

OFFICIAL - SENSITIVE: Operational
NHS Greater Glasgow and Clyde
Equality Impact Assessment Tool

Equality Impact Assessment is a legal requirement as set out in the Equality Act (2010) and the Equality Act 2010 (Specific Duties)(Scotland) regulations 2012 and may be used as evidence for cases referred for further investigation for compliance issues. Evidence returned should also align to Specific Outcomes as stated in your local Equality Outcomes Report. Please note that prior to starting an EQIA all Lead Reviewers are required to attend a Lead Reviewer training session or arrange to meet with a member of the Equality and Human Rights Team to discuss the process. Please contact Equality@ggc.scot.nhs.uk for further details or call 0141 2014560.

Name of Policy/Service Review/Service Development/Service Redesign/New Service:

Review of Sign Language Glasgow wide Interpreting Services (SLIS)

Is this a: Current Service Service Development Service Redesign New Service New Policy Policy Review

Description of the service & rationale for selection for EQIA: (Please state if this is part of a Board-wide service or is locally driven).

The SLIS service has been based in the Centre for Sensory Impairment (CSIP) building, Gullane Street in Partick since circa 1998. Prior to this, they worked from Morrison Street offices. This service was established as a result of a review of social work services undertaken in 1988 for deaf citizens of Glasgow. Notably, Deaf clients have a right to have their communication needs met under various pieces of legislation, such as The BSL Act of 2015. The impact of above legislation requires local authorities to provide accessible services for the deaf community. There is a [Scottish Government British Sign Language \(BSL\) National Plan 2017-2023](#), and each Local Authority must provide a [local action plan](#).

An external review was undertaken of the efficacy of the SLIS service as it currently stands to investigate positives and negatives of different models of delivery. Following the review it is proposed to retain 4.0 SLIs who will service internal referrals only from Glasgow City Council and Glasgow Citizens. In effect, this equates to 140 hours interpreting services weekly and 560 4 weekly. The service will focus on business such as Adult and Child Support & Protection, Welfare Rights issues, Education, Human Resources/Union issues. This service will be focussed and responsive, ensuring efficiency and prevent underemployment of SLIS. External Sign Language interpreters can be listed within our procurement framework to meet demand at times of unusually high absences/leave etc to ensure no unmet need.

The purpose of this review is to determine the efficacy of the SLIS service as it currently stands and to investigate positives and negatives of different models of service delivery. Glasgow City Council has a legal responsibility to ensure the citizens of Glasgow have access to sign language interpreting support and this review will look at options and determine the service that will best meets these needs in the most cost-effective manner. To this end, Social Work have commissioned an external review of SLIS (see appendix 1).

Union and staff have been consulted upon at several junctures during this review process, including external review. Deaf BSL users have been consulted at several junctures during the review process and engagement sessions will continue throughout. Below is an example of

OFFICIAL - SENSITIVE: Operational

efforts made to communicate with BSL users.

Zoom consultation undertaken on 15th March 2022 to consult on the ongoing review of SLIS. Approximately 7 BSL users and 2 BDA employees attended.

Face to face consultation took place in Queens Park Deaf Club on 10th March 2022. There were approximately 15 BSL users in attendance and 2 BDA employees attended. This was organised, facilitated, and chaired by the British Deaf Association (BDA) with support with note taking from Social Works Business Development Team.

The SLIS team sits alongside our sensory support team (SST) who also provide a city-wide service, but to people who have either hearing/sight loss or both. There are two staff in the sensory support team who are trained in BSL and can provide limited communication services but use SLIS team to interpret in more complex situations, such as Adult Protection/ Child Protection procedures.

Statistics

The 2022 census notes that one in six people in Glasgow are deaf or suffer from some form of hearing loss, which equates to 24% per 10000.00 of the population. British Sign Language (BSL) is the most common interpreting language, with 12500 users in Scotland. The SLIS team currently provides a citywide service to Glasgow City Council, Education, other Local Authorities, and other organisations, to facilitate communication for deaf people who use British Sign Language. SLIS operates a charging policy to all external agencies who use the service. Our charges are significantly lower than that of other providers of sign language interpreting services. If the service was to remain as is, then the charging policy will need to be reviewed.

SLIS Staffing

The primary role of the SLI is to facilitate communication for a BSL user in a variety of forums and to ensure their communication needs are met in accordance with the legislation mentioned above. This functional role, combined with managing the significant adjustments of staff, means there is a lot of downtime for staff and an uneven distribution of work.

The plan will be to retain 4wte sign language interpreting staff in the new service and expand their role to that of a social care worker in order that they can offer a broader service to people who access the team. This will address the current underutilisation of staff within the team. Due to the current level of staffing there is no redeployment required.

The table below is an analysis of the actual hours worked by SLIs over a three-month period and over two consecutive years. The figures clearly indicate that there is more than enough hourly capacity to meet service demands with 4 FTE staff, with additional hours left to cover absences/leave/training etc. Travel time is factored in where this has been recorded by workers as has duty, again where this has been

OFFICIAL - SENSITIVE: Operational

recorded by workers.

	Apr-22	May-22	Jun-22
Social Work	198	222	197
Education	0	0	0
Other	154.3	257	165
Total hrs per month booked	352.3	479	362
Weekly avg hrs booked	88	120	91
	Apr-23	May-23	Jun-23
Social Work	130	177	217
Education	3	7	23
Other	114	167	143
Total hrs per month booked	247	351	383
Weekly avg hrs booked	62	88	96

SST Staffing

It is proposed that revised establishment within the service is 4.0 FTE. The current staffing within the SLIS Team consists of 4 Sign Language and Interpreters equating to 3.27 FTE.

The recommendation from the review is that the service establishment is reduced to 4 FTE to provide a service only to GGC and that the SLIS and Sensory Impairment Teams merge. As such, the demand for interpretation will reduce and it proposed that the SLIS Team establishment reduces to 4 FTE.

The SLIS team will then be amalgamated with the wider Sensory Impairment Team which consists of 11.49 FTE. This will allow employees to work as one team, sharing knowledge, resource and expertise that will allow for a more cohesive, productive, and consistent approach to service delivery for the deaf citizens of Glasgow. A revised job description will be developed in order that Sign Language Interpreters can undertake additional Social Care worker tasks. A program of induction, training and shadowing will be developed to support the implementation.

The current team has reduced to 3.27 FTE by natural attrition. As such, there is no current requirement to reduce the number of Sign Language Interpreters.

The Trade Union are aware of the on-going review of the SLIS and a copy of the IJB paper will be shared with Trade Union in advance of the meeting. Proposals agreed by the IJB will be subject to formal consultation with Trade Unions.

Proposed Option

We propose amalgamating SST and SLIS Team SLIs and SCWs are all employed at grade 6 level. Currently, SLIS is a standalone service, which co-locates with SST. The plan is that the SLIS and SST staff will work as one team, sharing knowledge, resource and expertise that will allow for a more cohesive, productive, and consistent approach to service delivery for the deaf citizens of Glasgow. There will be no loss to individual BSL users within Glasgow City as they will continue to access SLIS as they currently do. Those with ACCESS to work needs can use interpreters from the Scottish Register of Language Professionals with Deaf Community, as can surrounding Local Authorities (see external review) and NHSGGC have access to their own sign interpreting processes.

The plan will be to retain the 4.0 SLIs who will service internal referrals only from Glasgow Council Family. They will focus on business such as Adult/Child Protection, Welfare Rights issues, Education and Human Resources/Union issues (not exhaustive). This service will be focussed and responsive, ensuring efficiency and prevent underemployment of SLIs. To ensure that there will be no gaps in provision, our procurement framework will include an option to access external SL interpreters to meet any unexpected demand.

There is potential for equality impacts related to the workforce profile. If this proposal is approved, there will be normal continued consultation with Unions as proposals are developed and implemented. Any appropriate workplace supports for any changes in roles or responsibilities will be identified and given further consideration where required.

Budget Implications

The cost for the current SLIS team equates to £326,659.30

The cost for the proposed streamlined services equates to £ 199544. 12 for 4 grade 6 SLIs. TL, 0.5 post costs £36184.00. Together this equates to £235,728.12. Savings of £90931.18.

Governance

If deemed necessary, an eligibility protocol will be devised and implemented.

Who is the lead reviewer and when did they attend Lead reviewer Training? (Please note the lead reviewer must be someone in a position to authorise any actions identified as a result of the EQIA)

Name: Theresa Gordon.	Date of Lead Reviewer Training: No EQIA training
-----------------------	--

OFFICIAL - SENSITIVE: Operational

--	--

Please list the staff involved in carrying out this EQIA

(Where non-NHS staff are involved e.g. third sector reps or patients, please record their organisation or reason for inclusion):

Janet Hayes
 External review undertaken by Ashbrook Research Consultancy in May 2023.
 Zoom consultation undertaken on 15th March 2022 to consult on the ongoing review of SLIS. Approximately 7 BSL users and 2 BDA employees attended.
 Face to face consultation took place in Queens Park Deaf Club on 10th March 2022. There were approximately 15 BSL users in attendance and 2 BDA employees attended. This was organised, facilitated, and chaired by the British Deaf Association (BDA) with support with note taking from Social Works Business Development Team.

