



Condition Insight Report (CIR)

Deafness

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Version 1.2

Completed in collaboration with
Sense and RNID

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Overview

What is the condition usually called/ any abbreviations used?

Deafness, hearing loss, hearing impairment.

Brief overview of the condition

The term "deafness" refers to a partial or complete loss of hearing. Deafness may be conductive or sensorineural. Conductive deafness results from disorders of the external ear, eardrum, middle ear and acoustical link to the inner ear.

Sensorineural (nerve deafness) results from disorders in the inner ear-the cochlea or acoustic nerve.

Loss of hearing can be temporary or permanent. Some individuals are born with it; however, hearing loss can also progress over time.

What is the generally preferred term for someone with this condition?

An individual living with deafness.

Not all individuals will find the term hearing loss appropriate as those born with it do not feel they have 'lost' anything.

Presenting Symptoms

Hearing loss may be mild, moderate, severe, or profound. It can affect one ear or both ears and leads to difficulty in hearing conversational speech or loud sounds.

'Hard of hearing' refers to people with hearing loss ranging from mild to severe. People who are hard of hearing usually communicate through spoken language and may benefit from hearing aids, cochlear implants, and other assistive devices as well as captioning.

'Deaf' people mostly have profound hearing loss, which implies very little or no hearing. They often use sign language for communication.

Some deaf people communicate through British Sign Language and will need a BSL interpreter or an ISL interpreter for Irish Sign Language . Others may utilise lip reading.

It is important to remember that within the scope of PIP, lip reading is not considered to be an acceptable means of communication

REMEMBER: We must look at the impact of the hearing impairment on the whole and not just the ear.

Fluctuations



The impact of deafness on daily living and tasks can be highly variable depending on context which includes acoustic and lighting conditions, deaf awareness of others, use and benefit from hearing aids or implantable devices, and cognitive/developmental level of the individual etc.

Listening is a learned skill which takes attention, focus and energy. This means that listening is physically exhausting for deaf people relying on hearing with hearing aids and implantable devices. Whilst they may manage extremely well in the one-to-one interview environment, this does not take account for energy levels in the real world. It is much more of an effort for them to listen and interact for longer periods.

Think about exploring things like:

- Does noise interfere with the claimant's hearing aids and reduce the level of hearing further?
- Do you lip read?
- Do you have bilateral hearing loss?

Reliability

What specific areas should be covered to ensure a complete, reflective report?

SAFETY



Do they have any symptoms which could cause a safety consideration?

A person's hearing may vary considerably when out of the home environment and it must be considered if the level of hearing is safe when thinking about their ability to plan and follow a journey.

TIMELY



For any activities where restriction is reported how long does it take them to complete these activities? Has how long it takes them changed over time?

Does it take them a long time to process information that is being given to them? Can they respond in a timely manner?

ACCEPTABLE
STANDARD



How have they adapted to completing tasks over time – is this different to what might be considered 'normal'?

Hearing aids and cochlear implants do not restore normal hearing. Hearing aids amplify sound, which can improve the wearer's ability to hear one-to-one conversation well. In a quiet environment like the PIP assessment room, they may be very beneficial. However, most speech is heard in background noise and hearing instruments will pick up all sounds including that background noise.

REPEATEDLY



Are they able to repeat a task as often as required? Is this the same every day?

Hearing instruments are unable to discriminate between speech frequencies of an individual voice the wearer wishes to listen to, from speech frequencies in the nearby environment. In an environment with background noise hearing instruments are far less beneficial and may even make it harder for the deaf person to understand speech.

Considerations

What adaptations should be considered to fully support someone with hearing loss?

- Think about how you can facilitate the best way to communicate with someone with hearing loss.
- Are their aids adequate to support assessment completion?
- Is there background noise that may impact their ability to complete the assessment?
- Do they require a BSL/ISL interpreter? Has this been arranged?
- Do they require communication support for the assessment? Are they lip reading?

Someone needing to write down their responses or ask you to write down your questions would not be considered an appropriate adaptation in an assessment and further support should be sought.



Customer Care

How is it best to ask about any sensitive topics and what are the common courtesies?

All communication should be made directly, asking open questions to allow the claimant to expand on how their condition impacts their function. This will include providing opportunities for examples of difficulties they have day to day and adaptations they have made to manage their condition.

It is imperative that you offer breaks throughout the assessment. You must consider the cognitive fatigue caused by utilising BSL for prolonged periods of time.

During face-to-face interactions

- Ensure seating arrangements are made to best suit the claimant. Consider they may be lip reading.
- Try and avoid light being behind you as this may cast shadow onto your face and cause difficulties with communication.
- Allow and encourage companion support if required.

During telephone interactions

- Ensure you speak clearly and do not rush.
- Allow time for the claimant to hear your question and respond appropriately.
- Allow and encourage companion support if required.

During video interactions

- Ensure your background is plain with minimal colour/distractions.

If the customer has requested a BSL/ISL interpreter or lip speaker, the assessment should not go ahead without this. Failure to provide an interpreter or lip speaker if requested or needed is a breach of the Equality Act. The assessor should allow the interpreter or lip speaker in consultation with the customer to decide on the best seating arrangement for the assessment.



Functional Impact

A brief summary of the area's most likely to be functionally impacted by deafness, within the scope of PIP.

Activity 7: Communicating Verbally

Although many people with hearing loss will rely on lip-reading (or speech reading) to support their understanding of spoken language, this may only be partially successful. Deaf people can often have speech that is difficult to understand.

