



## A Briefing Note for GPs and Primary Care Practitioners

### Mental Health, Deafness and Hearing Loss

#### Key hearing loss stats:

- There are 534,000 people in Wales with some form of hearing loss—one in six of the population. By 2031, this will grow to 725,000.
- More than 44,500 people in Wales are severely or profoundly deaf.
- More than 70% of over 70 year olds and 40% of over 50 year olds have some form of hearing loss.
- About one in ten adults have mild tinnitus and up to 1% have tinnitus that affects their quality of life.

#### Hearing loss and mental health

People with hearing loss are at an increased risk of mental health problems including anxiety, depression and poor self-esteem.

This may be due to a number of different factors including:

- a bereavement reaction in relation to their hearing loss diagnosis which can lead to denial.
- not taking action with their hearing loss—those with an uncorrected hearing loss (they do not wear hearing aids) have poorer quality of life measures and higher levels of depression.
- difficulties in communicating, leading to isolation and exclusion.
- the barriers that deaf people experience in their daily lives, in education, in employment, and in the community form a negative impact on an individual's mental health. This is particularly important amongst older people, where 70% of people aged 70 and over are likely to have hearing loss. It is therefore vital that people with possible hearing loss are referred to their local audiology department or hearing aid services as soon as possible.

#### Communication tips:

Communicating with someone who is deaf does not have to be difficult. But you do need to be patient and take the time to make sure you are communicating properly. These are some of the simple things you can do to make communication straightforward for both of you:

- even if someone is wearing hearing aids it does not mean they can hear you perfectly. Ask how you can best communicate with them.
- get the listener's attention before you start speaking, maybe by waving or tapping them on the arm.
- find a suitable place to talk, with good lighting and away from noise and distractions.
- speak clearly but not too slowly, and do not exaggerate your lip movements – this can make it harder to lip-read.
- use natural facial expressions and gestures.
- do not shout; it can be uncomfortable for hearing aid users and it looks aggressive.
- if someone does not understand what you have said, do not keep repeating it. Try saying it in a different way instead.
- check that the person you are talking to is following you during the conversation. Use plain language and do not waffle. Avoid jargon and unfamiliar abbreviations.
- to make it easy to lip-read, do not cover your mouth with your hands or clothing.
- if you are talking to a group that includes deaf and hearing people, do not just focus on the hearing people.
- make sure you have face-to-face contact with the person you are talking to.
- if you are using communication support, always remember to talk directly to the person you are communicating with, not the interpreter.

## Accessing mental health services

People with hearing loss can face problems when accessing mental health services.

Action on Hearing Loss' previous research found the following:

- 35% experienced difficulty communicating with their GP or practice nurse.
- 15% said they avoid going to see their GP because of communication problems; this proportion doubles among British Sign Language (BSL) users.
- 35% of deaf and hard of hearing people had been left unclear about their condition because of communication problems with their GP or practice nurse.
- 24% of patients had missed appointments because of poor communication, such as not being able to hear staff calling their name.

This raises the issue of how mental health problems are detected, especially at an early stage, and how deaf people are referred to appropriate mental health services.

Mental health services can be made more accessible to people with hearing loss through various means, including:

1

**Patient records** - Patients with hearing loss should be asked for details about their preferred method of communication support when they first join a new GP or healthcare service.

A 'flagging' system on patients' computer records should then allow healthcare workers to understand any specific needs the patient may have when they visit a service. This information should be transferred as part of onward referrals to secondary care.

Patients should not have to keep repeating that they have a hearing loss, or the communication support they require.

2

**Communication support** - Procedures should be in place to meet the individual communication support needs of patients, including booking a suitable communication professional. This could be a Sign Language Interpreter or Lipspeaker, for example.

For information on types of communication professionals and how they can best support communication with your patients visit:

[www.actiononhearingloss.org.uk/  
communication](http://www.actiononhearingloss.org.uk/communication)

3

**Range of contact methods** - People with hearing loss should be able to make an appointment through a variety of contact methods such as email, text messaging and textphones. Reception staff should be trained in Text Relay, the telephone relay service.

