

The Financial Case for Inclusive Communications – a report for the Royal College of Speech and Language Therapists (RCSLT) and Camphill Scotland

March 2021

1. Summary	1
2. Introduction.....	2
3. Definition	3
3.1 What does this financial case seek to do?	3
4. Cost and benefit identification	4
4.1 <i>Benefits</i>	4
4.1.1 Health and social care	4
4.1.2 Justice.....	5
4.1.3 Employment and household finances	6
4.1.4 Efficiency savings from widespread Inclusive Communications practice ...	7
4.2 <i>Costs</i>	8
4.2.1 Additional staff resource	9
4.2.2 Improving engagement and supporting consultation.....	10
4.2.3 Costs of adaptation of printed materials.....	10
4.2.4 Training costs	11
4.3 Worked example of costs and benefits	12
5. Conclusion.....	13
6. References	14

1. Summary

This short report seeks to provide an idea of the costs and benefits if an Inclusive Communication Bill was passed by the Scottish Parliament. This is an area where there is some research available on benefits and broadly applicable costings, but there is an absence of research available to conclusively state the overall impact.

There may be opportunities for further work in the future to determine this given the fairly recent legislation requiring both the Social Security Agency and the Food Standards Agency to embed Inclusive Communications into their organisations.

However, Inclusive Communications, adopted across the whole of the public sector could see gains beyond those seen within individual organisations and opportunities,

for example, through reducing the need for costly crisis interventions, enabling more independence as well as by achieving economies of scale.

Inclusive Communications can also be seen as necessary in order to allow all people in Scotland to realise their human rights, which may be formalised in Scots law in the coming years if the UN Convention on the Rights of People with Disabilities (UNCRPD) is legislated for.

On the basis of the limited evidence available, there is support for the supposition that Inclusive Communications could lead to savings in preventative spend and hence be cost neutral or cost saving in the future.

2. Introduction

This report is to help understand the financial costs and returns to the public sector of a commitment, through legislation, to adopt Inclusive Communications across the public sector in Scotland.

There is evidence to support that over the medium to long run, there are likely to be sufficient savings that make investment in Inclusive Communications to be cost neutral or cost saving to the public sector. In the absence of a comprehensive evaluation of Inclusive Communications, this is based on the theory of Inclusive Communications and a review of available and relevant empirical evidence.

Where possible, the empirical evidence presented is sourced from academic papers and relates to various issues that Inclusive Communications seeks to overcome. The indicative cost of failure to address some of these issues is presented (for example, cost of inpatient hospital care). However, there are few studies which provide data that is directly applicable to Inclusive Communications and as such no attempt has been made to summarise an overall financial benefit to the public sector. Indeed, this would be hard to estimate even if there were better data available. Benefits of Inclusive Communications will not be one offs or accrue simply to one portfolio or budget line. The benefits have the potential to compound and have long lasting impacts on the quality of life on an individual all of which could lead to savings for the public sector – for example through reducing the need for costly crisis interventions, enabling more independence, improving appropriate uptake of public services and response to advice they provide and lessening reliance on public services.

Estimating the costs of implementation is also constrained due to the absence of directly applicable data, and in many cases, costs are approximated from financial memorandums compiled for previous Scottish Parliament Bills.

All information in this report, unless otherwise noted, is based on publicly available information and any assumptions on how this evidence has been used is made clear. The RCLT and Camphill Scotland have provided guidance throughout.

3. Definition

Inclusive Communications is focussed on supporting individuals to use whatever ways of understanding and expressing themselves which they find easiest. For example, if a person cannot read and write they will be able to engage with services in other ways as a matter of course – such as receiving information in pictorial or video format and filling in forms via facetime or over the phone rather than in writing.

An effective approach to Inclusive Communications is to roll out an “inclusion by design” approach to development involving people who communicate in different ways in service research and design.

Inclusive Communication is relevant to all modes of communication including (but not limited to):

- Printed information such as leaflets, posters, letters and appointment cards
- Signage on the inside and outside of buildings and in the street
- Online materials such as information websites and online forms
- Telephone helplines and interviews
- Face to face speaking / listening interactions such as advice sessions, assessment interviews, and group or individual consultations.

