

Improving Health Outcomes for People with Learning Disabilities

A co-produced checklist to support Annual Health Checks

MARCH 2021

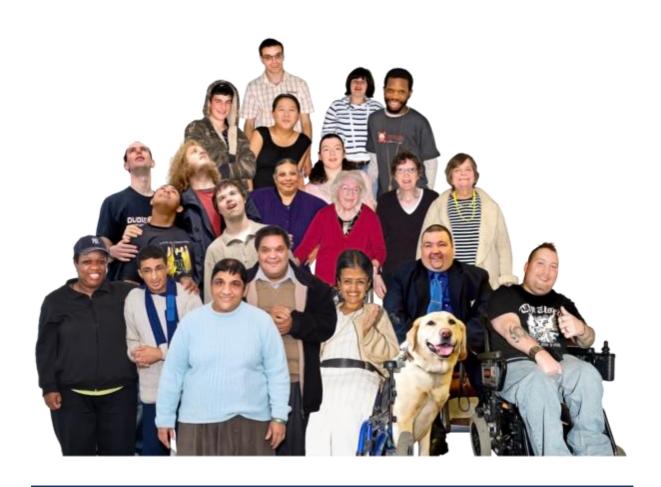




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List of Abbreviations

BNSSG CCG Bristol, North Somerset and South Gloucestershire Clinical

Commissioning Group

CQC Care Quality Commission

GP General Practice

HAP Health Action Plan

HWSG Healthwatch South Gloucestershire

LD Learning Disability

LD AHC Learning Disability Annual Health Check

LeDeR The Learning Disability Mortality Review Programme

PWLD People with Learning Disability

SBCP Southern Brooks Community Partnership

SP Social Prescribers



Introduction

At Healthwatch South Gloucestershire our purpose is to find out what matters to service users and help make sure their views shape the support they need. We listen to patient experiences, base our work on them and inform commissioners and providers about good practice and areas for service improvement.

This report summarises our co-produced project which sought to look at the different ways Healthwatch could help improve health outcomes for people with learning disabilities.

Executive Summary

Our main outcomes from this project are:

- We have created a useful tool, which can be used across South Gloucestershire and beyond in the Bristol, North Somerset areas.
- We are encouraging Health Action Plans to be up to date, so everyone can support PWLD to keep well.
- We are contributing to the wider work around "improv(ing) the completion of Health Action Plans following an Annual Health Check."1
- We are ensuring services in South Gloucestershire develop "a proactive" approach to meeting the health and care needs of the individual."²
- We are facilitating conversations which "support (PWLD) to engage with aspects of their healthcare."³
- We are working towards the continued improvement of "communication" with PWLD and their families."4
- We are asking services to share the Checklist by sending it to a patient i.e. when they send them an invitation letter for their LD AHC.

Interim outcomes

- Building relationships with Community groups in South Gloucestershire who work with PWLDs.
- Building relationships with GP Practices through the GP LD Leads.

Longer term outcomes

We aim to evaluate the success of the tool by asking the following:

- Number of LD AHC booked in South Gloucestershire.
- Experience of those having an LD AHC and their family/carers/supporters.
- Number of Checklists given to patients and used in preparation.

http://www.bristol.ac.uk/media-library/sites/sps/leder/LeDeR_2019_annual_report_FINAL2.pdf

http://www.bristol.ac.uk/media-library/sites/sps/leder/LeDeR_2019_annual_report_FINAL2.pdf http://www.bristol.ac.uk/media-library/sites/sps/leder/LeDeR_2019_annual_report_FINAL2.pdf http://www.bristol.ac.uk/media-library/sites/sps/leder/LeDeR_2019_annual_report_FINAL2.pdf



Change in number of people on learning disability register.

About Healthwatch South Gloucestershire

Healthwatch South Gloucestershire's statutory duty and remit, which is laid out in The Health and Social Care Act 2012, is to provide a voice for people who use health and adult social care services, by:

- Enabling local people to monitor the standard of provision of local care services and whether or how local health and social care services could and ought to be improved.
- Obtaining the views of local people regarding their needs for, and experiences of local health and social care services and importantly to make these views known.
- Promoting and supporting the involvement of local people in the commissioning, the provision and scrutiny of local health and social care services.
- Giving people an opportunity to have a say about their local health and social care services, including those whose voice isn't usually heard.
- Making reports and recommendations about how local care services could and ought to be improved. Provide these to commissioners, providers, people responsible for managing or scrutinising local health and social care services. Share with Local Government.
- Taking public views to the people who make decisions including having a representative on the Health and Wellbeing Board.
- Feeding issues back to government via Healthwatch England and the CQC.

