From: Graham Gibbens, Cabinet Member for Adult Social

Care and Public Health

Penny Southern, Corporate Director of Adult Social

Care and Health

To: Adult Social Care Cabinet Committee - 22 January

2019

Decision No: 19/00004

Subject: Managed Service for Interpreting Services for

d/Deaf and Deafblind People

Classification: Unrestricted

Past Pathway of Paper: Adult Social Care Directorate Management Team

Future Pathway of Paper: Cabinet Member decision

Electoral Division: All

Summary: Kent County Council's (KCC) has a statutory responsibility under The Care Act 2014, Equality Act 2010 and the Accessible Information Standard 2016 to deliver interpreting, translation and transcription services for d/Deaf and deafblind people. The current service is delivered through a contract with an external provider, the Royal Association for the Deaf (RAD). The contract is accessed by other public sector partners and this is regarded nationally as a Best Practice Model, enabling public agencies easy and timely access to a limited resource. Currently the provision requires the spot purchase of freelance qualified interpreters, translation and transcription services by the provider and is not without challenges. The re-provision proposes to recruit three qualified interpreters and one Coordinator to deliver the core of the interpreting work with additional demand met through a Framework Agreement which has integrated use of Video Remote Interpreting (VRI) and Video Relay Interpreting (VRI) Services.

Recommendation(s): The Adult Social Care Cabinet Committee is asked to **CONSIDER** and **ENDORSE**, or make a **RECOMMENDATION** to the Cabinet Member for Adult Social Care and Public Health on the proposed decision (attached as Appendix A) to:

- a) **APPROVE** the reprovision of interpreting, translation and transcription services for d/Deaf and deafblind people; and
- b) **DELEGATE** authority to the Corporate Director of Adult Social Care and Health, or other nominated officer, to undertake the necessary actions to implement the decision.

1. Introduction

- 1.1 Kent County Council (KCC) has a statutory responsibility under The Care Act 2014 to meet the needs of people assessed as having unmet eligible care needs, including meeting the needs of people with sensory impairment. This also includes ensuring that reasonable adjustments are in place to enable people to fully participate in both decisions made about their care and their care itself.
- 1.2 One of the key ways that KCC meets this duty is through the provision of British Sign Language interpreting, translation and transcription services. These services support d/Deaf people to access services and support, to be able to express, communicate and advocate for themselves.
- 1.3 The current service is delivered through a contract with Royal Association for the Deaf (RAD) which ends 31 March 2019. There is no option to extend the current contract past this date.
- 1.4 In considering the arrangements for this service post March 2019, several options have been considered. The future commissioning proposal will develop a model which ensures the challenges of the existing contract are removed, bridges the current and future needs identified and enhances the overall quality of provision.

2. Strategic Statement and Policy Framework

- 2.1 **KCC Strategic Statement:** This paper relates to KCC strategic statement outcome that children and young people get the best start in life and that older and vulnerable residents are safe and supported with choices to live independently.
- 2.2 Local Context KCC Sensory Strategy 2018-21: The Sensory Strategy was endorsed by the Adult Social Care Cabinet Committee on the 18 May 2018. It contains 11 high level outcomes, including the following which are specifically relevant to the accessibility of interpreting services:
 - Children and adults are supported and enabled to be as independent as possible
 - Services are responsive and personalised enabling children and adults to access opportunities appropriate to their needs
 - Reasonable adjustments are made to services to ensure that sensory impaired individuals have equal access to mainstream services.

3. The Report

3.1 The current service is delivered through a contract with the Royal Association for Deaf People. (RAD). Whilst the interpreting services are delivered by freelance interpreters, RAD manage the process of requesting, sourcing and booking them on behalf of KCC and partners.

- 3.2 As part of a Best Practice Model, the contract includes a partnership agreement through which a range of public sector partners can also access the service. Currently KCC and Kent Community Health NHS Foundation Trust (KCHFT) are the biggest users of the contract. Kent Police use the contract and whilst Kent Fire and Rescue are currently low users, both they and the police are planning to use the contract more in the future. They are especially interested in the Video Interpreting Service. KCC is therefore proposing to commission the interpreting service on behalf of itself and other public sector partners.
- 3.3 The communication and interpreting needs of d/Deaf and deafblind people are varied and complex. The current contract covers the following areas:
 - British Sign Language (BSL) interpreting
 - Irish Sign Language (ISL) interpreting
 - Sign Supported English (SSE) translation
 - Deafblind Manual (Hands-On and Visual Frame)
 - d/Deaf Relay
 - Speech to Text Reporting (Remote and On-Site)
 - Note Taking (Electronic and Manual)
 - Lip Speaking.
- 3.4 In line with the terms of the contract, all interpreters used are registered with the National Registers for Communication Professionals working with Deaf and Deafblind People (NRCPD).
- 3.5 Overall, the contract operates well. However, there are several issues which have been identified. These include difficulty sourcing interpreters for emergency or short notice appointments, difficulty sourcing interpreters for police related work and an increasing number of refusals as unit costs make travelling across the county unattractive to freelance interpreters.
- 3.6 In addition to this, RAD has not developed the Video Interpreting Service within the contract. This is a service that partners are very interested in.
- 3.7 In developing the commissioning options, commissioners and representatives from the operational team have engaged with a range of stakeholders, including d/Deaf people who use the service, interpreters who provide the service and other Local Authorities. Key messages include:
- 3.7.1 Feedback from people using the services:
 - The biggest issues for Deaf people are around health-related appointments where interpreters are not utilised and where the consequences of this can be catastrophic
 - 'It is important that people listen to me so I can make my own decisions'. (Feedback from a Deaf blind user of the service)
 - Building in more flexibility with interpreters and appointment times would make urgent and short notice bookings much easier to be cover
 - The importance of consistency as some d/Deaf people develop good relationships with specific interpreters and prefer to use people they know