The proposed Inclusive Communication (Scotland) Bill seeks to require Scottish public authorities to

- have regard to the importance of communicating in an inclusive way and in doing so,
- implement Inclusive Communication approaches to all their communications,

It would also require Scottish Ministers to publish an annual report on the progress made by Scottish public authorities in implementing their duties.

3.1 What does this financial case seek to do?

A financial case summarises the financial costs and benefits of an investment. It differs from an economic case, in that it focuses on monetizable benefits that will be realised, and hence understates the wider rationale for investment (e.g. it does not measure improved wellbeing of private beneficiaries, sometimes measured using Quality Adjusted Life Years (QALYs) and instead focusses on realisable cost savings – e.g. lower future health treatment costs that the NHS would incur).

Its main purpose is to help those responsible for implementing the policy to understand upfront and lifetime costs and returns in order to identify where budgets may need to be allocated in the short, medium and long term.

4. Cost and benefit identification

This policy is likely to have a range of financial costs and benefits attached to its implementation. Theory and evidence support the supposition of substantial or full cost recovery in the medium to long term. This policy can be seen as an example of preventative spend.

Inclusive Communication enables uptake of and access to public services that, in the absence of this approach, would be difficult or impossible for some people to access. Public services are, of course, provided for a reason and there are likely to be future costs if there are barriers to using these services as intended, to individuals but also to the public purse.

Inclusive Communication also enables a more effective public sector response to individual and community circumstances. By enabling a more person centred, human rights-based approach services should be better aligned to the needs of those who they seek to serve.

There is no current overarching research which neatly summarises the financial costs and benefits across the public sector, partly because there are, as yet, few examples of where a comprehensive adoption of Inclusive Communication has been implemented. We have estimated costs on the basis of what the Bill specifies using evidence from prior Bill financial memorandums and estimates of expected staffing requirements. Benefits are harder to quantify, but there are strands of evidence that show the financial costs that stem from inadequate Inclusive Communications over the long term that this policy would help avoid.

4.1 Benefits

Communication between service providers and actual and potential service users is relevant to all public services. In this paper we look at three areas where there is research on the role of Inclusive Communication and/or the harm and cost implications of poor provision/communication exclusion.

Due to research time available this is not an exhaustive examination of the benefits in terms of areas of public services or the population or care groups who value and/or require Inclusive Communication approaches. Benefits could also be expected to accrue to public sector services not examined including, for example, education and employment services. The areas of public service looked at here are health and social care; justice; and take-up of support services. We then also look at the efficiencies possible from a streamlined and clear process for Inclusive Communications across the public sector.

4.1.1 Health and social care

Inadequate health and social care provision can have devastating results, including higher risk of hospitalisation and premature death. Although this is true of all individuals this analysis focuses on one relatively small population group – people with learning disabilities, the majority of whom experience significant communication barriers.

Barriers to access occur in various parts of the health service. Allerton & Emmerson (2012)ⁱ showed that over 50% of people with intellectual or learning disabilities report difficulties with using health services due to issues with making appointments by telephone, and a lack of accessible information and help with communication once within health settings. Cooper et al (2017) also found adults with intellectual disabilities receiving significantly poor management of health conditions in primary care situationsⁱⁱ.

The consequence of this is that appropriate healthcare cannot be provided at the most effective time, meaning that people are more likely to reach crisis point and need emergency care. Ambulatory care sensitive cases (ACSCs) are cases where it is believed that hospital admission could have been avoided if suitable primary care was provided. Glover & Evison (2014) found that people with learning disabilities have rates of emergency transmissions for ACSCs that is roughly 5 times the rate for other peopleⁱⁱⁱ.