Our outcomes are tracked against a set of key performance indicators by our commissioners at South Gloucestershire Council. Our 2019-2024 contract promised; "Healthwatch is committed to promoting equality, and diversity and tackling social exclusion in all our activities. We aim to ensure equitable access to our initiatives and projects for all."



Background

Useful Definitions

Learning Disabilities: "A significantly reduced ability to understand new or complex information and to learn new skills, with a reduced ability to cope independently, which started before adulthood, with a lasting effect on development."5

Learning Disability Annual Health Check (LD AHC): "For adults and young people aged 14 or over with a learning disability...You do not have to be ill to have a health check - in fact, most people have their annual health check when they're feeling well."6

Multi-morbidity: "Presence of two or more long-term health conditions"

Justification

It is well recognised that PWLD have poorer physical and mental health compared to others and have a lower life expectancy.⁸ Annual Health Checks for adults with learning disabilities were introduced in England in 2008-9. The aim of these were to improve early detection rates of certain health conditions such as cancer and heart disease. To check that any ongoing treatments were appropriate and to help people with learning disabilities become more familiar with their GP.

"Annual Health Checks can identify undetected health conditions early, ensure the appropriateness of ongoing treatments and establish trust and continuity care."9



The Learning Disability Mortality Review (LeDeR) Programme was commissioned to improve the standard and quality of care for people with a learning disability. 10 Based at The University of Bristol, this programme reviews the deaths of PWLD with a view to improve the standard and quality of care for people with learning disabilities.

The Joint Strategic Needs Assessment for South Gloucestershire identified LD as an important area, specifically mentioning that "health inequalities often start early in life and result, to an extent, from barriers they face in accessing timely, appropriate and effective health care."11

https://www.nhs.uk/conditions/learning-disabilities/annual-health-checks/

http://www.bristol.ac.uk/media-library/sites/sps/leder/LeDeR_2019_annual_report_FINAL2.pdf

https://www.nhs.uk/conditions/learning-disabilities/annual-health-checks/

https://www.nice.org.uk/guidance/ng56

⁹ https://www.rcgp.org.uk/clinical-and-research/resources/toolkits/health-check-toolkit.aspx

http://www.bristol.ac.uk/sps/leder/

¹¹ https://edocs.southglos.gov.uk/jsna2017/pages/adults/learning-difficulties/



The West of England Academic Health Science Network established The West of England Learning Disabilities Collaborative (LDC) in early 2019 to address the disparity between the age of death for people with learning disabilities and the general population. 12

The NHS Long Term Plan makes a commitment to reducing the premature mortality of people with a learning disability. NHS England/Improvement have provided funding to Clinical Commissioning Groups (CCGs) to support them to review all deaths of people with a learning disability aged four and over, and to improve services based on what those reviews show. CCGs must work with local health and social care providers to develop and put those local action plans into place. Nationally, research from the LeDeR Review found "a third (34%) of deaths of people with learning disabilities were from treatable medical causes, compared to 8% in the general population - a four-fold difference."13

The total number of people in South Gloucestershire with LD (as of July 2017) are estimated at:14

- 1,086 people aged 18 and over predicted to have a moderate or severe learning difficulty
- 248 people aged 18-64 predicted to have a severe learning difficulty 232 people with learning difficulties in permanent residential care home placements and 28 in permanent placements in care homes with nursing

Data obtained from NHS Digital¹⁵ suggests that for the financial year 2019-20 in Quarter 4 (ending 31st March 2019) 928 PWLD were on the LD Register¹⁶ in South Gloucestershire and 294 received an LD AHC.

Professionals who work with PWLD have raised concerns about the health inequalities PWLD in South Gloucestershire face. One being that not all patients receive pre-LD AHC information, such as a questionnaire. Those that do, are not all receiving the same set of prompts for discussion at their LD AHC. This means there is the potential for PWLD to have differing health outcomes depending on their location.