		<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
1.	What equalities information is routinely collected from people currently using the service or affected by the policy? If this is a new service proposal what data do you have on proposed service user groups. Please note any barriers to collecting this data in your submitted evidence and an explanation for any protected characteristic data omitted.	<i>A sexual health service collects service user data covering all 9 protected characteristics to enable them to monitor patterns of use.</i>	<ol style="list-style-type: none"> 1. Specific interpreting requirements. 2. Disability 3. Religion 4. Cultural 5. Risk 6. Age 7. Any other information deemed relevant to the interpretation process. 	This specific information is mostly collected via a telephone conversation and recorded on paper to ensure individuals interpreting needs are met. Our IT system does not have the facility to record this type of information. Generally, most of these individuals will be recorded on Social Work case notes as they are likely to receive interventions from the sensory support team and most of this

OFFICIAL - SENSITIVE: Operational

				<p>information is likely to be recorded there. Some people do not want their personal information held on social work records. For example, advise they only need assistance with correspondence and do not view this as a social issue.</p>
	<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required	
<p>2.</p>	<p>Please provide details of how data captured has been/will be used to inform policy content or service design.</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p><i>A physical activity programme for people with long term conditions reviewed service user data and found very low uptake by BME (Black and Minority Ethnic) people. Engagement activity found promotional material for the interventions was not representative. As a result an adapted range of materials were introduced with ongoing monitoring of uptake. (Due regard promoting equality of opportunity)</i></p>	<p>The information collated ensures that the interpreter can be prepared for the appointment. This ensures that the BSL user is not discriminated against due to their hearing loss and are treated in an equitable manner</p> <p>Preparation time is generally always given to allow interpreters to familiarise themselves, with for example, religious services. At time of referral information is sought for example if any cultural requirements need to be factored into the process.</p>	

OFFICIAL - SENSITIVE: Operational

	<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
<p>3. How have you applied learning from research evidence about the experience of equality groups to the service or Policy?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p><i>Looked after and accommodated care services reviewed a range of research evidence to help promote a more inclusive care environment. Research suggested that young LGBT+ people had a disproportionately difficult time through exposure to bullying and harassment. As a result staff were trained in LGBT+ issues and were more confident in asking related questions to young people. (Due regard to removing discrimination, harassment and victimisation and fostering good relations).</i></p>	<p>The interpreting process is functional and is there to ensure people with hearing loss are not discriminated against, marginalised and are treated in an equal manner in relation to hearing people. Interpreters are given time to enhance their skills through relevant research, reading etc. This ensures that Glasgow City Council meets its statutory responsibility regarding the relevant legislation, such as;</p> <ul style="list-style-type: none"> • The BSL (Scotland) Act 2015. • Scottish Government British Sign Language (BSL) National Plan 2017-2023, • Glasgow City local action plan. 	
	<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
<p>4. Can you give details of how you have engaged with equality groups with regard</p>	<p><i>A money advice service spoke to lone parents (predominantly women)</i></p>	<p>Union and staff have been consulted upon at several junctures during this review process, including external review. The Trade Union are aware of the</p>	<p>Promotion of the services available to people of Glasgow, as outlined in</p>

OFFICIAL - SENSITIVE: Operational

<p>to the service review or policy development? What did this engagement tell you about user experience and how was this information used? The Patient Experience and Public Involvement team (PEPI) support NHSGGC to listen and understand what matters to people and can offer support.</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p><i>to better understand barriers to accessing the service. Feedback included concerns about waiting times at the drop in service, made more difficult due to child care issues. As a result the service introduced a home visit and telephone service which significantly increased uptake.</i></p> <p><i>(Due regard to promoting equality of opportunity)</i></p> <p><i>* The Child Poverty (Scotland) Act 2017 requires organisations to take actions to reduce poverty for children in households at risk of low incomes.</i></p>	<p>on-going review of the SLIS and a copy of the IJB paper will be shared with Trade Union in advance of the meeting. Proposals agreed by the IJB will be subject to formal consultation with Trade Unions.</p> <p>Deaf BSL users have also been consulted upon at several junctures during this review process. Attempts were made to consult with Deaf BSL users via the external process, with limited success. Ongoing engagement with BSL users will be undertaken going forward as outlined in section 6 below.</p> <p>Zoom consultation undertaken on 15th March 2022 to consult on the ongoing review of SLIS. Approximately 7 BSL users and 2 BDA employees attended.</p> <p>Feedback from the session highlighted;</p> <ul style="list-style-type: none"> • A need for clearer publicity for the services provided. The response to this is outlined in section 6. • Skill level of interpreters. • Positive feedback for colocation of services. • A number of participants identified a preference for being able to book a named interpreter. • Concerns over interpreters being available for appointments. • General agreement that there would be a significant impact on the deaf community if the service was to close completely. • A desire for ongoing face to face engagement with local Deaf community. <p>Face to face consultation took place in Queens Park</p>	<p>section 6.</p> <p>Training and Development will be taken forward through a short life working group, which will be set up of staff from SLIS and SST, over seen by TL, would look at arranging structured group learning/ development sessions and identifying appropriate training, and factoring in time for same. Ongoing PD will be discussed in 1-1 sessions with TL.</p>
---	--	--	---

OFFICIAL - SENSITIVE: Operational

			<p>Deaf Club on 10th March 2022. There were approximately 15 BSL users in attendance and 2 BDA employees attended. This was organised, facilitated and chaired by the British Deaf Association (BDA) with support with note taking from Social Works Business Development Team.</p> <p>An external consultant was commissioned to undertake the review. As part of this process, 25 in depth interviews were undertaken with a range of partners.</p> <ul style="list-style-type: none">• Managers• SST staff• SLIs• Internal users of SLIS• External users of SLIS• LAs which outsource the delivery of SLIS• Union <p>The report provides a fuller picture of the findings from the review and below are key positives and negatives related to providing both an internal and external SLIS.</p> <p><u>Positives</u></p> <p>The primary positives or strengths relate to the ability of SLIs to build trust with BSL users and the highly skilled and experienced nature of SLIS</p> <p>The primary positives which were identified in terms of the Glasgow Health & Social Care Partnership (GH&SCP) delivering SLIS internally, rather than outsourcing, focused on the continuity of support for BSL users and SLIs working in conjunction with</p>	
--	--	--	--	--

OFFICIAL - SENSITIVE: Operational

OFFICIAL - SENSITIVE: Operational

			<p>others in the GH&SCP</p> <p><u>Negatives</u> There were a wide range of negatives associated with SLIS, including that at times SLIs are underemployed, there are occasions when SLIS are under-resourced, views that SLIS is poorly managed and can be difficult to manage, perceptions that the service has been run down for a number of years, the service being under review for a number of years, suggestions that SLIs have a tendency to overidentify with BSL users, evidence of significant absence rates amongst SLIs, evidence of lack of training/development of SLIs, views that SLIs would be resistant to further training to allow them to undertake other roles, lack of awareness and understanding of SLIS within sections of Glasgow City Council, which could make use of SLIS, views that SLIS is not fully engaging with the deaf community of Glasgow, beliefs that SLIS is being viewed less positively by Glasgow's deaf community over some time, views that SLIs are not sufficiently identifying themselves as being part of GH&SCP, views that there is no significant financial gain for work undertaken outwith Glasgow and negative impact of admin support.</p> <p>The primary suggestions made in terms of addressing the negatives or weaknesses of SLIS focused on addressing issues relating to SLIs at times being underemployed and at other times being under-resourced, promoting SLIS more effectively to other departments within Glasgow City Council, addressing concerns that SLIs have a tendency to overidentify with BSL users, integrating SLIs more</p>	
--	--	--	--	--

OFFICIAL - SENSITIVE: Operational

OFFICIAL - SENSITIVE: Operational

			<p>into the SST, reviewing the management of SLIS, streamlining the system and taking steps to investigate/seek solutions to issues pertaining to long term absences.</p> <p>The primary suggestions made with regards to improvements to SLIS- outwith addressing strengths and weaknesses- focused on management having a more positive attitude towards SLIS, improving, the image of the SLI Team, both internally and externally and increasing the extent to which SLIS tenders for external contracts.</p> <p>Based on this feedback, the review identified the following positive and negative impacts for the preferred option for service delivery.</p> <p><u>Positives</u></p> <ul style="list-style-type: none">• The ability for SLIs to focus on urgent referrals or needs• Ability to satisfy broader needs within Glasgow City Council and elsewhere in Glasgow• More cost effective• Reducing the need for the current number of SLIs• Reduced potential for SLIS underemployment• The opportunity to seek external support at times of unusually high demand. <p><u>Negatives</u></p> <ul style="list-style-type: none">• Concerns regarding external interpreters understanding the Glasgow vernacular and in particular, Glasgow's deaf community.• The potential that outsourced interpreters may not be fully trusted by Glasgow's deaf community,• Requirement to redeploy a number of SLIs	
--	--	--	---	--

OFFICIAL - SENSITIVE: Operational

OFFICIAL - SENSITIVE: Operational

			<ul style="list-style-type: none"> • Opposition from Union. • Costs uncured for external delivery. • The need to manage external partners. 	
		<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
5.	<p>Is your service physically accessible to everyone? If this is a policy that impacts on movement of service users through areas are there potential barriers that need to be addressed?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p><i>An access audit of an outpatient physiotherapy department found that users were required to negotiate 2 sets of heavy manual pull doors to access the service. A request was placed to have the doors retained by magnets that could deactivate in the event of a fire. (Due regard to remove discrimination, harassment and victimisation).</i></p>	<p>The CSIP has disability access. i.e., automatic doors/ramps/disabled toilets/ loop video in foyer with interpreters explaining the layout of building/what to expect from the service. There is a duty worker on site most days for people who arrive without appointments. This ensures that BSL users are not discriminated on the grounds of their disability,</p>	
		<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required