As well as the cost implications of this, healthcare at this point is less effective. Cooper et al (2019)^{iv} shows the impact of this on premature mortality for adults with learning disabilities:

“The proportion of deaths that would have been amenable to good care for adults with intellectual disabilities was more than double that seen in the general population”

Although these studies do not provide estimates of additional costs in healthcare settings, other studies give an insight into potential costs savings of preventing severe illness that requires hospital care where the average cost per inpatient is around £9500 in Scotland^v. There are also benefits on spending elsewhere: Strydom et al. (2010) found that older adults with learning disabilities in their study made up around 0.15 – 0.25% of the population, but consumed up to 5% of the total personal care budget^{vi}.

As well as the issues with critical care, Inclusive Communications have the potential to improve the independence of clients and their families, leading to reduced pressure on public services. Evidence shows that enhanced speech and language therapy reduces accommodation costs for clients with autism with a cost benefit ratio of 1:46 due to improved independence of clients and their families^{vii}.

4.1.2 Justice

Based on available evidence there appears to be a relatively high proportion of people with learning disabilities within the prison population. A UK study in 2017

estimated that 5% – 9.6% of the prison population had a learning disability, much higher than the estimated learning disability population (Murphy, Gardner, & Freeman, 2017).

This figure represents only a proportion of people in contact with the justice system who experience communication disadvantage. A number of studies have shown that 60% plus of young people in contact with the law have speech, language and communication difficulties the majority of which are not officially recorded (RCSLT, 2017)^{viii}.

There are a number of reasons why communication barriers are likely to be part of the cause of this, including:

- Rendell et al (2020)^{ix} looks at whether individuals with learning disabilities are able to understand a verbally presented police caution, drawing on previous research that flagged that the length, complexity, how options to waive rights were presented and words that are less commonly used can affect adequate comprehension.
- Other research finds that stress in interrogation can particularly effect those already with cognition issues (Herrington & Roberts, 2012)^x and that people with learning disabilities are more likely to provide affirmative answers if they are uncertain as well as being more likely to provide the answers that they believe are desired by the interviewer (Corby, Taggart, & Cousins, 2015^{xi}; Goldsmith & Skirton, 2015^{xii} Finlay & Lyons, 2002^{xiii})
- Within court settings, the tradition of oral argument is thought to put those with learning disabilities or other cognitive impairments at a disadvantage (Law et al, 2006).

Although it is not possible to determine the proportion of people with a learning disability within the justice system due to failures in effective communication, the cost of a year in prison is around £35,000 in Scotland^{xiv}, and therefore the potential for cost savings are high.

In addition, the potential for missed convictions due to lack of Inclusive Communications support for victims and witnesses also could lead to further crimes, as well as wasted resources spent on the initial investigation. Average costs of prosecution in the high court in Scotland are in the region of £70,000 per procedure.

These figures are not provided as an estimate of costs that could be avoided, but to provide an illustration of the scale of some of the costs that could be associated with Inclusive Communications not being used to best effect.

4.1.3 Employment and household finances

Unemployment, financial insecurity and poverty have a range of damaging impacts on people, including poorer physical and mental health, with costs on public services likely to mount in the future. This is why the Scottish & UK governments provide a range of support both in terms of employability schemes and social security.

The process of knowing what benefit payments are available, application form filling, understanding requirements and assessments make entering into the social security system difficult for many people who would benefit from Inclusive Communications.

Evidence from people with learning disabilities has explained difficulties with applying for jobs and feeling able to go for interviews and start new jobs. When questioned, they thought that only relatively light touch support would be required to help with navigating new places, buildings and systems, but this was not what was provided to them at present. (Fraser of Allander 2020).

Currently, one of the clearest illustrations of how to operationalise Inclusive Communications comes from Social Security Scotland.

For their benefit take-up strategy, they report the actions they have taken to embed this within their work. They have looked at four main areas:

- Language Translation and Interpretation (translation, Braille, Audio, Large Print and Easy Read formats)
- Deafened and Hearing-Impaired Community (BSL and other specifications to be confirmed)
- Literacy, Cognitive and Learning Impairments (ensuring the appropriate support and services are in place)
- Physical Accessibility (ensuring that there are accessible and inclusive spaces for face to face needs)

In support of this work, they have employed a speech and language therapist to act as an expert advisor, brought together a stakeholder reference group and a lived experience reference group^{xv}.

