FEATURES

Communication essentials
Services, resources and contacts

SERVICES

LEGISLATION

Sexual orientation monitoring
Guidance and information

February is LGBT History Month
The Department of Equality, Diversity and Inclusion helps and supports patients, staff and carers. We also maintain ties with community groups and other public sector organisations. You can find a comprehensive range of resources on www.equalityhub.org, including news, training tips, events, guidance, Easy Read booklets and much more.
Effective communication underpins much of the work in healthcare settings. For example, the patient interview is the most commonly used procedure that healthcare workers employ. Communication is a skill which relies heavily on our ability to interact with people from a wide range of backgrounds with different needs, which in turn requires an understanding of diversity, equality and inclusion.

Research supports the benefits of effective communication and health outcomes for patients and healthcare teams. In general it can help improve adherence to treatment, participation care and self-management. Further, communication among healthcare team members influences the quality of working relationships, job satisfaction and has a profound impact on patient safety.

In general, all the rules that apply to effective communication with patients are also relevant when it comes to communicating with colleagues. At times you will require additional support when establishing a dialogue.

Below are some of communication tools that the Trust provides. By the summer of 2018, you will also have the option of using video relay for British Sign Language (BSL) and overseas languages.

- Face-to-face interpreters (Two companies SIS and Vandu provide our services. You can make advanced bookings or call them using their emergency number.)
- Telephone interpreting (24/7 services provided)
- British Sign Language (BSL)
- Pictorial representations using the Hospital Communication Book
- Written translation
- Braille
- Easy Read
- Large Print

Fast facts - Communication at BSUH
- Over 4,000 face-to-face interpreting sessions annually.
- Over 60 different languages used by patients.
- Most requested languages - Arabic, Bengali, Farsi, Mandarin, Polish.
- Over 800 BSL sessions per annum.
Communication contact list

**Overseas Language Interpretation**

**Sussex Interpreting Services**

Non-Emergency: 01273 702005  
Emergency: 07811 459315  
Online booking form (elective procedures): [http://www.sussexinterpreting.org.uk](http://www.sussexinterpreting.org.uk)

*If Sussex Interpreting Services is unable to fulfill a request OR the patient has an established link with an interpreter from Vandu:*

**Vandu Language Services**

Non-Emergency: 01273 473986  
Emergency: 0800 008 7650  
Online booking form (elective procedures): [http://www.vlslanguages.com](http://www.vlslanguages.com)

**Telephone Interpreting (Overseas Languages)**

**ITL**

Telephone: 0845 055 2197

**British Sign Language (BSL) and Lip Speaking**

**Action Deafness**

Non-Emergency: 0844 593 8443  
Emergency: 07947 714040  

**Patients with Learning Disabilities**

The Learning Disabilities Liaison Team can provide support and advice for both Trust staff and Patients with Learning Disabilities. The team are available Monday to Friday between 08:30-16:30.

Telephone: 01273 664975 (RSCH) or 07833 436677 (PRH)  
Email: LDLT@sussexpartnership.nhs.uk

**Patients with Speech and Language Impairments**

The SLT can assess, support and provide therapy for patients with an acquired language or communication difficulty, including: post stroke, a progressive neurological impairment or a head injury or other acquired brain injury. SLT can also perform swallowing assessments and assess mental capacity for these patients.

Telephone: ext. 4891 (RSCH) or 8057 (PRH)
What is sexual orientation?
Self-perceived sexual orientation is a subjective view of oneself. It is about who a person is, how they identify, not what they do. It is about the inner sense of self, and perhaps sharing a collective social identity with a group of other people. Sexual orientation covers bisexuals, gay men, heterosexuals and lesbians.

What is monitoring?
Monitoring is the systematic collection of information to evaluate and improve decision-making and improve organisational learning. The aim is to develop initiatives that better meet needs and lead to improvements in targeted social, economic and structural conditions.

Why is it relevant to the NHS?
Monitoring questions are asked as an opinion; it is up to the individual to decide how they define themselves in relation to the categories available. The information is private and confidential. Without accurate information about how many lesbian, gay and bisexual people use our services, and how they use them, it is hard for us to know exactly if, or how we need to improve.

People continue to experience discrimination in the workplace and when accessing services because of their sexual orientation. This is an equality issue which the NHS is legally required to consider in service delivery to ensure it is addressing health inequalities.