OFFICIAL - SENSITIVE: Operational

<p>6.</p>	<p>How will the service change or policy development ensure it does not discriminate in the way it communicates with service users and staff?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p> <p>The British Sign Language (Scotland) Act 2017 aims to raise awareness of British Sign Language and improve access to services for those using the language. Specific attention should be paid in your evidence to show how the service</p>	<p><i>Following a service review, an information video to explain new procedures was hosted on the organisation's YouTube site. This was accompanied by a BSL signer to explain service changes to Deaf service users.</i></p> <p><i>Written materials were offered in other languages and formats.</i></p> <p><i>(Due regard to remove discrimination, harassment and victimisation and promote equality of opportunity).</i></p>	<p>Following service review, communications will take a variety of forms. We will seek support and guidance from the BDA at every step of this process.</p> <p>For BSL users with no written comprehension, engagement sessions will take place in deaf/hearing loss clubs throughout Glasgow, this will be complemented by posters in these clubs for people who can read English with data re the outcome of review and who to contact for further clarification if required. The BDA workers will also assist throughout with translation of written word, for those who do not use this mode of communication. Engagement sessions will also be offered in CSIP with interpreters available to communicate outcome of review and answer any questions. Throughout these processes, reassurance will be given to BSL users that there will be no change to how they access SLIS, and service will continue in line with current practice.</p> <p>For employees of GCC, who use SLIS, a comms will go out to all SW/CHSP staff and Intranet will be updated accordingly. Within this correspondence there will be information on how to access SLIS, with contact details for anyone who requires more information. The SST has started engagements sessions with our residential services and there are plans to extend this out to all departments. Letters explaining the outcome of the review will be sent to all external agencies who use SLIS to advice of outcome of review and impact for their organisation. Details of the Scottish Register of Language Professionals with Deaf Community will be included in correspondence. These actions are in accordance with our statutory</p>	<p>There is potential for a negative impact on external agencies due the SLIS being withdrawn. A period of notice should be given to allow these services to make alternative arrangements.</p>
-----------	---	--	---	---

OFFICIAL - SENSITIVE: Operational

	review or policy has taken note of this.		responsibilities to ensure there is no discrimination taking place.	
7	Protected Characteristic		Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(a)	<p>Age</p> <p>Could the service design or policy content have a disproportionate impact on people due to differences in age? (Consider any age cut-offs that exist in the service design or policy content. You will need to objectively justify in the evidence section any segregation on the grounds of age promoted by the policy or included in the service design).</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>		<p>Service is provided to all age ranges if staff skill/expertise is available. There is no age discrimination associated with this service. Preparation time is generally always given to allow interpreters to familiarise themselves, with for example, religious services. At time of referral information is sought for example if any cultural requirements need to be factored into the process.</p> <p>At time of referral, BSL users can ask for a particular interpreter, and this is accommodated as much as circumstances allow for.</p> <p>Profile of service users is not currently reported on as outlined in section 1.</p>	<p>The proposed changes to SLIS will be under review for a period of a year. A monitor and review group will be set up and will consist of interested parties, such as BDA SW management, interested BSL users, SLI . Meetings will take place 3 monthly and outcomes will be reviewed through governance.</p>
(b)	<p>Disability</p> <p>Could the service design or policy content have a disproportionate impact on people due to the protected characteristic of disability?</p>		<p>The CSIP building has disabled access, reception staff are trained at 1st level signing, a SLI is generally on duty to ensure there is access to SLI, to facilitate communication in respect of the reason for their visit to CSIP.</p> <p>This service is specifically targeted for BSL users.</p>	<p>There is potential for a negative impact on external agencies due the SLIS being withdrawn. A period of notice should be given to allow these services to make alternative</p>

OFFICIAL - SENSITIVE: Operational

	<p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>There will be no reduction in services to the deaf citizens of Glasgow, therefore no anticipated impact. There are opportunities for potential positives through combining SLIS and SST, gaining the benefits from sharing knowledge resources and expertise.</p> <p>Preparation time is generally always given to allow interpreters to familiarise themselves, with for example, religious services. At time of referral information is sought for example if any cultural requirements need to be factored into the process.</p> <p>At time of referral, BSL users can ask for a particular interpreter, and this is accommodated as much as circumstances allow for.</p> <p>Profile of users is not currently reported as outlined in Section 1.</p>	<p>arrangements. During transition process, external agencies will be referred to Scottish register of Language Professionals with Deaf Community.</p> <p>The proposed changes to SLIS will be under review for a period of a year. A monitor and review group will be set up and will consist of interested parties, such as BDA SW management, interested BSL users, SLI . Meetings will take place 3 monthly and outcomes will be reviewed through governance</p>
	<p>Protected Characteristic</p>	<p>Service Evidence Provided</p>	<p>Possible negative impact and Additional Mitigating Action Required</p>
<p>(c)</p>	<p>Gender Reassignment</p> <p>Could the service change or policy have a disproportionate impact on people with the protected characteristic of Gender Reassignment?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p>	<p>SLIS provides an interpreting service to all BSL users from Glasgow. Irrespective of age, race, gender status, religion etc.</p> <p>There is no evidence to suggest there will be a disproportionate impact on this group.</p> <p>At time of referral, BSL users can ask for a particular interpreter, and this is accommodated as much as circumstances allow for.</p> <p>Profile of users is not currently reported as outlined in Section 1.</p>	<p>The proposed changes to SLIS will be under review for a period of a year. A monitor and review group will be set up and will consist of interested parties, such as BDA SW management, interested BSL users, SLI . Meetings will take place 3 monthly and outcomes will be reviewed through governance,</p>

OFFICIAL - SENSITIVE: Operational

	<p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>		
	<p>Protected Characteristic</p>	<p>Service Evidence Provided</p>	<p>Possible negative impact and Additional Mitigating Action Required</p>
(d)	<p>Marriage and Civil Partnership</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristics of Marriage and Civil Partnership?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>If there was a request to interpret at a marriage or civil partnership, SLI would be asking if it would not be more appropriate to access this through another route. Notably SLIS is Monday to Friday, 9-5. However, exceptional circumstances would be factored into the decision. Eligibility criteria could be used in these circumstances. Preparation time is generally always given to allow interpreters to familiarise themselves, with for example, religious services. At time of referral information is sought for example if any cultural requirements need to be factored into the process.</p> <p>At time of referral, BSL users can ask for a particular interpreter, and this is accommodated as much as circumstances allow for. Profile of users is not currently reported as outlined in Section 1.</p>	<p>The proposed changes to SLIS will be under review for a period of a year. A monitor and review group will be set up and will consist of interested parties, such as BDA SW management, interested BSL users, SLI . Meetings will take place 3 monthly and outcomes will be reviewed through governance,</p>
(e)	<p>Pregnancy and Maternity</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristics of Pregnancy and Maternity?</p>	<p>There is no evidence to suggest there will be a disproportionate impact on this group. SLIS will provide sign language services in these circumstances, if eligibility criteria are met. Preparation time is generally always given to allow interpreters to familiarise themselves, with for</p>	<p>The proposed changes to SLIS will be under review for a period of a year. A monitor and review group will be set up and will consist of interested parties, such as</p>

OFFICIAL - SENSITIVE: Operational

	<p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>example, religious services. At time of referral information is sought for example if any cultural requirements need to be factored into the process. At time of referral, BSL users can ask for a particular interpreter, and this is accommodated as much as circumstances allow for. Profile of users is not currently reported as outlined in Section 1.</p>	<p>BDA SW management, interested BSL users, SLI . Meetings will take place 3 monthly and outcomes will be reviewed through governance,</p>
	<p>Protected Characteristic</p>	<p>Service Evidence Provided</p>	<p>Possible negative impact and Additional Mitigating Action Required</p>
<p>(f)</p>	<p>Race</p> <p>Could the service change or policy have a disproportionate impact on people with the protected characteristics of Race?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>There is no evidence to suggest there will be a disproportionate impact on this group. BSL interpreting services does not discriminate on the grounds of race. Preparation time is generally always given to allow interpreters to familiarise themselves, with for example, religious services. At time of referral information is sought for example if any cultural requirements need to be factored into the process. Preparation time is given to allow SLIs to familiarise with for example cultural requirements. To the best of my knowledge, the SLIS has not received a complaint in this regard. At time of referral, BSL users can ask for a particular interpreter, and this is accommodated as much as circumstances allow for. Profile of users is not currently reported as outlined in Section 1.</p>	<p>The proposed changes to SLIS will be under review for a period of a year. A monitor and review group will be set up and will consist of interested parties, such as BDA SW management, interested BSL users, SLI . Meetings will take place 3 monthly and outcomes will be reviewed through governance,</p>

OFFICIAL - SENSITIVE: Operational

(g)	<p>Religion and Belief</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Religion and Belief?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>There is no evidence to suggest there will be a disproportionate impact on this group. BSL interpreting services does not discriminate on the grounds of religion and belief. To the best of my knowledge, the SLIS has not received a complaint in this regard.</p> <p>Preparation time is generally always given to allow interpreters to familiarise themselves, with for example, religious services. At time of referral information is sought for example if any cultural requirements need to be factored into the process.</p> <p>There have been occasions when SLIS had to decline request for a religious service due to perceived inability of individual members of staff. This smaller more focused team will allow for staff to hone and develop their skill set in a less diluted service. At time of referral, BSL users can ask for a particular interpreter, and this is accommodated as much as circumstances allow for.</p> <p>Profile of users is not currently reported as outlined in Section 1.</p>	<p>The proposed changes to SLIS will be under review for a period of a year. A monitor and review group will be set up and will consist of interested parties, such as BDA SW management, interested BSL users, SLI . Meetings will take place 3 monthly and outcomes will be reviewed through governance,</p>
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(h)	<p>Sex</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Sex?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p>	<p>There is no evidence to suggest there will be a disproportionate impact on this group. BSL interpreting services does not discriminate on the grounds of sex.</p> <p>At time of referral, BSL users can ask for a particular interpreter, and this is accommodated as much as circumstances allow for.</p> <p>Profile of users is not currently reported as outlined</p>	<p>The proposed changes to SLIS will be under review for a period of a year. A monitor and review group will be set up and will consist of interested parties, such as BDA SW management, interested BSL users, SLI . Meetings will take place 3</p>