Whilst it is too early to identify any increases in take-up in Scotland, and far too soon to quantify any knock-on benefits from support to incomes, the Social Security Agency provides a working example of how Inclusive Communications can be operationalised.

4.1.4 Efficiency savings from widespread Inclusive Communications practice

Social Security Scotland as well as the new Consumer Scotland agency have a statutory duty to ensure that Inclusive Communication is part of their operating model, and the proposed Inclusive Communication (Scotland) Bill would see this duty applied across the Scottish public sector.

It is recognised that there are parts of the public sector across Scotland which are applying Inclusive Communication approaches to some degree already. The NHS, local authorities and the Scottish Government already pay for speech and language therapy and other communication improvement and support services. Without information on current expenditure on relevant Inclusive Communication support services it is difficult to attribute additional costs. It is also important to note evidence that improvements are required in areas like health. For example, a 2018 panel survey by the Scottish Health Council reported that only 73% of health service users

said that they easily understood information given to them about what would happen about their care after a GP appointment^{xvi}.

In addition to the costs of not having Inclusive Communications, the costliest way to approach Inclusive Communications is to do it on an ad-hoc, piecemeal, “bolt on” basis, as and when it is felt that there is a requirement to do so (which of course is subjective, but the evidence would suggest it is not done as often as is needed). If it was a requirement for Inclusive Communications to be mainstreamed across the board, taking an “inclusion by design” approach to improvements then these high marginal costs are avoided, and there is the potential for economies of scale.

Streamlining of efforts that are already being taken to meet the duties in the Equality Act (2020) (which requires “reasonable adjustments” to be made so that those people with a disability are not put at a substantial disadvantage compared to people who are not disabled) may provide savings.

This argument was made with the introduction of the NHS England Accessible Information Standard in 2015:

“There will be no specific funding made available to organisations to support the implementation of the Standard. This reflects the fact that the Standard clarifies and supports organisational compliance with existing legal duties (as outlined above), rather than introducing a ‘new burden’... It also reflects the fact that although there will be initial costs to implement the Standard, this initial investment will lead to a range of identified benefits – for both organisations and patients – including the generation of cost savings in the future.”^{xvii}

By learning from each other and developing best practice and resources collaboratively, organisations could save time, effort and expenditure involved in developing the assets they need locally from scratch while avoiding the risks of less than best practice provision, and / or redeveloping something that may already exist in another part of the public sector. Consistency can clarify what best practice looks like, improve quality of provision and save development costs.

Public services in Scotland run the risk of being penalised for non-compliance with the Equality Act, and subsequently under the UN Convention of the Rights of the Child that is likely soon to be incorporated into Scots law. There is therefore an additional impetus to move forward on this to prevent costs arising from any court decisions that find non-compliance.

4.2 Costs

There are a range of upfront costs that the Bill either specifies or will be required to meet the aspirations of the Bill.

To help understand the costs associated with the aspiration of the Bill, which is to ensure that Inclusive Communication approaches are developed and implemented more widely, estimates of costs of such activity have been developed.

To develop these costs, we have sought to understand how Inclusive Communications has been operationalised within Social Security Scotland¹, alongside evidence presented in financial memorandums for previous Scottish Parliament Bills that have similarities to the type of expenditure that RCSLT believe will be required.

4.2.1 Additional staff resource

If the proposed Inclusive Communication (Scotland) Bill is passed by the Scottish Parliament, responsibility for the implementation of the legislation, including the approach to implementation, would be decided by the Scottish Government.

One approach to implementation across the public sector would be to appoint local Inclusive Communication experts (i.e. speech and language therapists and others with knowledge and skills related to Inclusive Communication) to work collaboratively with a small national team. This report follows this approach. This approach has the advantage of building on the historical investment in small scale taken over a number of years at local level.

As well as overseeing and supporting implementation of the Act if passed additional staff would be responsible for providing input into the annual report that is required by the proposed Bill.