Telephone systems should be designed with Text Relay users in mind, as automated responses take time to relay, which can disadvantage patients calling between fixed times to secure same-day appointments. A textphone number for people with hearing loss could be offered.

Another solution to make appointment systems more accessible would be to establish an email address to enable patients to contact the practice, and internal procedures to ensure this is regularly monitored, particularly to ensure that this can be used to secure same day appointments.

In the longer term, healthcare services should explore the use of an online appointment booking system, and the use of SMS (texting) systems for two way communication with patients with hearing loss.

These options must be advertised to patients.

WaMH in PC is working to improve primary care mental health by nurturing:  
**trust • good communication • person centredness**

WaMH in PC

Wales Mental Health in Primary Care

T: 029 2050 4516 F: 029 2050 4300 E: wamhinpc@rcgp.org.uk www.wamhinpc.org.uk

**4 Deaf awareness** - All frontline staff, including receptionists, nurses, GPs, doctors, health visitors and pharmacists should be trained in how to communicate effectively with someone with hearing loss. This applies in particular to staff based on inpatient wards with significant numbers of older patients.

Training should be provided as part of the staff induction programme, and refreshed on a regular basis. Where possible, training should be delivered by a person who is deaf or hard of hearing.

**5 Working loop systems** - As a minimum standard, receptions and consultation areas should be fitted with an induction loop, allowing hearing aid users to make full use of their hearing aids in a potentially noisy setting.

Staff should be capable of checking that loops are functioning, and know how to use them.

**6 Calling people for an appointment** - When patients with hearing loss arrive at a healthcare setting, there should be arrangements in place to ensure that they do not miss their appointment. A member of the reception team, for example, could personally alert someone when the practitioner is ready to see them.

**7 Visual displays** - Visual displays can help to ensure that patients with hearing loss, and other patients, can clearly see when they are being called for appointments.

They are not always appropriate however as people have to watch them continuously.

Alert systems are helpful as they let patients know each time a new name appears on the screen.

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Ariennir yn Rhannol gan  
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**Welsh Government**

## Useful contacts:

### **North Wales Deaf Mental Health Network:**

*A new specialist mental health service within  
Betsi Cadwaladr University Health Board.*

For professionals please call:

**01352 750252**

and make it clear it is for deaf mental health network

**Email: [bcu.deafmh@wales.nhs.uk](mailto:bcu.deafmh@wales.nhs.uk)**

### **Action on Hearing Loss Cymru:**

*Information, care and support services*

**02920 333034**

**Email: [wales@hearingloss.org.uk](mailto:wales@hearingloss.org.uk)**

### **To book Communication Support:**

**01792 324477**

**Email: [csuneath@hearingloss.org.uk](mailto:csuneath@hearingloss.org.uk)**

### **National Deaf Children's Society Cymru**

**02920 373474**

**Email: [ndcswales@ndcs.org.uk](mailto:ndcswales@ndcs.org.uk)**

### **Wales Council for Deaf People**

**01443 485687**

**Email: [mail@wcdeaf.org.uk](mailto:mail@wcdeaf.org.uk)**

### **North Wales Deaf Association**

**01492 563470**

**Email: [info@deafassociation.co.uk](mailto:info@deafassociation.co.uk)**

### **British Deaf Association Wales**

**Email: [bda@bda.org.uk](mailto:bda@bda.org.uk)**

### **British Society for Mental Health and Deafness**

**Email: [info@bsmhd.org.uk](mailto:info@bsmhd.org.uk)**

### **GP further advice:**

Action on Hearing Loss' advice for GPs on working with people who are deaf and hard of hearing:

[http://www.actionhearingloss.org.uk/  
supporting-you/gp-support.aspx](http://www.actionhearingloss.org.uk/supporting-you/gp-support.aspx)