OFFICIAL - SENSITIVE: Operational

	<p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>in Section 1.</p>	<p>monthly and outcomes will be reviewed through governance.</p>
(i)	<p>Sexual Orientation</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Sexual Orientation?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>There is no evidence to suggest there will be a disproportionate impact on this group.</p> <p>At time of referral, BSL users can ask for a particular interpreter, and this is accommodated as much as circumstances allow for.</p> <p>Profile of users is not currently reported as outlined in Section 1.</p>	<p>The proposed changes to SLIS will be under review for a period of a year. A monitor and review group will be set up and will consist of interested parties, such as BDA SW management, interested BSL users, SLI . Meetings will take place 3 monthly and outcomes will be reviewed through governance.</p>
	<p>Protected Characteristic</p>	<p>Service Evidence Provided</p>	<p>Possible negative impact and Additional Mitigating Action Required</p>

OFFICIAL - SENSITIVE: Operational

<p>(j)</p>	<p>Socio – Economic Status & Social Class</p> <p>Could the proposed service change or policy have a disproportionate impact on people because of their social class or experience of poverty and what mitigating action have you taken/planned?</p> <p>The Fairer Scotland Duty (2018) places a duty on public bodies in Scotland to actively consider how they can reduce inequalities of outcome caused by socioeconomic disadvantage when making <u>strategic decisions</u>. If relevant, you should evidence here what steps have been taken to assess and mitigate risk of exacerbating inequality on the ground of socio-economic status. Additional information available here: Fairer Scotland Duty: guidance for public bodies - gov.scot (www.gov.scot)</p> <p>Seven useful questions to consider when seeking to demonstrate ‘due regard’ in relation to the Duty:</p> <ol style="list-style-type: none"> 1. What evidence has been considered in preparing for the decision, and are there any gaps in the evidence? 2. What are the voices of people and communities telling us, and how has this been determined (particularly those with lived experience of socio-economic disadvantage)? 3. What does the evidence suggest about the actual or likely impacts of different options or measures on inequalities of outcome that are associated with socio-economic disadvantage? 4. Are some communities of interest or communities of place more affected by disadvantage in this case than others? 5. What does our Duty assessment tell us about socio- 	<p>There is no evidence to suggest there will be a disproportionate impact on this group. BSL interpreting services does not discriminate on the grounds of Socio-Economic Status & Social Class.</p> <p>Charges are not applied to service users and would be allocated internally in line with service budgets. This in practice means there will continue to be no financial implications for the service user.</p> <p>At time of referral, BSL users can ask for a particular interpreter, and this is accommodated as much as circumstances allow for.</p> <p>Profile of users is not currently reported as outlined in Section 1.</p>	<p>The proposed changes to SLIS will be under review for a period of a year. A monitor and review group will be set up and will consist of interested parties, such as BDA SW management, interested BSL users, SLI . Meetings will take place 3 monthly and outcomes will be reviewed through governance,</p>
------------	--	---	--

OFFICIAL - SENSITIVE: Operational

	<p>economic disadvantage experienced disproportionately according to sex, race, disability and other protected characteristics that we may need to factor into our decisions?</p> <p>6. How has the evidence been weighed up in reaching our final decision?</p> <p>7. What plans are in place to monitor or evaluate the impact of the proposals on inequalities of outcome that are associated with socio-economic disadvantage? ‘Making Fair Financial Decisions’ (EHRC, 2019)²¹ provides useful information about the ‘Brown Principles’ which can be used to determine whether due regard has been given. When engaging with communities the National Standards for Community Engagement²² should be followed. Those engaged with should also be advised subsequently on how their contributions were factored into the final decision.</p>		
(k)	<p>Other marginalised groups</p> <p>How have you considered the specific impact on other groups including homeless people, prisoners and ex-offenders, ex-service personnel, people with addictions, people involved in prostitution, asylum seekers & refugees and travellers?</p>	<p>There is no evidence to suggest there will be a disproportionate impact on this group. All people with hearing loss are marginalised and SLIS provides an essential service to mitigate this.</p> <p>At time of referral, BSL users can ask for a particular interpreter, and this is accommodated as much as circumstances allow for.</p> <p>Profile of users is not currently reported as outlined in Section 1.</p>	
8.	<p>Does the service change or policy development include an element of cost savings? How have you managed this in a way that will not disproportionately impact on protected characteristic groups?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant</p>	<p>Yes. Reducing access of other Local Authorities, Health and private organisations will allow for a more responsive and focussed response to BSL users of Glasgow.</p> <p>Through the review process, it was identified that the internal charging policy for SL services has not been</p>	

OFFICIAL - SENSITIVE: Operational

OFFICIAL - SENSITIVE: Operational

	<p>boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>updated in some time. The charging policy will be reviewed in line with standard procedures. It is not anticipated that this will have an impact for service users as charges are applied internally between services.</p>	
		<p align="center">Service Evidence Provided</p>	<p align="center">Possible negative impact and Additional Mitigating Action Required</p>
<p>9.</p>	<p>What investment in learning has been made to prevent discrimination, promote equality of opportunity and foster good relations between protected characteristic groups? As a minimum include recorded completion rates of statutory and mandatory learning programmes (or local equivalent) covering equality, diversity and human rights.</p>	<p>SLIs complete Glasgow’s statutory training and are given time for their own personal development.</p> <p>A revised job description will be developed in order that Sign Language Interpreters can undertake additional Social Care worker tasks. A program of induction, training and shadowing will be developed to support the implementation.</p>	

10. In addition to understanding and responding to legal responsibilities set out in Equality Act (2010), services must pay due regard to ensure a person's human rights are protected in all aspects of health and social care provision. This may be more obvious in some areas than others. For instance, mental health inpatient care or older people’s residential care may be considered higher risk in terms of potential human rights breach due to potential removal of liberty, seclusion or application of restraint. However risk may also involve fundamental gaps like not providing access to communication support, not involving patients/service users in decisions relating to their care, making decisions that infringe the rights of carers to participate in society or not respecting someone's right to dignity or privacy.

The Human Rights Act sets out rights in a series of articles – right to Life, right to freedom from torture and inhumane and degrading treatment, freedom from slavery and forced labour, right to liberty and security, right to a fair trial, no punishment without law, right to respect for private and family life, right to freedom of thought, belief and religion, right to freedom of expression, right to freedom of assembly and association, right to marry, right to protection from discrimination.

OFFICIAL - SENSITIVE: Operational

OFFICIAL - SENSITIVE: Operational

Please explain in the field below if any risks in relation to the service design or policy were identified which could impact on the human rights of patients, service users or staff.

No risks identified in terms of the human rights for Glasgow City BSL users.

Please explain in the field below any human rights based approaches undertaken to better understand rights and responsibilities resulting from the service or policy development and what measures have been taken as a result e.g. applying the PANEL Principles to maximise Participation, Accountability, Non-discrimination and Equality, Empowerment and Legality or FAIR* .

*

- **Facts:** What is the experience of the individuals involved and what are the important facts to understand?
- **Analyse rights:** Develop an analysis of the human rights at stake
- **Identify responsibilities:** Identify what needs to be done and who is responsible for doing it
- **Review actions:** Make recommendations for action and later recall and evaluate what has happened as a result.

OFFICIAL - SENSITIVE: Operational

OFFICIAL - SENSITIVE: Operational

Having completed the EQIA template, please tick which option you (Lead Reviewer) perceive best reflects the findings of the assessment. This can be cross-checked via the Quality Assurance process:

- Option 1: No major change (where no impact or potential for improvement is found, no action is required)
- Option 2: Adjust (where a potential or actual negative impact or potential for a more positive impact is found, make changes to mitigate risks or make improvements)
- Option 3: Continue (where a potential or actual negative impact or potential for a more positive impact is found but a decision not to make a change can be objectively justified, continue without making changes)
- Option 4: Stop and remove (where a serious risk of negative impact is found, the plans, policies etc. being assessed should be halted until these issues can be addressed)

OFFICIAL - SENSITIVE: Operational

11. If you believe your service is doing something that 'stands out' as an example of good practice - for instance you are routinely collecting patient data on sexual orientation, faith etc. - please use the box below to describe the activity and the benefits this has brought to the service. This information will help others consider opportunities for developments in their own services.

Actions – from the additional mitigating action requirements boxes completed above, please summarise the actions this service will be taking forward.