"We need to see people with a learning disability and/or autism as citizens with rights, who should expect to lead active lives in the community and live in their own homes iust as other citizens expect to."17



https://www.weahsn.net/our-work/improving-patient-safety/the-deteriorating-patient/the-west-of-england-learning-disabilities-collaborative/
 http://www.bristol.ac.uk/media-library/sites/sps/leder/LeDeR_2019_annual_report_FINAL2.pdf

https://edocs.southglos.gov.uk/jsna2017/pages/adults/learning-

difficulties/#:~:text=The%20total%20number%20of%20people,have%20a%20severe%20learning%20difficulty

¹⁵ https://digital.nhs.uk/data-and-information/publications/statistical/learning-disabilities-health-check-scheme/england-quarter-4-2019-20

https://www.mencap.org.uk/advice-and-support/health/dont-miss-out

¹⁷ https://www.england.nhs.uk/wp-content/uploads/2015/10/ld-nat-imp-plan-oct15.pdf



COVID-19

While undertaking this project, the COVID-19 pandemic gripped the world. The death rate of people with learning disabilities in England was up to six times higher from COVID-19 during the first wave of the pandemic than the general population. This could be due to higher likelihood of other health problems like diabetes, respiratory problems, obesity and difficulties recognising symptoms or understanding guidance. This disproportionate impact of COVID-19 on PWLD influenced the nature of the questions included in the pre-check questionnaire.



Aims and Objectives

The project aimed to respond to patient feedback that suggested a lack of information prior to an LD AHC may mean PWLD and their families are not able to get the most out of the service. The project aimed to produce a useful resource for patients, their carers and supporters to help them participate fully in their LD AHC. This tool (which we have called a Checklist) is to be used widely to help people be prepared. The Checklist seeks to support PWLD and their carers to help recognise when things aren't right, take actions to keep healthy, to speak up and seek help. By giving this information in advance, this will help the person understand what their health check is for and what they can get from it.

The Checklist will also help save time and provide consistency at the LD AHC appointment by acting as a prompt for the GP or Nurse. Through asking behaviour change questions, it will give opportunities for prevention and intervention conversations. The Checklist will also support conversations about certain 'embarrassing' health issues, such as sexual health.

The Checklist will also seek to raise awareness and increase uptake of Health Action Plans (HAPs) to help ensure that "people with learning disabilities...have access to universal (mainstream) health services in the same way as the general population, but there (is also) an option to access more LD specific specialist services where required/relevant."18

The Checklist will be created in an accessible format, using appropriate language and suitable images from Photosymbols. 19 This will be to ensure that everyone involved in the PWLD care can use, understand and benefit from the Checklist. The aim was that the content of the checklist would be compiled and informed by findings from the 2019 LeDeR Review, the focus group, the steering group and an existing resource created by Leeds and York Partnership NHS Foundation Trust²⁰.

The 2019 LeDeR Mortality Review points out there is "a need for professionals to spend more time and care ensuring that families had a good understanding of the issues at stake."21



¹⁸ https://bnssgccg-media.ams3.cdn.digitaloceanspaces.com/attachments/bccg_tcp_website_version_11-2016_R9fMn7a.pdf

https://www.photosymbols.com/

https://www.learningdisabilityservice-leeds.nhs.uk/get-checked-out/
https://www.learningdisabilityservice-leeds.nhs.uk/get-checked-out/
http://www.bristol.ac.uk/media-library/sites/sps/leder/LeDeR_2019_annual_report_FINAL2.pdf



Method

Co-Production

A co-production approach helped the project stay focused on PWLD, and their families, parents and carers. Co-production is a process that involves the voice of users of services from the very start of a project to its end. This ensures it adequately reflects the needs of the individual, their support network, the education setting needs and the wider community, rather than focusing on the needs of the service. Co-production is an ongoing partnership between people who design, deliver and commission services, people who use the services and people who need them.²²

"We will need to learn how to allow people to determine what is the way they want to tackle areas of their lives rather than prescribing a 'service' to meet the 'need'"²³



Collecting Feedback

In line with the aims and purpose of Healthwatch, this project has looked to include the views, ideas and suggestions of people with lived experience at every available opportunity.

The impact of COVID-19 has meant that we had to change and adjust our methods of engagement at multiple times throughout the development of the project. The primary impact has been on how we conducted our lived experience focus groups. The move to online focus groups has posed many challenges, specifically in creating meaningful engagement opportunities with those with learning disabilities.

Professionals and Carers Steering Groups

We brought together a digital steering group of carers and professionals. This group of people were instrumental in helping form the Checklist. Their combined expertise and experience provided an important insight into the health inequalities PWLD face.

