:

Telephone:

Textphone:

Mobile:

South Eastern Health and Social Care Trust – SEHSCT

North Down and Ards Sector:

Tel:

028 9151 0136

Mobile: Textphone: 0289151 0137

07734 282 646 Lisburn Sector:

> Tel: 028 9260 7746 Mobile: 07739 879 554 Textphone: 028 9260 3120

0284461 6915

07739 879 556

028 4461 4744

Western Health and Social Care Trust – WHSCT

Northern Sector: covering Derry/ Londonderry, Limavady, Dungiven

and Strabane areas

Sensory Support Services Old Bridge House, Glendermott Road Londonderry BT47 6AU

Tel: 028 7132 0167 Textphone: 028 7132 0166

E: gloria.mcdaid@westerntrust.hscni.net

Southern Sector: covering Omagh council area, Castlederg area, Enniskillen and Fermanagh

Sensory Support Service Drumcoo Centre, Drumcoo, Enniskillen,

Co. Fermanagh BT 74 6AY

Tel: 028 6632 4400 SMS: 077 9565 0125

E: martina.dempster@western.hscni.net

For Out of Hours Regional 028 9504 9999 Tel: **Emergency Social Work Service:** Text: 077 9986 7698





supporting blind and partially sighted people

ACTION ON HEARING

Northern Ireland