	Date for completion	Who is responsible?(initials)
The proposed changes to SLIS will be under review for a period of a year. A monitor and review group will be set up and will consist of interested parties, such as BDA SW management, interested BSL users, SLI . Meetings will take place 3 monthly and outcomes will be reviewed through governance,	October 2024	Monitor and review group will be overseen by TL, staff member from SLIS, SST, BDA rep, BSL user and Union rep.
Programme of communication with SLIS service users, BSL Community and external agencies	Ongoing	

Ongoing 6 Monthly Review please write your 6 monthly EQIA review date:

Lead Reviewer:	Name	Theresa Gordon
EQIA Sign Off:	Job Title	
	Signature	
	Date	15/01/24
Quality Assurance Sign Off:	Name	Alastair Low
	Job Title	Planning Manager
	Signature	<i>Alastair Low</i>
	Date	09/04/2024

**NHS GREATER GLASGOW AND CLYDE EQUALITY IMPACT ASSESSMENT TOOL
MEETING THE NEEDS OF DIVERSE COMMUNITIES
6 MONTHLY REVIEW SHEET**

Name of Policy/Current Service/Service Development/Service Redesign:

--

Please detail activity undertaken with regard to actions highlighted in the original EQIA for this Service/Policy

		Completed	
		Date	Initials
Action:			
Status:			
Action:			
Status:			
Action:			
Status:			
Action:			
Status:			

Please detail any outstanding activity with regard to required actions highlighted in the original EQIA process for this Service/Policy and reason for non-completion

		To be Completed by	
		Date	Initials
Action:			
Reason:			
Action:			
Reason:			

OFFICIAL - SENSITIVE: Operational

Please detail any new actions required since completing the original EQIA and reasons:

		To be completed by	
		Date	Initials
Action:			
Reason:			
Action:			
Reason:			

Please detail any discontinued actions that were originally planned and reasons:

Action:	
Reason:	
Action:	
Reason:	

Please write your next 6-month review date

--

Name of completing officer:

Date submitted:

If you would like to have your 6 month report reviewed by a Quality Assuror please e-mail to: alastair.low@ggc.scot.nhs.uk



Ashbrook
RESEARCH & CONSULTANCY

REPORT (FINAL DRAFT)

**REVIEW OF THE GLASGOW HEALTH & SOCIAL CARE
PARTNERSHIP SIGN LANGUAGE INTERPRETER SERVICE**

May 2023

**PREPARED FOR: The Glasgow Health &
Social Care Partnership**

<p style="text-align: center;">Final Report</p> <p>Review of the Glasgow Health & Social Care Partnership Sign Language Interpreter Service</p> <p>Ashbrook Research & Consultancy Ltd</p> <p>May 2023</p>
--

Project Contact

Theresa Gordon	Phone: 0141 276 5288
Service Manager – Adult Services	E-mail: Theresa.Gordon@glasgow.gov.uk

Report prepared by: Ashbrook Research & Consultancy Ltd

Dr David Brooks	Phone: 0141 226 3798
Managing Director	E-mail: david@ashbrookresearch.co.uk



Contents

EXECUTIVE SUMMARY	32
1.0 INTRODUCTION.....	37
2.0 POSITIVES AND NEGATIVES OF SLIS.....	39
2.1 Positives.....	39
2.2 Negatives	41
2.3 Addressing Negatives or Weaknesses.....	44
2.4 Other Suggested Improvements for SLIS.....	46
3.0 POSITIVES AND NEGATIVES OF THE GLASGOW HEALTH &	48
SOCIAL CARE PARTNERSHIP DELIVERING SLIS INTERNALLY	48
3.1 Positives.....	48
3.2 Negatives	49
4.0 POSITIVES AND NEGATIVES OF THE SERVICE BEING DELIVERED	50
EXTERNALLY	50
4.1 Positives.....	50
4.2 Negatives	51
5.0 SUPPORT FOR THE SERVICE BEING DELIVERED EXTERNALLY	53
6.0 A LOCAL AUTHORITY PERSPECTIVE	55
6.1 Reasons for Outsourcing the Delivery of Sign Language Interpreter	55
Services.....	55
6.2 Positives of the Service Being Delivered Externally	56
6.3 Negatives of the Service Being Delivered Externally	57
6.4 The Positives of Local Authorities Delivering Services Themselves	57
6.5 Negatives of Local Authorities Delivering Services Themselves	58
6.6 Should Other Local Authorities be Delivering Sign Language Interpreter	59
Services Internally or Externally?	59
6.7 Advice and Guidance for the Glasgow Health & Social Care	60
Partnership	60
7.0 OPTION APPRAISAL.....	61
7.1 Maintaining the Status Quo	61
7.2 Delivering Sign Language Interpreter Services Entirely Externally	63
7.3 Adopting a Hybrid – or Streamlined – Approach to Service Delivery	64
7.4 Adopting a Partnership Approach to Service Delivery.....	65
7.5 Consideration of Options.....	66

EXECUTIVE SUMMARY

Positives and Negatives of SLIS

Positives

- The primary positives or strengths of SLIS are the ability of SLIs to build relationships and trust with clients, the extent to which SLIs are a conduit between service users and clients, service availability and the highly skilled and experienced nature of SLIs

Negatives

- There were a wide range of negatives associated with SLIS, including evidence that, at times, SLIs are underemployed, there are occasions when SLIS is under-resourced, beliefs that SLIS is poorly managed and can be difficult to manage, perceptions that the service has been run down for a number of years, the service being reviewed for a number of years, suggestions that SLIs have a tendency to overidentify with clients, evidence of significant absences amongst SLIs, evidence of a lack of training and development of SLIs, beliefs that SLIs will be resistant to training to allow them to undertake other roles, lack of awareness and understanding of SLIS within departments in Glasgow City Council which could make use of it, beliefs that SLIS is not sufficiently engaging with the deaf community in Glasgow, beliefs that SLIS is being viewed less positively by the deaf community in Glasgow through time, beliefs that SLIs are not sufficiently identifying themselves as being part of the Glasgow Health & Social Care Partnership, beliefs that there is no significant financial gain from work undertaken outwith Glasgow City Council and loss of administrative support

- The primary suggestions made in terms of addressing negatives or weaknesses of SLIS focused around addressing issues

relating to SLIs, at times being underemployed and, at other times, being under-resourced, promoting SLIS more effectively to other departments within Glasgow City Council, addressing concerns that SLIs have a tendency to overidentify with clients, integrating SLIs more into the Sensory Support Team, reviewing the management of SLIS, having stronger management of SLIs, streamlining the system and taking steps to investigate/seek solutions to issues pertaining to long-term sickness

- The primary suggestions made with regard to improvements to SLIS – outwith addressing identified negatives and weaknesses – focused around management having a more positive attitude towards SLIS, improving the image of the SLIS team both internally and externally and increasing the extent to which SLIS tenders for external contracts

Positives and Negatives of the Glasgow Health & Social Care Partnership Delivering SLIS Internally

- The primary positives which were identified in terms of the Glasgow Health & Social Care Partnership delivering SLIS internally rather than outsourcing it focused around the continuity of support for clients and SLIs working in conjunction with others in the Glasgow Health & Social Care Partnership
- The primary negatives identified in relation to internal delivery of SLIS by the Glasgow Health & Social Care Partnership focused around ongoing low morale amongst SLIs (if changes made to the service are not to their satisfaction and if current management arrangements and relationships continue), the current structure surrounding SLIS not being cost-effective, the potential for improvements in the service being limited by lack of funding and beliefs that SLIs will continue to be difficult to manage

Positives and Negatives of the Service Being Delivered Externally

- There was minimal evidence of positives relating to the service being delivered externally, with the primary positives identified relating to external organisations having a greater pool of interpreters
- The primary negatives noted as being associated with the service being delivered externally were a loss of continuity for clients, speed of response and there being a significant potential for a backlash from Glasgow's deaf community should the service be delivered externally

Support for the Service Being Delivered Externally

- The vast majority of those interviewed were unsupportive of sign language services being delivered externally, primarily due to concerns about loss of continuity for clients, concerns about the negative impact on the speed and quality of service delivered to clients, beliefs that the external delivery of the service would be opposed by the deaf community in Glasgow, concerns about job losses, concerns amongst SLIs regarding being redeployed within the Glasgow Health & Social Care Partnership, concerns amongst service users that external interpreters may not have sufficient understanding of their needs in order to fulfil them to a high standard, beliefs that processes will become longer and more complicated in terms of finding, booking and briefing interpreters and, thereafter, receiving informed feedback from them and concerns about external deliverers not having the same dedication to their duty of care to clients as is the case with SLIs
- Those who were supportive of the service being delivered externally primarily stated that they would be so if it could be demonstrated that external interpreters have the same knowledge and skills as SLIs or if the service could be streamlined, with some elements continuing to be delivered in-house and others being delivered externally

A Local Authority Perspective

- Those interviewed within Local Authorities as part of the review primarily stated that their Council outsourced the delivery of sign language interpreter services due to the fact there wasn't a business case for it
- For the Local Authorities interviewed, the primary positive of sign language interpreter services being delivered externally was that it was more cost-effective approach
- The primary negatives of external delivery focused around getting access to interpreters at times and having no control over the quality of interpreters
- Those interviewed in three Local Authorities stated that there could be two primary positives of their Local Authority delivering sign language interpreter services, namely direct access to in-house interpreters and in-house interpreters building relationships with clients
- Those interviewed believed that the key negatives for Local Authorities delivering sign language interpreter services themselves were cost, inhouse interpreters being underemployed and the Council training and developing interpreters who may subsequently leave
- Those interviewed within the Local Authorities were very largely in favour of Council's delivering sign language interpreter services internally if there was a sufficient critical mass of clients and if demand could be identified for such services from other departments within a Local Authority
- There were a number of primary elements of advice and guidance that those interviewed within Local Authorities would give to the Glasgow Health & Social Care Partnership in its consideration of delivering sign language interpreter services externally, namely 'ensuring that they know what they are purchasing', the need to undertake an impact assessment (both in terms of internal impacts and, more importantly, impacts for

clients), ensuring that there is a business case for external delivery, considering working in partnership with other Local Authorities and organisations which deliver these services and taking into account the potential reaction of Glasgow's deaf community should the service no longer be delivered internally

1.0 INTRODUCTION

This report details findings from a review of the Glasgow Health & Social Care Partnership Sign Language Interpreter Service (SLIS) undertaken by Ashbrook Research & Consultancy Ltd.