Due to the increased pressures of COVID-19, it was challenging to speak with carers. However, we used Zoom and email feedback to receive input, ideas and

https://bnssgccg-media.ams3.cdn.digitaloceanspaces.com/attachments/bccg_tcp_website_version_11-2016_R9fMn7a.pdf

²³ https://bnssgccg-media.ams3.cdn.digitaloceanspaces.com/attachments/bccg_tcp_website_version_11-2016_R9fMn7a.pdf



suggestions from Carers. The following points to consider and question ideas were brought to our attention by those who care for and support PWLD.

Question suggestions and considerations highlighted by Carers:

- "What might have changed since your last LD AHC?"
- Ask about amount of water consumed can this be any non-alcoholic liquid?
- Ask questions about exercise
- Top Tips" opportunity to provide advice around eating and exercise
- Reasonable adjustments
- "What are the Flu vaccination options?"
- "How do you feel about needles?"
- "How do you feel about having your blood taken?"
- "How do you feel about using a Blood pressure cuff?"
- Feelings about Physical contact
- Extra information/top tips about smoking, alcohol and vaping
- Has the carer had a carers review
- Prompt for carer to have NHS Health Checks
- "Are you registered as a carer with you GP?"
- "Have you heard of the Carers Support Centre?"
- "Have you thought about future plans?"
- Be aware of the difference between LD and Additional needs
- 'Shared Lives Scheme'24
- 'Stepping Forward Group' 25
- Ideal to have a PWLD and Carer leaflet
- One carer felt that their Practice might not send anything out as the PWLD has limited capacity, so wouldn't be able to complete a 'checklist' they said it would still be useful to receive one to help them be prepared when they support the LD AHC

The Steering Group of professionals met monthly on Microsoft Teams, and kept in regular email contact. The group helped shape and refine the Checklist.

The Steering Group of professionals included:

- Maisy Griffiths Area Lead (Healthwatch South Glos)
- Lesley Le-Pine Quality Lead & LeDeR Programme Manager (BNSSG CCG)
- Zain Patel Transformation Manager LD (BNSSG CCG)
- Louise Lees Specialist Health Improvement Officer (South Glos Council)
- Toria Wrangham Social Prescribing Manager (Southern Brooks)

Question suggestions and considerations highlighted by the professionals steering group:

https://www.nhs.uk/conditions/social-care-and-support-guide/care-services-equipment-and-care-homes/shared-lives-schemes/

https://oneyou.southglos.gov.uk/for-your-body/move-more/walking/



- If you're over 40, you're entitled to physical health check
- Do you know about SBCP Social Prescribers?
- Do you have a Health Action Plan?
- One You South Gloucestershire Wellbeing service
- Amount of water drunk
- Safe exercise/walking?
- What fruit do you eat?
- What reasonable adjustments should be made for the person you care for?
- What do they like? What don't they like?
- LD AHC can't just be a chat, has to have an outcome
- Can they self-disclose? There might be some adults who have not had a formal diagnosis of LD
- How can we make the whole process more robust?
- People finding hardest to reach are those that live at home with older parents what can we do?
- Who are you supported or cared for by?
- No provision for carers of adults with LD in South Gloucestershire
- Medication review
- Ensure context and purpose for LD AHC
- HAP is the takeaway outcome

Lived Experience Focus Group

We were supported by Choices4U²⁶ to speak with adults with LD. Due to COVID-19 measures, we were not able to meet the focus group face-to-face. However, Choices4U assisted by facilitating a Zoom meeting at the end of a regular support session. HWSG is incredibly grateful to the team at Choices4U for their support and input.

Question suggestions and considerations highlighted by the lived experience focus group:

- "What is a good heart rate?"
- "It would be nice to be reminded about healthy eating, like 'eat the rainbow'"
- "What does 'calorie control' mean?"
- "How long would it take to burn off a biscuit?"
- error "Can you include the Changes4Life²⁷ App?"
- "Can you include simple snack suggestions to encourage people away from crisps?"
- "Can you include home and seated exercises?"
- "Noticing walk" is something I would do

https://www.southglos.gov.uk/leisure-and-culture/sports-clubs-and-centres/sports-development/choices-4-u-guardians-carers-and-funders/

https://www.nhs.uk/change4life



Game exercises such as Nintendo as fun

"I like the logging in machine"

"I like being asked if I am okay and if I have been okay"

"I Like it when I am told why I need to be weighed"

"I don't like needles"

"I get bored when waiting for appointments"

"I don't like blood pressure machine - it's tight and makes loud sounds"

"I like to be told about the Flu vaccination"

Observations:

Mixed response from participants about extra information section

Had good understanding of health and health checks

Need to make benefits of LD AHC very clear

Explain what LD AHC is and why it is important for PWLD

Important for PWLD to know that they can have reasonable adjustments

Differing pain thresholds

Find flu jab eligibility "really wordy"

Like videos about useful things

Could weight be done at home and taken in?

