

**Service : Hearing Therapy
Equality Impact Assessment Report
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Therapy**

Persons carrying out Equality Impact Assessment: Melanie Ward

1. Introduction

The Hearing Therapy Service delivers a rehabilitation service to people diagnosed with hearing loss and associated conditions and symptoms.

The service takes referrals from Ear, Nose and Throat Surgeons and from Audiologists. Some GP referrals and self- referrals are also accepted.

2. What data was analysed as part of this Equality Impact Assessment and what did it tell us?

- Census data
- Departmental PAS data
- National statistics for hearing loss compiled by the Royal National Institute for the Deaf & the MRC Institute of Hearing Research
- National statistics from SENSE a deafblind charity.
- Departmental audits
- Focus group conducted in November 2007. (Completed for patient feedback on service, not specifically for the equality impact assessment)
- Local data regarding Race, Sexual Orientation & Religion/Belief

3. Assessment of impact on equality groups

3.1 Race

The impact/potential impact on different black and minority ethnic groups:

Results of PAS data

Not all patients using the service have been asked about their ethnicity. This was noted in 2007 and an increased effort has been made to improve data collection.

In 2007 25% of patients were asked about their ethnicity. In 2008 50% were asked.

The data shows that in these 2 years only 1 person stated they were not in the category of 'White British' or 'Any other White' background. They categorised themselves as 'Asian or Asian British – Bangladeshi'.

Service Details

- A further improvement in data collection is still needed.
- A questionnaire has now been attached to the paperwork that goes to patients newly referred.

Impact = Unknown

Results of RNID & IHR national data on black and minority ethnic people with hearing loss

There are an estimated 3,663,000 people from a minority ethnic group in the UK. If the pattern of deafness in the general population is repeated in the minority ethnic community, we could estimate that in the UK approximately 500,000 black and minority ethnic people are deaf or hard of hearing. But these figures should be treated with caution. They do not take into account the age profile of different black and minority ethnic communities or account for recent immigrants who may have come from regions with greater levels of poverty, poor health care and low levels of immunisation against diseases such as rubella.

Service Details

- It is difficult to review the impact upon different ethnic groups considering the lack of reliable data available.
- The service was recently asked to take part in the BEMSCA (black and ethnic minority senior citizen association) rolling education programme during 2009. This will provide an opportunity to receive feedback from people regarding any issues of discrimination, access to service and suitability of clinical services.

Impact = Neutral / Unknown

3.2 Gender

The impact/potential impact of the service on women, men and transgender people:

Results of RNID & IHR national data for gender and hearing loss:

From the age of 40 onwards, a higher proportion of men than women become hard of hearing. This is probably because more men have been exposed to high levels of industrial noise. Among people over the age of 80, more women than men are deaf or hard of hearing. This is simply because women tend to live longer than men, not because women are more likely to become deaf.

Service Details

- Analysis of PAS data shows a slighter higher referral rate for women. However the attendance rate for appointments was evenly split.

Impact = Neutral

- All therapy staff are female, however clinical practice only involves minimal and occasional physical contact with patients.

Impact = Neutral

- No feedback from patients has been undertaken regarding gender and specific issues such as the lack of male staff or experience of transgender people.

Impact = Unknown