The review is entirely based on primary research undertaken across a wide range of audiences, namely:

- Managers of SLIS
- Sensory Support Team staff
- SLIS Sign Language Interpreters (SLIs)
- Internal users of SLIS (referred to as 'service users' throughout the report)
- External users of SLIS (also referred to as 'service users' throughout the report)
- Local Authorities which outsource the delivery of sign language interpreter services
- Unison

A total of 25 in-depth interviews were undertaken via MS Teams or telephone during April 2023.

There were a small number of individuals who were unable to participate in an interview. However, the comprehensive coverage of those interviewed across all audiences is more than sufficient to provide a profile of accurate, representative and robust results.

It should be noted that end users of SLIS are referred to as 'clients' throughout the report.

The interview process sought to derive information in relation to:

- Positives and negatives of SLIS
- Positives and negatives of the Glasgow Health & Social Care Partnership delivering SLIS internally
- Positives and negatives of the service being delivered externally
- Support for the service being delivered externally
- A Local Authority perspective

Sections 2.0 to 6.0 provide a profile of the outcomes pertaining to each of these issues, whilst Section 7.0 considers options which the Glasgow Health & Social Care Partnership may wish to consider in relation to continuing to deliver the service internally or delivering it externally.

2.0 POSITIVES AND NEGATIVES OF SLIS

2.1 Positives

It was apparent that SLIS has a number of **primary positives or strengths**, namely:

- The ability of SLIs to build relationships and trust with clients, which is particularly important as they often have complex needs, are often vulnerable and may be facing a range of health, social, legal and other challenges, with this relationship-building allowing SLIs to build an understanding of broader issues facing those they are supporting and providing clients with reassurance regarding discussion of confidential and sensitive issues
- The extent to which SLIs are a conduit between service users and clients
- The service availability, particularly in terms of the ability of the service to react quickly to urgent or emergency requirements
- The highly skilled and experienced nature of SLIs, including that they are highly qualified and having specialisms or skills in particular areas

Thereafter, a number of **secondary positives or strengths** were evident, namely:

- SLIS allowing people access to services which they might not otherwise be able to access (and, as part of this, helping people to remain living independently)
- The ability of SLIS to enable other professionals 'to do their job', i.e. to fulfil their professional responsibilities to a greater extent – and more effectively – than they would otherwise be able to
- The extent to which SLIs provide a critical service for the Glasgow

Health & Social Care Partnership and, as part of this, have built up a detailed knowledge and understanding of a range of the functions which it delivers

- The ability of SLIs to assist in a range of geographical areas across Glasgow (together with the extent to which they have the ability to support functions outwith the Glasgow Health & Social Care Partnership)
- The flexibility of SLIs and, in particular, their ability – and willingness – to extend sessions when required
- The extent to which SLIs understand well Glasgow’s deafness and deafness culture/community and the issues they face (which is of critical importance in terms of interacting with clients and providing support to service users)
- The extent to which SLIs have empathy with clients (partly as a result of working with the deaf community in Glasgow for many years)
- The deaf community in Glasgow being aware of SLIS and SLIs

Finally, **more specific positives and strengths** of SLIS are apparent, namely:

- The fact that SLIS has the ability to generate income for the Glasgow Health & Social Care Partnership
- SLIS being a dedicated social work service within the Glasgow Health & Social Care Partnership
- SLIs focusing on face-to-face support of clients and avoiding video conferences where possible (on the basis of beliefs that, although less cost-effective, face-to-face interactions are more effective in terms of providing support to service users and clients)
- SLIS being more dependable than interpreters employed by external organisations and freelance interpreters (who, at times, may renege on a booking in order to take on a ‘more lucrative offer’)

- The extent to which SLIs are willing to have discussions with service users in order that they are well prepared before delivering support for themselves and clients
 - The SLIs being a well-established team
 - SLIS hourly rates being cheaper than external providers

In the context of the outcomes noted above, it is of interest to note that there was little evidence of SLIS being associated with **no** positives or strengths.

2.2 Negatives

In contrast to the range of positives and strengths detailed above, there were also a wide range of negatives and weaknesses identified that were associated with SLIS, with these **primarily** relating to:

- Evidence that, at times, SLIs are underemployed and, in particular, there can be days or longer periods where there is little or no call for their service
- Evidence that there are occasions when SLIS is under-resourced and, in particular, when it can be difficult for service users to book an interpreter (which was seen, in part, as being a function of levels of sickness and absence amongst SLIs and a recent decrease in the number of SLIs), that has also resulted in some requests for support being delayed or postponed (for example, including drop-in sessions being cancelled)
- Beliefs that SLIS is poorly managed (which is seen as being a function of management not having an understanding of the deaf community and its needs and not having sufficient skills pertaining to the deaf community and its needs)

- - Suggestions that SLIs can be difficult to manage (with references to there being a number of 'strong characters' in the SLIs and the team being characterised by it having cliques)

Perceptions that the service has been 'run down' for a number of years (including references to previous managers stating that their role was to "close the service down")

- The service being reviewed for a number of years (which has had a negative impact on the morale of SLIs due to anxiety about their futures)
- Suggestions that SLIs have a tendency to overidentify with clients (resulting in them "getting too involved in issues" and, at times, not following protocols in terms of taking actions themselves which should be taken by the Sensory Support Team)
- Evidence of significant absences amongst SLIs which would appear to be sickness related (and, in part, stress related)
- Evidence of a lack of training and development of SLIs (either as a result of lack of funding or the service being under review)
- Beliefs that SLIs will be resistant to training to allow them to undertake other roles
- Lack of awareness – and understanding – of SLIS within departments in Glasgow City Council which could make use of it (and, indeed, organisations and individuals outwith the Council who could make use of the service)
- Beliefs that SLIS is not sufficiently engaging with the deaf community in Glasgow
- Beliefs that SLIS is being viewed less positively by the deaf community in Glasgow through time
- Beliefs that SLIs do not sufficiently identify themselves as being part of the Glasgow Health & Social Care Partnership
- Beliefs that there is no significant financial gain from work undertaken outwith Glasgow City Council

- - Loss of administrative support

Thereafter, a number of **secondary negatives or weaknesses** were apparent, namely:

- The loss of much of SLIS's NHS work
- Evidence of difficulties associated with the booking process for interpreters (including time delays in arranging bookings)
- Beliefs that there is variability in terms of the dedication and commitment of individuals within the SLIs
 - Concerns regarding the inflexibility of some SLIs (who "*tend to only take on what they want to take on*")
 - Beliefs that some SLIs 'look down' on other staff
 - Evidence that some individuals within the Sensory Support Team resent SLIs (partly due to the number of hours at times they are actively employed and the attitude of some SLIs towards them)

Finally, a number of **more specific negatives or weaknesses** of SLIS were apparent, namely:

- Beliefs that a lot of what SLIs do "*goes unnoticed*"
- Concerns that SLIS is not a 24-hour service (which is the case for a number of social workers) and, therefore, occasions when it's difficult to get immediate access to an SLI
- SLIs being deployed for activities to which they are not suited (for example, theatre work)
- Concerns about potential conflicts relating to professional registration if SLIs are asked to take on alternative tasks when they aren't busy
- Beliefs that space available for meetings is too small (and, in particular, not being suitable for four people)

•
2.3 Addressing Negatives or Weaknesses

The **primary** suggestions made in terms of addressing negatives or weaknesses of SLIS focused around:

- Addressing issues relating to SLIs, at times, being underemployed and, at other times, being under-resourced

Promoting SLIS more effectively to other departments within Glasgow City Council

- Addressing concerns that SLIs have a tendency to overidentify with clients
- Integrating SLIs more into the Sensory Support Team
- Reviewing the management of SLIS (particularly in terms of ensuring that the Service Managers have a sufficient understanding of signing and Glasgow's deaf community)
- Having stronger management of SLIs (although it was recognised that they would respond poorly to this, there was the potential for more grievances to be aired and for these to be more likely to be formalised)
- Streamlining the system (including retaining interpreters who are *“committed and passionate about the service”*)
 - Taking steps to investigate – and seek solutions to – issues pertaining to long-term sickness

Thereafter, there was a degree of **secondary demand** to address negatives and weaknesses through:

- Overhauling the booking process (in order to decrease delays in the booking of interpreters and avoid having to ‘turn away deaf clients’)

- - Reinstating a dedicated administrative support function rather than SLIS being supported as part of a pooled service (which, it was believed, would reduce delays in referrals to the service)
 - Increasing training and development of SLIs (including concerns with respect to overidentifying with clients)
 - Increasing the number of SLIs (although a contrary view was expressed, namely that the number of SLIs should be reduced, albeit that it was recognised that this will be resisted by SLIs and Unison)

Thereafter, **more specific suggestions** related to:

- Increasing the budget for interpreters
- Increasing the focus on SLIS meeting the needs of the deaf community in Glasgow (and, thereafter, promoting how the revised service will meet these needs)
- Having a clear vision for the future of the service

2.4 Other Suggested Improvements for SLIS

Evidence was gathered regarding suggested improvements for SLIS – apart from the negatives and weaknesses referred to earlier – and, in this regard, **primary suggestions** were made in respect of:

- Improving the image of the SLIS team, both internally (i.e. within the Glasgow Health & Social Care Partnership) and externally (in terms of the deaf community in Glasgow)
- Management having a more positive attitude towards SLIS (and not promoting a perception that the service is to be run down or outsourced)
- Increasing the extent to which SLIS tenders for external contracts (with a particular emphasis being placed here on SLIS having the opportunity to tender for NHS work)