Social Security Scotland have employed a part-time Speech and Language Therapist as part of their process to ensure Inclusive Communications is integrated into the agency. Social Security Scotland have approximately 2000 staff.^{xviii}

Not all public bodies are as service and customer orientated as Social Security Scotland so we assume that one speech and language therapist would be required per 5000 public sector employees.

Scotland has a devolved public sector workforce of around 500,000^{xix} individuals employed with most of these in local government and within the NHS where 955.4 WTE speech and language therapists (March 2020 figures) already work^{xx}

¹ These are approximate figures based on RCSLT conversations with senior agency officials regarding how Inclusive Communications have been resourced within Social Security Scotland. RCSLT feel that these provide a reasonable guide to what they believe would be required. Ideally, publicly available information, for example from a formal evaluation, would be used to evidence these figures. Such publicly available evidence should be used if it becomes available.

We assume it is possible to adapt the work of the current SLT workforce, and to realise some economies of scale. We assume that this halves the additional requirement from 1 per 5,000 to 1 per 10,000.

Using Costs Book data provided by Public Health Scotland ^{xxi} for allied health professionals (which includes Speech and Language Therapists) total costs per staff member are in the region of £45,000.

We assume 50 additional staff required (1 per 10,000 employees, total public sector employees = 500,000) at a cost of £45,000 a year.

Total additional cost is therefore £2.25m per year split between local government, health boards and national government.

RCSLT have advised that the majority (40 staff) would need to work in local areas, meaning on average, additional costs of £56,250 per local authority, split between local government and health boards.

4.2.2 Improving engagement and supporting consultation

In order to implement the Bill and produce plans that are fit for purpose, it is envisaged that there will need to be engagement with users of Inclusive Communications.

The following costs are taken from the supplementary financial memorandum for the British Sign Language (BSL) Bill^{xxii} (uprated for inflation). These provide an indicative amount to budget for.

	Cost by financial year (£)
Consulting with Inclusive Communication users on reports	125,000
Supporting engagement with Inclusive Communication users	90,000
Engaging with national bodies covered by the plan	30,000
	245,000

4.2.3 Costs of adaptation of printed materials

It is not envisaged Inclusive Communication print materials will be additional printed materials but that inclusion will be “designed in” to materials already budgeted for reproduction or newly produced.

Unlike production of language specific translations of the same document Inclusive Communication versions of documents will not necessarily involve producing

multiple versions of the same document. This is because all members of the public want information to be as easy to understand as possible.

However, to get some idea of costs, the following estimated costs are taken from the financial memorandum that was produced for the Gaelic Language Bill^{xxiii} and adjusted for inflation. These costs show the costs involved with making changes to the way that information is produced and reprinting and hence are indicative of costs that may be faced in implementation of the Inclusive Communications Bill.

Function	Detailed	Annual costs (£)	Applied to all Public Authorities (£)
Corporate Identity	e.g. signage, letterheads	0 – 25,000 (one off)	0 – 3.2m (one off)
Communications	e.g. letters, press notices, advertising etc.	0 – 12,500	0 – 1.6m
Materials	e.g. publications, website, application forms etc	0 – 38,000	0 – 4.864m
		0 - 75,500	0 – 9.7m

According to the Scottish Government, there are 128 public authorities under devolved control^{xxiv}. As explained in the financial memorandum, these costs will differ depending on the organisation and their current approach. Some may have very few additional costs, and others may need to change many things.

4.2.4 Training costs

In order to develop organisational culture and best practice, training for staff across the public sector will be essential to deliver the aims of the Bill.

As set out above speech and language therapists are already providing training to colleagues across the public sector. Changing the content of this training already provided (e.g. mandatory training) will be negligible.

Exactly how much additional more widespread training would cost depends on how it is delivered.

To illustrate the potential additional expenditure, we have drawn on information on the cost of a contract held by the Scottish Government for externally provided training courses along with the number of employees who have partaken in the courses to estimate an indicative per-employee cost of a training course. This

information is taken from a recent FOI request and refers to a wide range of courses delivered digitally or online^{xxv}.

