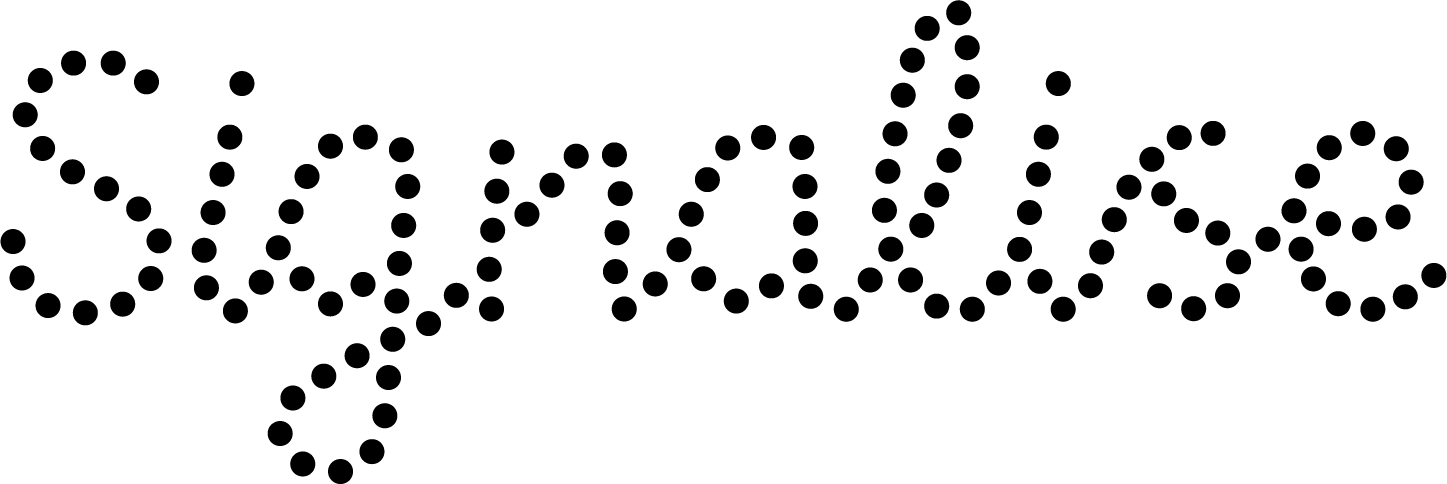
**Signalise Co-op: Our experiences as a provider**

**December 2021**

Signalise is a multi-stakeholder co-operative, comprising of worker members (British Sign Language (BSL)/English interpreters and other communication professionals), user members (Deaf people) and investor members. We were established to tackle some of the main issues with the supply of BSL/English interpreters including the lack of choice and control for Deaf people.

Our submission details the issues with public procurement and the issues we have seen.

Often they have no say over who is being booked for them and services are not accessible.

We have seen:

* unqualified people being used as interpreters
* interpreters that the Deaf person has indicated they don’t want being booked
* a lack of provision

**Public sector procurement / contracts:**

Some of the main challenges in providing services to the UK via public procurement are the unfair advantages given to larger companies.

Many tenders are larger in value than the smaller, more specialist BSL providers can afford to enter into due to the time and cost involved or due to their lack of capacity. There are some pockets of good practice, but these are largely down to a few committed individuals.

We welcome the move to include social value in public procurement which applies to larger contracts over £122,976 for NHS and central government bodies or £189,330 for other organisations. There is no legislation to cover social value for smaller value contracts which are not covered by public procurement regulations.

In many areas in the UK, large framework agreements are used to cover larger regions and often are organised in lots where spoken language and BSL are delivered by the same provider. This leads to non-specialist agencies providing BSL under what has become known as one-stop shops. As they are monitored across all languages, providers are able to fail to provide for Deaf people and still achieve targets. There has been some move to split lots into spoken and non-spoken languages but many of the non-spoken lots are still being won by spoken language agencies due to the size of the contracts.

For the Deaf community, this means their services are being provided by large multi-national spoken language agencies with no understanding of Deaf culture or language.

Larger contracts also mean that small specialist agencies are pushed out of the market as they do not have the working capital to pay invoices and wait for payments to be received from contracting authorities. Demand under the contracts can vary and there is no guarantee of the income that will be received. This makes it impossible for smaller companies to compete, as you need large cash reserves to be able to manage this. There is no way of knowing the level of demand and so planning is very difficult.

Signalise managed to raise the funds needed via Community Shares. Our co-op is asset locked and shares are non-transferable. This means that the co-op cannot be taken over or bought out, ensuing it stays within the community,

**Digital deprivation:**

There is an assumption that Deaf people can simply access information online. For many Deaf people who have had limited access to education, they are unable to use digital technology. They have become extremely isolated during the Covid-19 pandemic and have fallen through the gap - no longer able to receive a service.

There is no training available or equipment. The cost of home broadband etc. would also prevent many people from being able to use these services.

We are hoping to gain funding for an Outreach Worker who can access the community and ensure no one is left behind. We will be setting up training and drop-ins to support these individuals and raising the lack of equipment/data with the relevant authorities.

**Video Interpreting Services (Video Relay Service - VRS):**

We have a VRS service that we currently provide to our NHS contracts. We do so with the understanding that this will only be suitable for some of the Deaf community and should be offered as a choice. For many, interpreting via video calls will never be appropriate or usable. We always offer both face to face or remote appointments. The NHS commissioners whom we have contracts with on Merseyside, fortunately, understand that video interpreting may not always be suitable for some Deaf people and we have been able to intervene when a service has denied face to face appointments in order to facilitate more appropriate provision. For example, when a GP doctors surgery has insisted on a video call when we know that the Deaf patient does not have access to a smart phone and data or a laptop and broadband.