- There are currently problems around knowing an interpreter has been booked and waiting until the last minute, or to the time of the actual appointment to find out if it has been covered.
- 3.7.2 Feedback from interpreters:
 - The need for flexibility in terms of timing for appointments as this will help address some issues around refusals
 - The need for a good coordinator who understands the needs of d/Deaf people
- 3.8 Commissioners have explored solutions currently used by other statutory organisations including:
 - Framework Agreements
 - Dynamic Purchasing Scheme
 - One agency solution
 - Block Contracts
 - In-house interpreting services
 - Combinations of all styles of commissioning solutions.
- 3.9 In light of this, six options were considered for a new model in Kent (see Appendix 1).
- 3.10 Based on an options appraisal the preferred option is Option 5: to implement a hybrid model, developing an in-house interpreting service and implementing a framework contract to meet additional demand.
- 3.11 It is proposed that the in-house service will be delivered through the recruitment of three BSL Sign Language Interpreters and a Co-ordinator to deliver the core function of services (predominantly BSL interpreting). Interpreters will be part time roles as other Local Authorities and interpreters have suggested that this is the best model. However, the coordinator will be a full-time role.
- 3.12 The Framework Agreement will be with freelance and agency interpreters, translators and transcribers to support the BSL assignments outside of the core provision and all specialist interpreting, translation and transcription services needed. (see Appendix 2 for contract lots). This will include out of hours and specialist assignments e.g. Child Protection and Policy custody suite assignments.
- 3.13 This option provides the best benefits to people and the lowest risk. In addition, this option gives scope to for the service to be dynamic and flexible to the needs of individuals and cover more appropriate service needs. There is also greater opportunity to work jointly with partners to promote and market the new service, lowering the incidences of unfulfilled bookings.
- 3.14 The Sensory and Autism Service will manage the in-house service which will allow for greater coordination of support to d/Deaf people in Kent.

- 3.15 Feedback from other Local Authorities using similar models includes:
 - We have attracted more users to our contract, especially in health appointments and are providing a more equitable service to the Deaf community (Islington Council)
 - We started with not many interpreters on our framework but have worked really hard to develop good links with them and now have 80 interpreters whom we can call and find that we are providing a much better service.

4. Financial Implications

- 4.1 There is an indicative budget in place to support financial planning for the service. This indicative budget is £53,000 per annum based on previous year's performance. The Adult Social Care and Health Budget is £35,000 for this service, this is inclusive of spend on the service for Specialist Children's Services. In addition, based on current performance, at least £60k per year is spent on services by partners accessing the contract.
- 4.2 Based on the current level of spend through the contract from both the allocated KCC budget and partners spend, Option 5 is a financially viable option. The costing and model information is attached as Appendix 3.

5. Property Implications

5.1 The employment of a small team to provide and coordinate the proposed inhouse service will have an impact on accommodation of staff. This is being considered within a wider business case regarding accommodation for the inhouse sensory team in its entirety.

6. Legal Implications

6.1 No legal implications have been identified. TUPE has been reviewed and examined to understand whether there is a requirement to TUPE the Coordinator and/or administrator roles from RAD to KCC; no requirement was found. There is no requirement to TUPE freelance BSL interpreters to KCC.

7. Equality Implications

7.1 An initial Equality Impact Assessment has been conducted. The findings show gaps in data not collected by the existing contractor. However, on examining the information from initial engagement, the assessments show positive outcomes for all people within protected characteristics affected. The EQiA is attached as Appendix 4.

8. Conclusions

8.1 The current service provision is delivered through RAD who spot purchase BSL interpreters, translators and transcribers on behalf of KCC and several public sector partners.

- 8.2 The provision is limited in its delivery and has limited scope to deliver complex and out of hours assignments in addition to specialist assignments (deafblind support services).
- 8.3 The recommissioning of this service gives an opportunity to address these issues and develop a more flexible, needs led model for Kent.
- 8.4 Following engagement with d/Deaf people, interpreters and other Local Authorities to understand their commissioning models, several options have been considered.
- 8.5 The preferred option is a hybrid model which embraces all the dynamic benefits of a Framework Agreement together with an experienced team of outstanding BSL interpreters available to deliver high quality services with flexibility.
- 8.6 This hybrid model gives an opportunity for the service to be shaped to deliver flexible support to people, ensure value for money and remain commercially viable.

9. Recommendation(s)

- 9.1 Recommendation(s): The Adult Social Care Cabinet Committee is asked to **CONSIDER** and **ENDORSE**, or make a **RECOMMENDATION** to the Cabinet Member for Adult Social Care and Public Health on the proposed decision (attached as Appendix A) to:
- a) **APPROVE** the reprovision of interpreting, translation and transcription services for d/Deaf and deafblind people; and
- b) **DELEGATE** authority to the Corporate Director of Adult Social Care and Health, or other nominated officer, to undertake the necessary actions to implement the decision.

10. Background Documents

None

11. Lead Officer

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