221,767 learners were recorded by the Scottish Government with a total cost of £79,877 which results in a £3.60 per learner cost. Multiplied by the 500,000 public sector workforce leads to a cost in the region of £1.8m per annum.

This kind of training is not enough on its own to implement the aspirations of the bill, but in conjunction with specialist support from additional speech and language therapists, together this should provide a good level of understanding and practical ability to implement what is required.

4.3 Worked example of costs and benefits

This example uses evidence provided in this report on the potential additional costs of poor Inclusive Communications in the criminal justice system. This is an illustration of how the costs of one consequence of this, wrongful conviction, compare to the estimated costs of embedding an Inclusive Communications approach within a part of the justice system.

These are only illustrative figures, and should not be used outwith the context of this report.

Costs = £233,850 in first year

Based on:

Police workforce = 23,000: 2.3 WTE additional speech and language therapists = £103,500

Cost of engagement – police share of total based on size of workforce = £9,800

Adaption of materials – mid-point of range = £37,750

Additional training @ £3.60 per employee = £82,800

Benefits/costs avoided if one wrongful conviction avoided and one year imprisonment avoided = £105,000

Based on:

Cost of one year of imprisonment: £35,000

Cost of a high court trial: £70,000

This illustrative example is simply to show that if just two wrongful convictions, leading to a year wrongly spent in prison and a new high court trial, were avoided, this would make investment in Inclusive Communications close to cost neutral in the first year. The costs by the second year would be much lower once initial training and adaption of resources had taken place.

5. Conclusion

This report provides a range of evidence on potential costs and benefits of an Inclusive Communications Bill.

We reiterate that the evidence base supporting this is not, as far as can be ascertained, able to provide fully comprehensive and applicable evidence to conclude fully, but the available evidence does support that overall Inclusive Communications should prevent future spending and be cost neutral or cost saving over the medium to long term.

6. References

- ⁱ Allerton & Emmerson (2012) “British adults with chronic health conditions or impairments face significant barriers to accessing health services“ available here: https://www.sciencedirect.com/science/article/pii/S0033350612002788?casa_token=b8D1zAIMjy0AAAAA:aq6HoHaAqKZFRubmoVsC_OaY92POIzPw6gC9ny0418yiOhuVkEMgdJRydgJ87vU8OrP0zHMxCw
- ⁱⁱ Cooper, S-A, Hughes-McCormack, L, Greenlaw, N, et al. Management and prevalence of long-term conditions in primary health care for adults with intellectual disabilities compared with the general population: A population-based cohort study. *J Appl Res Intellect Disabil.* 2018; 31(Suppl. 1): 68– 81.
- ⁱⁱⁱ Glover & Evison (2014) “Hospital Admissions that Should Not Happen” available: https://www.ndti.org.uk/assets/files/IHAL-2013-02_Hospital_admissions_that_should_not_happen_ii.pdf
- ^{iv} Cooper S, Allan L, Greenlaw N, et al/Rates, causes, place and predictors of mortality in adults with intellectual disabilities with and without Down syndrome: cohort study with record linkage *BMJ Open* 2020;**10**:e036465. doi: 10.1136/bmjopen-2019-036465
- ^v <https://beta.isdscotland.org/find-publications-and-data/healthcare-resources/finance/scottish-health-service-costs/>
- ^{vi} Strydom A, Romeo R, Perez-Achiaga N, Livingston G, King M, Knapp M, Hassiotis A. Service use and cost of mental disorder in older adults with intellectual disability. *Br J Psychiatry.* 2010 Feb;196(2):133-8. doi: 10.1192/bjp.bp.108.060939. PMID: 20118459.
- ^{vii} Matrix Evidence (2010) “An economic evaluation of speech and language therapy”, available: <https://optimityadvisors.com/sites/default/files/research-papers/45-Speech-and-Language.pdf>
- ^{viii} RSCLT (2017) *Justice Evidence Base*, available here: <https://www.rcslt.org/wp-content/uploads/media/Project/RCSLT/justice-evidence-base2017-1.pdf>
- ^{ix} Michael Rendall, Ken MacMahon & Bruce Kidd (2020) The Scottish police caution: do individuals with intellectual disabilities understand a verbally presented police caution, and can comprehension be improved?, *Psychiatry, Psychology and Law*,
- ^x Herrington, V., & Roberts, K. (2012). Addressing psychological vulnerability in the police suspect interview. *Policing*, 6(2), 177–186. doi:10.1093/policing/par057
- ^{xi} Corby, D., Taggart, L., & Cousins, W. (2015). People with intellectual disability and human science research: A systematic review of phenomenological studies using interviews for data collection. *Research in Developmental Disabilities*, 47, 451–465.
- ^{xii} Goldsmith, L., & Skirton, H. (2015). Research involving people with a learning disability – methodological challenges and ethical considerations. *Journal of Research in Nursing*, 20(6), 435–446. doi:10.1177/1744987115591867