Remember in PIP...

The person must be able to both **express** and **understand** verbal information. Lip reading is not considered an acceptable way to communicate. You must explore how someone manages when communicating out of the home. Do they utilise BSL/ISL? Do they have bilateral hearing loss or unilateral? Can they manage with background noise?

Activity 8: Reading and understanding.

As a result of their hearing impairment, their levels of language and literacy development may be markedly below their hearing classmates, despite a normal range of intelligence. This may impact on their ability to read as written English is often not their first language.

Remember in PIP...

You must consider the claimant's ability to read and understand both simple and complex written information. How did they manage in education? What support did/do they have? What level of qualifications have they obtained?

Functional Impact

A brief summary of the area's most likely to be functionally impacted by deafness, within the scope of PIP.

Activity 4: Washing and Bathing

You must consider if someone has profound hearing loss or utilises bilateral hearing aids, how they manage to hear when in the bath or shower.

Remember in PIP...

You must explore a claimant's level of hearing when in the bath or shower. Could they hear a fire alarm if they are profoundly deaf? Also, if someone utilises aids, how would their hearing be if their aid is removed when washing and bathing? An aid could be considered here if they have profound hearing loss without the aid.

Activity 11: Planning and following a journey

Someone who has profound hearing loss is likely to have difficulty when hearing out of the home. This could include traffic or public announcements.

Remember in PIP...

Within the scope of the activity, someone must be able to plan and follow both familiar and unfamiliar journeys. This must include the ability to follow a diversion. Ensure you explore if someone can hear a train announcement for example. Even if someone drives, this does not necessarily mean they can plan and follow journeys unaided, as public transport must be considered.

Functional Impact

A brief summary of the area's most likely to be functionally impacted by deafness, within the scope of PIP.

Activity 9:Engaging with other people

People with a hearing impairment may also suffer from mental health issues as a result of difficulties engaging with hearing able and social isolation.

Remember in PIP...

Although hearing is not covered within the scope of this activity, we must consider the detrimental impact of a hearing impairment and this leading to potential anxiety or depression. If someone does report difficulties with engaging, who can support them? Who do they engage with on a regular basis? If someone specific supports, why is this? How do they feel engaging with unfamiliar people?

Points to remember

- People with a hearing impairment will often struggle to access mental health services due to their hearing difficulties impacting their ability to engage in things such as group therapy.
- According to one study, people with hearing loss are 50% more likely to suffer from depression than those without a hearing impairment

The Health of Deaf People in the UK.

Some interesting and important findings from the 'Sick of it' report.

Most of the necessary actions are simple and cost-neutral, or cost-saving, in terms of improving access to services, communication with health staff, and improved management.

A REPORT INTO THE HEALTH OF DEAF PEOPLE IN THE UK



There is a large, avoidable cost to the NHS because of these health inequalities (in excess of £30m/year)

High blood pressure was almost twice as common in Deaf people as in the rest of the population.

Deaf people are twice as likely as hearing people to have high blood pressure which has not been diagnosed. They may also be more likely to have undiagnosed diabetes, high cholesterol and cardiovascular disease.

Services are not allowing Deaf people to communicate in their preferred language (BSL)

Deaf people have generally healthier lifestyles than the rest of the population in terms of smoking and alcohol, but are more likely to be overweight.

Health information is not accessible to Deaf people.

Functional Impact

Bearing in mind the last slide, consider any co-morbidities that may impact the other activities as per below:

Activity 1: Preparing and cooking a simple meal

Remember in PIP...

The claimant must be able to make a simple meal for one. How long can they stand? Can they chop vegetables? Can they lift pans? Are they motivated? Are there any safety concerns?

Activity 5: Managing toilet needs

Remember in PIP...

Can they sit and stand from the toilet? Can they clean themselves? Do they experience incontinence?

Activity 2: Taking nutrition

Remember in PIP...

Can they chew, swallow and bring food to their mouth? Do they eat without prompting and are they at risk of choking?

Activity 6: Dressing and undressing

Remember in PIP...

Can they dress their entire body? Can they dress whilst seated? Can they select appropriate clothing?

Activity 3: Managing medications

Remember in PIP...

Can they manage their own medication or therapy unaided?

Activity 10: Making budgeting decisions

Remember in PIP...

Can they understand change in a shop? Can they manage their own finances and plan for future purchases?

Additional reading or other resources

EXTERNAL

- Disability Matters is a free online e-learning resource for the UK workforce designed to challenge and positively change our own and others' fears, ideas and attitudes towards disability and disabled children and young people. Deaf Communication Matters uses short film clips of deaf children and young people sharing some of the typical barriers they encounter and show us simple steps to take and adjustments to make to overcome those barriers and enable successful interaction with them. www.disabilitymatters.org.uk/course/view.php?id=72
- Understanding deafness: www.ndcs.org.uk/family_support/childhood_deafness/understanding_childhood_deafness/
- For further information see NHS Conditions and Treatments: <https://www.nhs.uk/conditions/hearing-loss/>
- [A Silent World: A Hearing Impaired Life – YouTube](#)
- [Report: Sick Of It - SignHealth](#)

INTERNAL

- The 'Communicating with deaf and hearing impaired people' Factsheet will provide you with guidance on working with a BSL interpreter which.
- We also have a CPD module on Visual and Hearing Impairments.
- Please also see the [British Deaf Association Video](#) which is a presentation given by two British Deaf Association representatives to Capita staff in March 2018.

Version control