Thereafter, **secondary reference** was made here to:

- Making better use of technology available and replacing outdated technology
- SLIs doing 'other things' to support the deaf community in Glasgow

Finally, **more specific reference** was made here to improving SLIS through:

- Having more interpreters who themselves are deaf (which would demonstrate empowerment for deaf interpreters)

- Assessing the collective and individual skills of SLIs on an annual basis (in order to ensure that individually and collectively SLIs are seen as being fit for purpose and, in particular, have addressed their skills needs as required)
- Bringing in younger interpreters with updated skills and abilities (to be mentored by older, more experienced staff)

3.0 POSITIVES AND NEGATIVES OF THE GLASGOW HEALTH & SOCIAL CARE PARTNERSHIP DELIVERING SLIS INTERNALLY

3.1 Positives

There was a widespread belief that the **primary positives** of the Glasgow Health & Social Care Partnership delivering SLIS internally rather than outsourcing it focused around:

- The continuity of support for clients through seeing the same SLI or SLIs through time (which allows clients to build a relationship and trust in those they work with and allows SLIs to develop a better understanding of the broader needs and circumstances of clients, which was seen as being particularly important for clients who have mental health issues, have physical disabilities or learning difficulties)
- SLIs working in conjunction with others in the Glasgow Health & Social Care Partnership (and, in particular, the Sensory Support Team) which allows better understanding of their respective roles to be developed, helps to build relationships, allows ideas to be exchanged and provides the opportunity for SLIs to work with individuals in the Glasgow Health & Social Care Partnership outwith the Sensory Support Team)

Thereafter, the **secondary positives** of in-house delivery focused around:

- Having dedicated in-house support which can be directly accessed
- Allowing greater flexibility in the provision of interpreting services, in terms of:
 - Access to interpreter services at short notice (particularly in relation to emergency referrals)

- SLIs being able to stay on with a client (for example, when waiting for a social worker or the police) due to the fact that they are employed by the Council (with references being made here, again, to beliefs that interpreters employed by external agencies or freelancers being likely to have a time limit to sessions with a client)
- Interpreters being familiar with Glasgow vernacular (for example, slang terms)

Finally, a number of **more specific positives** were identified in terms of the Glasgow Health & Social Care Partnership delivering SLIS rather than outsourcing it, including beliefs that:

- The broader understanding that SLIs have of social work services adds value to the interpreting support they provide to clients
- In-house delivery would be less costly than outsourcing the service (particularly in terms of the hourly rates for SLIs versus those for external interpreters)
- Service users have confidence that staff have appropriate and sufficient high-level BSL qualifications
- The ethics and values of SLIs are ensured by the fact that they have to strictly apply Council protocols in these regards

3.2 Negatives

There were relatively few negatives identified in terms of the Glasgow Health & Social Care Partnership delivering SLIS internally rather than outsourcing it, with **primary reference** being made here to:

- Ongoing low morale amongst SLIs if changes made to the service are not to their satisfaction and if current management arrangements and relationships continue

- A belief that the current situation is not cost-effective (particularly with reference to the 'downtime' of SLIs)
- The potential for improvements in the service being limited by a lack of funding (in the current financial environment within Local Authorities)
- Beliefs that SLIs will continue to be difficult to manage

Thereafter, reference was made to a number of **other negatives** here, namely:

- A degree of resentment by others in the Glasgow Health & Social Care Partnership relating to the level of salaries for SLIs in respect of when they are inactive (i.e. not involved in the arrangement and delivery of an interpreting service)
- The potential for an ongoing poor atmosphere within SLIS
- The perceived likelihood of ongoing issues pertaining to service users getting sufficient access to interpreters
- A belief that the service will continue to not be sufficiently 'deaf lead' and 'deaf focused'

4.0 POSITIVES AND NEGATIVES OF THE SERVICE BEING DELIVERED EXTERNALLY

4.1 Positives

There was minimal evidence of positives relating to the service being delivered externally. However, a number of those interviewed – particularly SLIs and a number of those in the Sensory Support Team – stated that they could identify no benefits of the service being delivered externally (in other words, by an organisation outwith Glasgow City Council).

The **primary positive** identified related to external organisations having access to a greater pool of interpreters which would mean that there is the potential for:

- Quicker access to interpreters
- Fewer problems pertaining to interpreter holidays or absences due to sickness
- The potential to have 24-hour access to interpreters

Thereafter, a **secondary positive** was evident in terms of the potential for cost savings (particularly only paying for services when needed) on the basis that SLIs continue to be paid at times when there is low demand for their service.

4.2 Negatives

There was far greater evidence of perceived negatives associated with the service being delivered externally, with **primary reference** being made here to:

- A loss of continuity for clients (which, as noted on a number of occasions in this report, is seen as being of critical importance in terms of building relationships and trust and interpreters developing a better understanding of the broader needs, difficulties and circumstances of clients)
- Speed of response (particularly to emergency referrals)
- There being a significant potential for “*a backlash from the deaf community in Glasgow*”, together with the opposition to outsourcing by Unison (both of which have the potential for significant reputational damage for the Glasgow Health & Social Care Partnership and Glasgow City Council more generally through, for example, negative media coverage)

Thereafter, a range of **secondary negatives** pertaining to external delivery were identified, namely concerns about and beliefs relating to:

- Concerns about the lack of a broader understanding of services delivered by the Glasgow Health & Social Care Partnership – and, indeed, other services – amongst outsourced interpreters
- Externally sourced interpreters being time-limited in their sessions, i.e. being booked for a particular ‘slot’ which they may not be able to extend should circumstances demand
- Interpreters employed by external agencies and freelancers taking a booking and, thereafter, cancelling it due to receiving “*a better offer*”, i.e. an alternative booking which pays more money or is more suitable to them (for example, in terms of geographical location)
- Externally delivered services being more costly (particularly in terms of hourly rates)
- External interpreters not being as accountable or having the same duty of care as SLIs
- External delivery lengthening the process – and making the process more complicated – to access interpreters
- Loss of the collective expertise of the SLI

Finally, **more specific negatives** were noted as being associated with the external delivery of the service, namely:

- Beliefs that interpreters employed by external organisations are dealt with badly and are often on zero-hour contracts
- Beliefs that outsourcing may be out of step with Scottish Government legislation and requirements
- Concerns about the lack of a guarantee as to the quality and abilities of outsourced interpreters
- Beliefs that there may be potential issues regarding outsourcing statutory work

- Concerns about potentially disadvantaging deaf people due to beliefs that they may have less access to sign language interpreter services
- Concerns about interpreters not being from Glasgow and, therefore, not having a sufficient understanding of Glasgow vernacular and the broader culture of Glasgow (particularly in terms of its deaf community)
- Beliefs that externally sourced interpreters may not be fully trusted by the deaf community in Glasgow

5.0 SUPPORT FOR THE SERVICE BEING DELIVERED EXTERNALLY

The vast majority of those interviewed were unsupportive of sign language services being delivered externally. This was **primarily** due to:

- Concerns about loss of continuity for clients, on the basis of a likelihood that they would be dealing with different interpreters through time (with particular reference being made here to beliefs that *“clients will just become numbers for external providers”*)
- Concerns about the negative impact on the speed and quality of service delivered to clients
- Beliefs that the external delivery of the service would be opposed by the deaf community in Glasgow
- Concerns about job losses (which were particularly opposed by SLIs and Unison)
- Concerns amongst SLIs regarding being redeployed within Glasgow City Council, which they were very largely against and believed would be *“a waste of their skills and expertise”*
- Concerns amongst service users that external interpreters may not have sufficient understanding of their needs in order to fulfil them to

a high standard (including internal clients making reference to concerns about the lack of knowledge of specific Glasgow Health & Social Care Partnership services)

Thereafter, a number of **other reasons** were cited for lack of support for the service being delivered externally, namely:

- Concerns about potential issues regarding the Council fulfilling statutory and legal requirements
- Beliefs that external delivery would be opposed by existing clients, on the basis that they receive a good service from the SLIs

Beliefs that processes will become longer and more complicated in terms of finding, booking and briefing interpreters and, thereafter, receiving informed feedback from them

- Concerns about external deliverers not having the same dedication to their duty of care to clients

Those who were supportive of the service being delivered externally **primarily** stated that they would be so if:

- It could be demonstrated that external interpreters had the same knowledge and skills of SLIs
- The service could be streamlined, with some elements continuing to be delivered in-house (particularly in terms of emergency/urgent needs and the delivery of services to the Glasgow Health & Social Care Partnership) and others being delivered externally (particularly those provided to external clients and, potentially, clients elsewhere in Glasgow City Council)

It should be stressed, however, that whilst a number of those interviewed were supportive of a streamlined hybrid approach, others believed that this would not be effective or feasible.

6.0 A LOCAL AUTHORITY PERSPECTIVE

6.1 Reasons for Outsourcing the Delivery of Sign Language Interpreter Services

Those interviewed within Local Authorities as part of the review **primarily** stated that their Council outsourced the delivery of sign language interpreter services due to the fact that there wasn't a business case for it, i.e. that there was not sufficient demand to deliver the service internally (due to the small

number of individuals in the deaf community in their Local Authority area who required interpreter support).

In addition, reference was made here to outsourcing the delivery of these services due to there being a lack of budget to provide them (allied to the demand issues noted above).

It is also of interest to note that two of those interviewed stated that they had three external providers who are asked to tender when there is a requirement for sign language interpreter services, all of which are required to demonstrate their ability and resources to do so.

In addition, it was noted by one of those interviewed that the freelance interpreters are employed on an ad hoc basis.