^{xiii} Finlay, W.M.L., & Lyons, E. (2002). Acquiescence in interviews with people who have mental retardation. *Mental Retardation*, 40(1), 14–29. doi:10.1352/0047-6765(2002)040<0014:AllWPW>2.0.CO;2.

^{xiv} <https://www.scottishlegal.com/article/high-cost-of-remand-revealed>

^{xv} Scottish Government, 2019, Social Security Experience Panels - Inclusive Communication <https://www.gov.scot/binaries/content/documents/govscot/publications/research-and-analysis/2020/07/social-security-experience-panels-inclusive-communication-report2/documents/social-security-experience-panels-inclusive-communication-report/social-security-experience-panels-inclusive-communication-report/govscot%3Adocument/social-security-experience-panels-inclusive-communication-report.pdf>

^{xvi} Scottish Health Foundation, 2028, *Our Voice Citizens' Panel, Fourth Survey Report*, available here: https://www.hisengage.scot/media/1165/fourth_citizens_panel_report_may18.pdf

^{xvii} NHS England, Accessible Information Standard Implementation Plan (2015) available: <https://www.england.nhs.uk/wp-content/uploads/2015/07/access-info-imp-plan.pdf>

^{xix} Scottish Government, 2020, Public Sector Employment Statistics [https://www.gov.scot/publications/public-sector-employment-scotland-statistics-2nd-quarter-2020/pages/2/#:~:text=Key%20points%20\(based%20on%20headcount%20data\)%20include%3A&text=Of%20the%20total%20565%2C600%20people,more%20than%20in%20June%202019.](https://www.gov.scot/publications/public-sector-employment-scotland-statistics-2nd-quarter-2020/pages/2/#:~:text=Key%20points%20(based%20on%20headcount%20data)%20include%3A&text=Of%20the%20total%20565%2C600%20people,more%20than%20in%20June%202019.)

^{xx} NHS Scotland, 2020, Workforce Statistics: <https://turasdata.nes.nhs.scot/workforce-official-statistics/nhsscotland-workforce/publications/02-june-2020/dashboards/allied-health-professions/>

^{xxi} <https://beta.isdscotland.org/topics/finance/file-listings-fy-2019-to-2020/>

^{xxii} Scottish Parliament [https://www.parliament.scot/S4_Bills/British%20Sign%20Language%20\(Scotland\)%20Bill/S_PBill55ARevFMS042015.pdf](https://www.parliament.scot/S4_Bills/British%20Sign%20Language%20(Scotland)%20Bill/S_PBill55ARevFMS042015.pdf)

^{xxiii} ^{xxiii} Scottish Parliament [https://www.parliament.scot/S2_Bills/Gaelic%20Language%20\(Scotland\)%20Bill/b25s2-introd-en.pdf](https://www.parliament.scot/S2_Bills/Gaelic%20Language%20(Scotland)%20Bill/b25s2-introd-en.pdf)

^{xxiv} Scottish Government <https://www.gov.scot/policies/public-bodies/>

^{xxv} Scottish Government <https://www.gov.scot/publications/foi-202000092556/>