

Shaping the future of deaf mental health

Recommendations

Overarching recommendations

Some of the recommendations found through this project are sector specific, but the eight highlighted below must be implemented at a more systemic level in order for deaf mental health provision to achieve the attention and influence necessary to address the inequalities in services and patient experience.

Immediate

- 1 A strategic/policy lead in NHS England with responsibility for deaf mental health.
- 2 The Clinical Reference Group to be redesignated as a Lead and Inform CRG.
- 3 For colleagues within Public Health to be commissioned to do a needs assessment looking at the demographic and epidemiological evidence of need and demand for an all age full pathway specialist mental health service for deaf people on a regional footprint
- 4 Integrated Care Boards to action the recommendations made to them by NHS England on the commissioning of BSL Interpreting and the involvement of deaf people in the development of services (see report appendix).

Medium Term

- 1 Mandatory deaf experience/cultural awareness and Accessible Information Standard (AIS) training for under- and post grad training for all medical, nursing and Allied Health Professionals and to be included as part of trust inductions.
- 2 To ensure NHS providers comply with the AIS, including, for example, ensuring an alert pops up when booking appointments that a BSL Interpreter is needed to make the appointment accessible and that this is booked prior to the appointment.
- 3 For the NHS Workforce Plan to include a focus on deaf staff to enable accessible and supported training and development opportunities.

- 4 To identify national research priorities within deaf mental health and support teams to develop research capability across the university and health sector.

National Deaf CAMHS

- 1 For a website to be developed bringing all the service information together with a wide range of resources to build understanding and resilience around mental health, information about self-help and positive strategies for both deaf children, young people and parents (hearing and deaf).

- 2 National Deaf CAMHS has had no uplift in funding since it was set up. This should be rectified given the increase in demand and activity over the years.

- 3 For the agreed proposal around provision for young people aged 18 – 25 to be funded and set up.

- 4 Working alongside social care there is a need to map out specialist community residential placement options for deaf young people and scope the need for more provision.

Specialised mental health services for deaf adults

- 1 Commitment to the development of a regionally based specialist mental health hub for deaf people which provides equitable care across the country. For this service to include neuro-developmental and neuro-psychological assessments for deaf people alongside mental health.

- 2 Ensure access to mental health crisis teams through text, email, and video relay, and provide training to staff to ensure they recognise the specific needs of deaf people.

- 3 Ensure that more deaf-led community services are commissioned so that deaf people who are ready to leave secure services can be discharged and supported to live independent lives.

Deaf forensic mental health services

- 1 Provision of specialist deaf forensic mental health services and accommodation

- 2 Deaf prison in-reach available to all deaf prisoners

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A coordinated, collaborative pathway for deaf patients (including women) in forensic services with specialist commissioners who have knowledge of deaf forensic mental health and specialist assessments by experts in deaf forensic mental health.