6.2 Positives of the Service Being Delivered Externally

For the Local Authorities interviewed, the **primary positive** of sign language interpreter services being delivered externally was that this was a more cost-effective approach and, in particular:

- Only having to access – and pay for – services when they are needed
- Avoiding costs to support interpreters (i.e. by reducing departmental fixed costs due to the lack of need for their management, supervision, etc.)

In addition, reference was made here to not having to deal with – and manage – the issue of variability in demand through time.

It should also be noted that a **further positive** identified by one of those interviewed was that he had the opportunity to observe interpreters at meetings and other events and, thereafter, approach them regarding the potential use to deliver sign language interpreter services to their Council –

either directly on a freelance basis or through the companies for whom they worked.

Furthermore, it should be noted that one of those interviewed stated that external sourcing of interpreter services gave her Local Authority “*access to a suite of sign languages, including people who sign differently and those for whom English is not their first language*”.

6.3 Negatives of the Service Being Delivered Externally

The **primary negatives** identified by the Local Authorities interviewed pertaining to the external delivery of the service focused around:

- Getting access to interpreters at times (particularly for emergency referrals) and, accordingly, having to work within the time frames of external providers
- Having no control over the quality of interpreters (albeit, in the main, the quality they deliver tending to be good)

Thereafter, **more specific negatives** were noted here in terms of:

- The reliability of external interpreters (with experiences of interpreters cancelling bookings due to “*having a better offer*”)
- Not building in-house expertise
- The relatively high hourly rate of external interpreters (albeit in the context of a belief, as noted earlier, that this approach represents good value for money)
- External providers on their tender list, at times, not having sufficient capacity

6.4 The Positives of Local Authorities Delivering Services Themselves

Those interviewed in the three Local Authorities stated that there could be two **primary positives** of their Council delivering sign language interpreter services themselves, namely:

- Direct access to in-house interpreters (potentially reducing delays in allocating interpreters to clients)
- In-house interpreters building relationships with clients which will allow them to not only identify their short-term needs but also to identify their emerging needs through time

Thereafter, **secondary positives** were noted in terms of:

- In-house interpreters having familiarity with their Council and what it does (particularly from a social work perspective) and also having an understanding of the local area
- Being better able to control and manage the service (in terms of, for example, quality and reliability)

6.5 Negatives of Local Authorities Delivering Services Themselves

Those interviewed believed that there were **three key negatives** for Local Authorities delivering sign language interpreter services themselves, namely:

Cost (particularly in the context of the resources required to satisfy a small demand for such services)

- In-house interpreters being underemployed and, as a result, requiring to undertake other roles and responsibilities within the Council (which could pose logistical and management difficulties)
- The Council training and developing interpreters (including experienced interpreters) who may subsequently leave the Local Authority (and, as such, representing a poor investment by their Local Authority)

6.6 Should Other Local Authorities be Delivering Sign Language Interpreter Services Internally or Externally?

Those interviewed within the Local Authorities were very largely in favour of Councils delivering sign language interpreter services internally if:

- There was a sufficient critical mass of clients
- Demand could be identified for sign language interpreter services from other departments within a Local Authority

Preference for internal delivery was also a function of a number of other factors, namely beliefs that:

- In-house interpreters *“get to know their clients better”* (which is better for the client experience)
- It would be more difficult to manage the performance of external interpreters
- Having in-house interpreters build them into the fabric of the Social Work Services Department

The only circumstance identified in terms of preference for external delivery was that *“poor interpreters can be dispensed of quickly and easily”* (which is unlikely to be the case were they to be employed by a Council).

Finally, it should be noted that there was an extent to which those interviewed stated that it was difficult to say whether Local Authorities should be delivering sign language interpreter services internally or externally and that this would be subject to a number of factors being taken into account (including demand, best practice and ability to meet statutory responsibilities).

6.7 Advice and Guidance for the Glasgow Health & Social Care Partnership

There were a number of **primary elements** of advice and guidance that those interviewed within Local Authorities would give to the Glasgow Health & Social Care Partnership in its consideration of delivering sign language interpreter services externally in future, namely:

- *“Ensuring they know what they are purchasing”*, particularly in terms of having sufficient access to interpreters – including shortterm access, when required – and in terms of the quality of the services being sourced externally
- The need to undertake an impact assessment, not only in terms of internal impacts of external delivery, but, more importantly, impacts on the quality of service provided to clients
- Ensuring that there is a business case for external delivery (including reviewing historical and anticipated demand and any potential for untapped demand for these services elsewhere within Glasgow City Council)
- Considering working in partnership with other Local Authorities and organisations to deliver these services (in the context of similar partnerships being in place for other services within Local

Authorities)

Taking into account the potential reaction of Glasgow’s deaf community should the service no longer be delivered internally

Thereafter, a number of **more specific** elements of advice and guidance were provided, namely:

- Considering a hybrid approach to service delivery (i.e. maintaining some elements of service delivery in-house, particularly emergency needs and the needs of other parts of the Glasgow Health & Social Care Partnership and other services in Glasgow City Council) and

delivering other elements of services externally (including those which are less urgent or which are delivered to organisations outwith Glasgow City Council)

- Examining the potential for internal interpreters to undertake other roles and responsibilities within the Glasgow Health & Social Care Partnership and elsewhere
- Using contractors on the Scottish Government's Framework should the service be delivered externally

7.0 OPTION APPRAISAL

Based entirely on the primary evidence gathered during the review process, there are a number of options available to the Glasgow Health & Social Care Partnership, each of which have positives and negatives. These are:

- Maintaining the status quo
- Delivering sign language interpreter services entirely externally
- Adopting a hybrid – or streamlined – approach to service delivery
- Adopting a partnership approach to service delivery

7.1 Maintaining the Status Quo

Maintaining the status quo would have a number of positives and negatives.

Positives

- The ability of SLIs to build relationships and trust with clients
- The availability of the service, particularly in the context of urgent or emergency requirements
- The potential for SLIs to act as an effective conduit between service users and clients
- Having direct access to highly skilled and experienced SLIs
- The ability for SLIs to work in conjunction with others in the Glasgow Health & Social Care Partnership

Negatives

- SLIs continuing to have a tendency to overidentify with clients
- The potential for SLIs, at times, to be underemployed and, at other times, under-resourced

- The potential for ongoing significant absences amongst SLIs which are sickness related
- The potential for ongoing difficulties in managing SLIs

7.2 Delivering Sign Language Interpreter Services Entirely Externally

Delivering sign language interpreter services entirely externally is also associated with a number of positives and negatives.

Positives

- Fewer problems pertaining to interpreter holidays or absences due to sickness
- The potential to have 24-hour access to interpreters
- Removal of difficulties associated with managing SLIs

Negatives

- Loss of continuity for clients
- A potential backlash from Glasgow's deaf community
- Opposition from Unison
- Possible issues regarding outsourcing statutory work
- Loss of the collective expertise of SLIs
- The potential disadvantaging of deaf people in terms of access to sign language interpreter services

- Lack of broader understanding of the Glasgow Health & Social Care Partnership and other services amongst externally sourced sign language interpreters
- The high hourly rates of externally sourced sign language interpreters

7.3 Adopting a Hybrid – or Streamlined – Approach to Service Delivery

Adopting a hybrid – or streamlined – approach to service delivery, as with the first two options, would be associated with a range of positives and negatives.

Positives

- More cost-effective
- Reducing the need for the current number of SLIs
- The ability for SLIs to focus on urgent referrals or needs
- Reduced potential for SLIS underemployment
- Ability to satisfy broader needs within Glasgow City Council and elsewhere in Glasgow
- The opportunity to seek external support at times of unusually high demand

Negatives

- Requirement to redeploy a number of SLIs or make them redundant
- Opposition from Unison

- Costs incurred for external delivery
- The need to manage external partners
- A potential backlash from Glasgow's deaf community
- Concerns regarding interpreters understanding the Glasgow vernacular and, in particular, Glasgow's deaf community
- The potential that outsourced interpreters may not be fully trusted by Glasgow's deaf community

7.4 Adopting a Partnership Approach to Service Delivery

Adopting a partnership approach to service delivery, once again, as with the first two options, would be associated with a range of positives and negatives.

Positives

- The continuing ability of SLIs to build relationships and trust with clients
- More cost-effective
- Reduces potential for SLI underemployment

Negatives

- Management issues when working with other Local Authorities/ organisations
- Potential difficulties in prioritising service delivery between Local Authorities/organisations

- Travel time implications for SLIs
- The potential for ongoing difficulties in managing SLIs
- SLIs continuing to have a tendency to overidentify with clients
- The potential for ongoing significant absences amongst SLIs which are sickness related

7.5 Consideration of Options

In considering the option detailed above, it is of critical importance that consideration is given to the body of evidence gathered throughout the review process in relation to:

- The positives and negatives of SLIS (including addressing negatives or weaknesses and suggestions made for the improvement of SLIS)
- The positives and negatives of the Glasgow Health & Social Care Partnership delivering SLIS internally
- The positives and negatives of the service being delivered externally
- Support for the service being delivered externally

In addition to the evidence and options presented in this regard, the Glasgow Health & Social Care Partnership must also give consideration to:

- The operational, management and strategic implications of its decision
- The cost and other financial implications of the decision made

- The views of Local Authorities which deliver sign language interpreter services externally

Most importantly, however, the Glasgow Health & Social Care Partnership must give careful consideration as to the impact of its decision on the quality of service delivered to clients.

Finally, in the context of the length of time that SLIS has been under review – and the consequent uncertainty amongst SLIS staff, SLIS service users and SLIS clients – a decision must be made as soon as reasonably possible.