Where can I find guidance?
Monitoring is carried out alongside work to make patients feel confident about service providers. Patients are unlikely to answer the sexual orientation monitoring question honestly if they think the NHS doesn’t take the issue seriously.

It is important that lesbian, gay and bisexual people can be open about their sexual orientation with staff. Patients who feel comfortable are more likely to be honest about aspects of their lifestyle that may have an impact on their health. They are also more likely to seek help when they need it, rather than being afraid of potential discrimination.

Babs Harris will be running brief training sessions to ensure that staff are aware of how to ask the relevant questions and also so they have some background information about the initiative.

A handy guide has been developed and you are welcome to contact the Inclusion Team for further information.
Launched in February 2005, Lesbian, Gay, Bisexual and Trans History month gives us all a chance to get to know LGBT history, culture and contributions to society. It is an opportunity to raise awareness of issues that continue to impact LGBT lives and with it sexual orientation and gender identity concerns.

Although the number of countries which legally permit same-sex marriage has grown, just 5 countries in the world explicitly guarantee equal constitutional rights (protecting people in areas such as employment, healthcare, education etc.) on the basis of sexual orientation and gender identity:

- United Kingdom
- Bolivia
- Ecuador
- Fiji
- Malta

In day-to-day situations the LGBT population, those who associate with anyone who is LGBT and those perceived to be a part of the community continue to be harassed and discriminated against. In many countries it can also lead to imprisonment and/or torture.

With over 14% of the local population identifying as LGBT, this month gives BSUH staff a chance to get up to speed on their knowledge and understanding. Try any or all of the following:

⇒ The Equality Hub (www.equalityhub.org) is running a series of short posts highlighting LGBT achievements, events and history over February. Be sure to check in with us to learn a little more about LGBT rights. There are also short guides and booklets on the LGBT population and healthcare.

⇒ The LGBT+ Forum of BSUH NHS Trust has organised a range of events in February. Check the Trust online events noticeboard for information or follow the Forum on Twitter @BSUH_LGBTQ.

⇒ Ensure there are visible cues in patient and staff areas to indicate that the hospital is a welcoming LGBT space. This can often allay fears and anxiety about anticipatory discrimination. If you require posters and flyers get in touch with the Inclusion Team.

⇒ Check that staff are clued up on LGBT issues. Be prepared to treat and work with people who may need additional support. If staff in your area are uncertain about working with and caring for LGBT people, contact the Inclusion Team to run a briefing session for you.

⇒ LGBT people tend to keep their orientation/identity hidden because they are usually exposed to various forms of discrimination at their workplace (including humiliating or offensive jokes, worsening relationships with colleagues after coming out and ignorance). This further reinforces the invisibility of the LGBT community in the workplace. This can cause a build up of stress, damaging workplace relationships in the long term. Think about ways to make your areas more inclusive.
EDI refresher quiz

1. On average, what percentage of NHS users have a disability?
   A. 7%
   B. 14%
   C. 33%

2. An employee sexually harasses a colleague at a weekend event arranged by the department. Could the employer be liable for the actions of the employee? Yes/No

3. What percentage of gay men and lesbians have been affected by discrimination at work because of their sexuality?
   A. 10%
   B. 25%
   C. 60%

4. What percentage of transgender people have experienced NHS staff making incorrect assumptions about their gender identity?
   A. 12%
   B. 60%
   C. 2%

5. What percentage of people report some form of age discrimination in the workplace?
   A. 40%
   B. 10%
   C. 5%

6. Should an employee who wants to take time off to attend a religious festival be given priority over other employees?

7. You have offered a woman a job which was advertised as full-time, can she ask to work part-time in this role?

Answers: 1) C, 2) Yes, 3) B, 4) B, 5) A, 6) An employee with a religion or belief should not automatically be given priority to take leave. If they are given automatic priority over an employee with no religion or belief, this could be direct discrimination against the employee with no religion or belief. The law protects both individuals with a religion or belief and those without a religion or belief. 7) Yes, they can ask to work part-time or ask to have a different working pattern after you have offered them the job. The ‘right to apply for flexible working’ does not apply until they have been employed for 26 weeks. However, an unjustified refusal may be indirect sex discrimination. You should consider carefully whether the job could be done on the hours or working pattern requested.

Sources: Stonewall, SignHealth, Age Concern, Equality and Human Rights Commission