

[Bil Iaith Arwyddion Prydain (Cymru) | British Sign Language (Wales) Bill]

**Senedd Cymru**

**Y Pwyllgor Cydraddoldeb a Chyfiawnder Cymdeithasol**

**Ymchwiliad:** Bil Iaith Arwyddion Prydain (Cymru)

**Ymateb gan:** Bwrdd Iechyd Prifysgol Hywel Dda

**Welsh Parliament**

**Equality and Social Justice Committee**

**Inquiry:** Bil Iaith Arwyddion Prydain (Cymru)

**Evidence from:** Hywel Dda University Health Board



# Welsh Parliament Consultation: British Sign Language (Wales) Bill

## Hywel Dda University Health Board (HDdUHB) response (Submission via email)

### 1. Background

#### Purpose of the consultation

The Senedd's Equality and Social Justice Committee is undertaking Stage 1 scrutiny into the general principles of the British Sign Language (Wales) Bill. A copy of the Bill and its accompanying explanatory notes can be found on the Senedd's website.

The Committee would like to invite you to submit [written evidence](#) as part of its consideration of the general principles of the Bill. In responding to the consultation you may wish to give a view on the Committee's terms of reference.

#### Terms of reference

The Committee would like to hear your views on the general principles of the British Sign Language (Wales) Bill and the need for legislation to deliver the stated policy intention.

The closing date for submissions is **12 September 2025**.

### Providing Written Evidence

The Senedd has two official languages, Welsh and English.

In line with the Senedd's Official Languages Scheme

(<https://senedd.wales/commission/senedd-commission-policy/official-languages/>)

the Committee welcomes contributions in both or either of our official languages, and we ask organisations that are subject to Welsh Language standards or schemes to respond in line with their own obligations. Please inform the Committee when submitting responses if you intend to provide a translation at a later date.

We are also welcoming responses in BSL – these can be submitted via video upload through this online form.

Please see guidance for those providing evidence for committees.

(<https://senedd.wales/senedd-business/committees/getting-involved-with-committees/>)

## 2. Capacity

Are you submitting this response in a professional or a personal capacity ?

Professional

*Section 3B is only applicable to those responding in a PROFESSIONAL capacity*

### 3B. About you / your organisation

If you are **submitting a response on behalf of an organisation** or **as a professional** please enter your details here.

If you are responding **on behalf of an organisation**, we will publish the name of the organisation but will not publish your name or contact details.

**As you are responding in a professional capacity, are you responding on behalf of an organisation? \***

Yes

#### Organisation

Hywel Dda University Health Board

**Please provide the information below: \***

Name

Role

Contact email address

Contact telephone number

**Do you wish to receive email updates on the Bill's progress \***

Yes, please

**In which language(s) are you submitting?**

I am submitting in English only

## **Submission**

I wish to submit my response via email.

## **4. Your Views**

The Committee would like to hear your views on the general principles of the British Sign Language (Wales) Bill and the need for legislation to deliver the stated policy intention. In coming to a view you may wish to consider the Bill's key provisions which consist of:

- A duty on Welsh Ministers to promote and facilitate the use of BSL;
- A duty on Welsh Ministers to publish a National BSL Strategy;
- A duty on Welsh Ministers to publish guidance;
- A duty on specified public bodies to publish BSL plans;
- The appointment of a BSL adviser;
- Reporting duties to be imposed on the public bodies and Welsh Ministers in relation to these duties;
- The appropriateness of powers in the Bill for Welsh Ministers to make subordinate legislation.

### **HDdUHB Response:**

The Health Board supports the Bill's principles and its aim to enhance communication and inclusivity for BSL users, including patients, families, and staff. We welcome the requirement to publish a BSL plan within 12 months of the strategy's release but recommend alignment with the Welsh Government's refreshed All-Wales Standards for Accessible Communication to avoid duplication and ensure coherent governance and reporting.

You may also wish to consider:

- **Any potential barriers to the implementation of the Bill's provisions and whether the Bill takes account of them**

Lack of BSL interpreters and awareness.

There is a notable shortage of qualified BSL interpreters in Wales to meet the increased demand the BSL Bill will create. The number of qualified interpreters will need to be increased, with 24 hour/ 7 days a week provision to support the listed bodies in the provision of BSL interpretation and to produce published documents in BSL, particularly when listed bodies will be requesting BSL versions of their BSL plans and annual reports at the same time. The Explanatory Memorandum states there is a lack of interpreters, particularly in West, mid and North Wales but does not outline a strategy to address this crucial shortage.