**Covid-19:**

The lack of access to information regarding Covid-19 has been extremely concerning. Deaf people’s health inequality has largely been ignored and a lack of access has created many problems. This has resulted in a number of unreported hidden incidents.

Meeting local older Deaf community members, we discovered many are disadvantaged due to lack of income to cover the costs of IT equipment/bills, lack of BSL translations for information/advice. They have been socially isolated during Covid and have had no way to access information on Covid or how to keep safe. We learnt anecdotally that 15 older people have died over the past year, from a small Deaf club of 25. This high number has caused alarm regarding what else is happening that is being ignored - Deaf people in hospital with no communication support, cases where patients were unaware of DNR notes on their files having had no accessible explanation.

We have found that Deaf people were also struggling to get interpreters for their Covid-19 vaccine appointments. In the area we work, we were able to contact the local NHS Clinical Commissioning Group (CCG) and ensure we could provide support with this. We are also now being contacted directly by deaf people and signposted to by communication professionals. This shows the benefits of the way we work within the communities.

**What are we doing?**

Signalise Co-op is being piloted in the Merseyside area, although as a result of Covid and remote working, we are already covering bookings across the UK, remotely and in some areas, face-to-face.

We are working to ensure we offer the Deaf community in the areas we are active, the opportunity to become members of the co-op, so they can become co-owners of the business and help create and influence the service they receive. We are working with local communication professionals too as co-owners. In working together we can create some innovative solutions to the issues faced by both groups in providing and receiving a service.

Some of the things we do differently:

* Working with commissioners and front line staff to improve services
* Sharing information with the Deaf community from the CCG (partnership working)
* Offer preferred interpreters, so the Deaf person can choose who they want at their appointments
* Sending information about the interpreter to the Deaf person once their appointment is confirmed
* Sending out information and training to our members (free Continuing Professional Development) to improve quality
* Sending out information to our customers to improve access
* Providing advice and information to customers on how to improve their access - even if this means they don’t need a particular service they were looking to book
* Hold regular meetings with Deaf users to talk to them about the service they receive and how we could improve it.
* Hold regular meetings with communication professionals to think about the service we provide and how we could improve it.
* Encourage ownership of the co-op by increasing membership of both groups: Deaf people and communication professionals.

In working together, many of the issues being experienced can easily be resolved. In our experience, winning NHS contracts with organisations that are committed to improving services has been invaluable.

We believe that services such as ours, with a co-op structure of community ownership, offers a model of excellence that could be replicated across the UK, with different regional groups.

**What we would like to see changed?**

Public procurement (local and national):

1. Mandatory splitting of tender lots with non-spoken languages as a separate lot in all tenders: national and local. This will reduce the wide spread usage of subcontracting by large spoken language agencies to fulfil contracts. This has driven down standards and made the profession unsustainable in some areas.
2. Robust monitoring and reasonable targets to ensure providers fulfil the highest standards of contractual obligations i.e. providers must fulfil 98% of appointments as part of a non-spoken language lot separate from spoken languages
3. Contracts to specify targets where Deaf people can specify the professionals they want in order to introduce choice and control e.g. providers must supply 95% of all preferred interpreters where a preference has been stated by the user.
4. NRCPD[[1]](#footnote-2) Registered Sign Language Interpreters (RSLI) as standard in all tenders rather than providers being allowed to use Trainee Sign Language Interpreters (TSLI) for a large number of appointments.
5. Provision for the safe use and training of TSLIs e.g. social value targets can state the recruitment and training of interpreters in order to ensure they are supported and used safely and given opportunities.
6. Encourage the use of British owned business for provision of services. We have recently seen a take over of three British and Deaf owned VRS companies bought out by two American companies in what has effectively become a monopoly.
7. Mandate that organisations should use local commissioning guidelines which are already in place.
8. Mandate that local statutory organisations use better purchasing models such as the ‘Preston Model’[[2]](#footnote-3). This would encourage community ownership and community wealth building where profits stay within the local community.

Central government:

1. HMRC and VAT: Ensure all communication services are zero rated for Value Added Tax (VAT) to ensure customers who cannot claim back VAT are not penalised for higher costs. VAT affects individuals, smaller organisations, social enterprises and charities who are not VAT registered. Individuals also include Deaf customers with a direct budget from Access to Work or members of the family or friends of Deaf people who wish to provide access at events such as weddings and funerals. Computer equipment for disabled people is zero rated for VAT and we believe all interpreting services should be considered in the same way. Some charity providers of communication services are zero rated for VAT and in our experience often recommended for AtW and other areas by central government which in turn skews the market. One particular national charity has sub-contracted for larger spoken language services and assisted them in fulfilling contracts and perpetuated a terrible service for Deaf people.
2. Work with NRCPD to use approved suppliers for contracts to safeguard Deaf people’s access.

[Signalise Co-op website](https://signalise.coop/)

[Signalise Co-op beta booking platform](https://beta.signalise.coop/)

[Signalise Co-op Member’s Handbook](https://organisation.signalise.coop/)

Tel:   [0151 808 0373](tel:01518080373)

SMS:  [07723 469 028](tel:07723469028)

Email: [hello@signalise.coop](mailto:hello@signalise.coop)

1. National Registers of Communication Professionals with Deaf People <https://www.nrcpd.org.uk/> [↑](#footnote-ref-2)
2. <https://www.preston.gov.uk/article/1339/What-is-Preston-Model> [↑](#footnote-ref-3)