The language used in the Bill is not definitive enough, for example, the Welsh Ministers are going to "encourage listed public bodies to promote and facilitate the use of BSL..." [section 2(1)(b)] and "requires public bodies to describe how they are going to follow the BSL guidance" or "explain why it does not intend to do so" [section 2]. This risks inconsistent implementation across Wales and fails to establish BSL as a right, rather than a recommendation. Also, allowing public bodies to opt out by explaining "why it does not intend to do so" creates a loophole that could be widely exploited. The Bill must include clearer obligations and accountability mechanisms. The Bill could be enhanced if it is clear in its description of the consequences if a listed body ignores the Bill.

There is conflict, occasionally, between different legislation and/or best practice. For example, the Welsh language commissioner favours fully bilingual materials, but this creates a conflict in terms of mixing languages in one product/information. A scenario could be that we use BSL but are then conflicted in terms of do we add subtitles (BSL users may find this distracting) and/or if we do add subtitles to a BSL resource, in Wales should these be in Welsh or English, or both in one product or as two products?

The Bill does acknowledge some of these challenges through its proposal to appoint a BSL Commissioner and issue guidance to public bodies, but further clarity on resourcing, assessment of in what circumstances translation is needed (i.e. would a media targeted piece of communication or a press release need translating) and implementation support would be beneficial.

- **The appropriateness of the powers in the Bill for Welsh Ministers to make subordinate legislation.**

The list of public bodies in section 8(1) of the Bill is too limited, omitting key services like public transport services, and Police. The delegated power for Welsh Ministers to amend this list is therefore welcome.

The Bill would benefit from clearer guidance on regional collaboration between public bodies, similar to the governance models under the Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015 and the Social Services and Wellbeing (Wales) Act 2014, as referenced in the Explanatory Memorandum.

- **Whether there are any unintended consequences arising from the Bill;**

Without additional funding, listed bodies may need to reallocate existing budgets to meet the Bill's requirements, potentially impacting other services—or risk non-compliance.

BSL interpretation costs are unpredictable and likely to rise with implementation. Recording BSL use among patients and staff will also require updates to NHS data systems such as Welsh Patient Administration System (WPAS) or Electronic Staff Records (ESR) which currently do not track and highlight BSL as a preferred language the same way they track and record Welsh speakers.

As detailed above, it may create complexities in adhering to other best practice in accessibility, for example, there is conflict occasionally between different legislation and/or best practice.

For example, the Welsh language commissioner favours fully bilingual materials, but this creates a conflict in terms of mixing languages in one product.

Without a clear plan or guidance to support other sign language users in the long term, such as Deaf refugees and asylum seekers the Bill may also unintentionally exclude them from effectively using services of the listed bodies.

- **The financial implications of the Bill.**

Financial implications are a key concern, as already highlighted in question 3 (unintended consequences of the Bill).

BSL training involves significant costs—course fees, staff time, and ongoing Continuing Professional Development (CPD). While initial funding is outlined, the Bill lacks a long-term strategy to embed BSL into workforce development. A national funding plan is essential for sustainability and consistency.

The impact on communications could be substantial, potentially requiring in-house BSL translators and appointing a BSL officer or a senior lead in each listed body all of which require funding. With limited accredited BSL professionals in Wales, recruitment would also be challenging.

Additionally, the Bill may conflict with existing accessibility standards, such as bilingual requirements, raising practical issues around subtitles and language formats in communication materials.

In addition to your views on the Bill, we would be grateful for any information you can provide in response to the following questions:

- **What provision is there currently within health services to meet the communication needs of Deaf BSL users?**

All staff have access to accredited interpreter and translation services and the health board's interpretation and translation policy outlines the importance of using BSL interpreters to support communication with patients and carers.

HDdUHB has an established Sensory Loss Health Action Plan aligned with the All-Wales Standards and Equality Act 2010, including actions to support communication needs of Deaf BSL users. For example, in 2025–26, we aim that “Our clinical staff and all other members of staff with direct contact with patients will be confident in how to communicate with people with sensory loss and access a BSL interpreter where needed”. This will be achieved by continuing to promote the health board's guidance on accessing Interpretation and Translation Services', Sensory Loss awareness course on Electronic Staff Record (ESR) and supporting staff to learn basic BSL through the in-house BSL staff lunch club and access accredited BSL training outside of the organisation.

Tools such as the “Can We Help” poster, ward iPads to access Language Line/online BSL interpreters', and a WPAS staff guide for identification and recording of BSL users and needs help to promote and facilitate the use of BSL.

The Health Board has started work to gather and report both the baseline and continuing improvement data on the number of patients who are BSL signers and aims to evidence service performance such as ‘How many requests for BSL interpreters were successfully provided’, ‘How many requests were not met’ and ‘How many DNA/CNAs recorded among BSL users where interpreters were booked’ through its bi-annual reporting mechanism and the organisation's Sensory Loss

Friendly Self-Assessment Checklist project. Qualitative feedback from staff and BSL signers on the use of BSL interpretation services are also gathered and reported in the Health Board Sensory Loss Annual Report.

The Health Board BSL Lunch Club for Staff is continuing to grow as a social group and support mechanism and encourages staff to learn basic BSL and those with BSL skills to maintain and share those skills.

- **How does this provision differ for: scheduled health appointments; emergency or urgent care; and Digital channels.**

In Primary Care, access to BSL interpreters is available in all practices but is not a standard practice across all GP, dental, optometry, and pharmacy services. Whilst there are ways of accessing practices via email, NHS app and in person, the majority of practices use telephone for booking urgent or same day appointments and people whose first language is BSL are excluded in being able to access the majority of appointments when they open up for the day. .

Many GP practices have information screens which provide information on community services and third sector information for reading and are used as visual call systems to alert patients in the waiting room when the clinician is ready for their appointment. Some have audio call systems only and some have neither. Some information/advert videos on information screens in practices will have subtitles but not a BSL interpreter on screen.

The Health Board strives to provide accessible content, with improvements made following a 2023 audit by the Government Digital Service. Our website is partially compliant with Web Content Accessibility Guidelines (WCAG) 2.1AA, with ongoing work to meet WCAG 2.2AA. Accessibility features include plain language, transcripts for media, and guidance for Deaf users via Relay UK and induction loops. We prioritise BSL materials for service consultations and promote them via multiple channels.

While we lack a reliable digital screen system, BSL videos have been used when available. Our appointment booking process includes preferred language and BSL interpreter needs. Interpreter access is generally reliable for planned appointments, and communication preferences are recorded in patient notes.

A barrier when accessing urgent/emergency care is that BSL interpreter provision is limited and the interpreter service that the health board commissions only provides BSL interpreters Monday to Friday 9am – 5pm which we have been advised is due to

the lack of interpreters. In addition, most BSL interpreters are based in the south-east of Wales, which creates a lack of local interpreters for West Wales and, where face to face interpreters are needed, increased costs/time due to the travel required by the interpreter.

- **Are there any current plans or projects within your organisation aimed at improving communication support for Deaf BSL users accessing health services?**

HDdUHB has several ongoing initiatives to improve communication support for Deaf BSL users. These include the Sensory Loss Friendly Self-Assessment Checklist, which helps services like Outpatients and Audiology meet All-Wales Standards and improve staff training, interpreter access, and recording of communication needs.

A staff guide for recording patients' sensory loss on WPAS has been developed and promoted, with efforts to increase data on Deaf and BSL users and ensure support is provided during hospital appointments. The Health Board Strategic Equality Plan includes an action to deliver a programme of awareness raising training on topics related to protected characteristics which are in addition to the mandatory requirements, including sensory loss. A number of training and staff awareness activities are in place to contribute to the above action as well as the Standards for Accessible Communication and Information for People with Sensory Loss. The Health Board's Sensory Loss Partnership Forum continues to collaborate across professional and community groups and use platforms like SharePoint, Teams channels, and social media to promote BSL-related information. National campaigns such as Sensory Loss Awareness Month, Deaf Awareness Week and Sign Language Week are actively supported.

Audiology services deliver mandatory deaf awareness training among clinical staff, and staff are encouraged to participate in Sensory Loss Awareness Month and BSL training.

The Communications and Engagement Team ensures accessible public communications, including BSL interpreter support at events. The "Contact Us" page provides information on Relay UK, hearing loops, and access to BSL interpreter services.

The Hywel Dda Post (Patient Hub) allows patients to manage appointments and is continually being developed to better meet sensory and communication needs, including Easy Read formats.

Bespoke engagement with Deaf groups includes BSL-interpreted consultations and materials. However, concerns remain that communications from other teams may not meet accessibility standards, especially digital platforms and patient letters.

- **What are the main barriers that health services face in improving communication support for Deaf BSL users**

Key barriers to supporting Deaf BSL users include limited staff understanding of BSL as a language and needs of BSL users, lack of funding for BSL and Deaf Awareness training, resistance to using communication technology, and inconsistent understanding of interpreter booking processes. Staff often lack more than basic BSL knowledge, and Deaf individuals may receive appointment letters without confirmation of BSL interpreter arrangements, sometimes causing confusion.

Unlike Welsh language, BSL is not currently recorded in patient or workforce data systems, hindering effective support. Interpreter costs and the requirement to publish reports in BSL under Section 6 of the Bill add further financial pressure.

Wales faces a significant shortage of qualified BSL interpreters, making short-notice bookings difficult and unreliable. A coordinated, Wales-wide interpreter booking system and investment in training are essential to meet the Bill's goals.

Generally, Public sector staff lack BSL awareness, highlighting the need for accessible, community-based training. Families also struggle to access BSL courses to support communication with Deaf children. The Bill could be strengthened by mandating referrals to BSL training for parents and carers.

Engagement activities are often delayed due to agency requirements for 4–6 weeks' notice and interpreter availability issues, including non-attendance despite advance booking.