The 2019 LeDeR Mortality Review says "GP practices need to be proactive and consider if their patients with a learning disability who come unaccompanied to appointments need support to understand their health and options."²⁸



²⁸ http://www.bristol.ac.uk/media-library/sites/sps/leder/LeDeR_2019_annual_report_FINAL2.pdf



Results and findings

Questionnaire Formation

As a starting point, we identified the five most common long-term health conditions reported in completed LeDeR reviews²⁹:

- Epilepsy
- Cardiovascular problems
- Dysphagia
- Mental ill health
- Constipation

Following this, we collated themes identified by our Steering Groups and Focus Group. Every theme, and subsequent questions, have wider implications on the health and well-being of PWLD. All the questions have been carefully worded to ensure that they are accessible, and also give the medical professional an opportunity to notice wider patterns of behaviour.

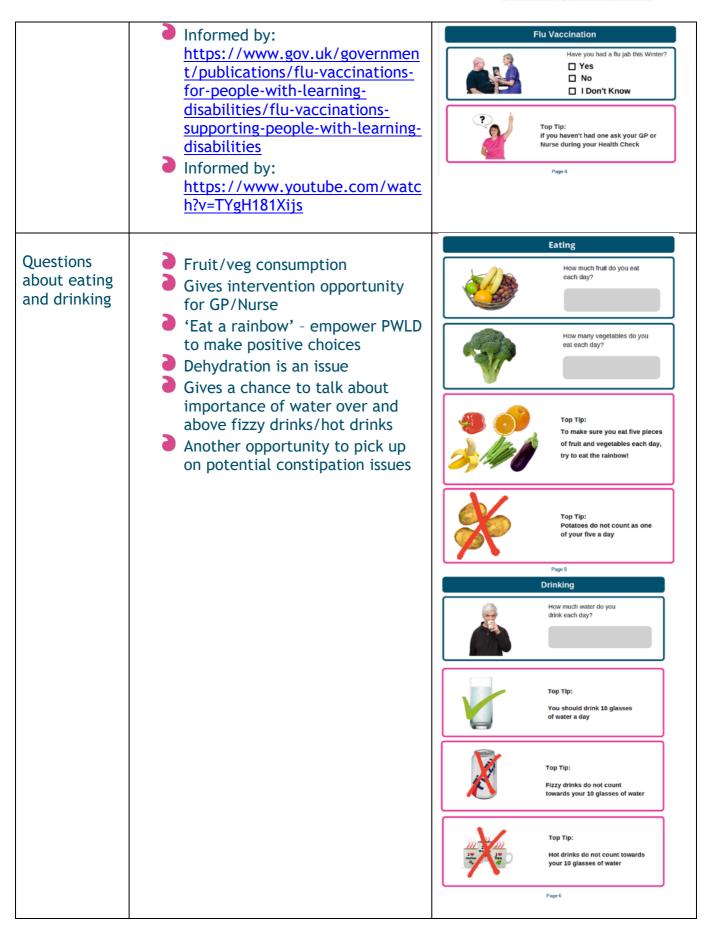
Themes for Questions	Coproduction feedback	Checklist Outcome
Must think about the person	Questions about the PWLD What they like/don't like Ask their name Ask who supports/carers for them Informed by: https://www.mencap.org.uk/sites/default/files/2017-06/AHC%20Easy%20Read%20Guide%20Final.pdf	Annual Health Check Your Checklist Please fill this book in and bring it to your appointment My name is My main carer is Tick the things that matter to you My triends My Family Sports Hobbies My pets Page 1

²⁹ http://www.bristol.ac.uk/media-library/sites/sps/leder/LeDeR_2019_annual_report_FINAL2.pdf



General Sleep - impact on mental health Health Weight - identify changes Toilet routines - constipation is a problem ☐ Yes Eyes/dental/hearing can have П № ☐ I Don't Know wider implications on health Do you have any prob Pick up on smoking/drinking ☐ Yes habits -prevention/intervention ☐ No ☐ I Don't Know opportunity for GP/Nurse Exercise - gives a Has your weight cha prevention/intervention for Gone Up ↓ Gone Down **GP/Nurse** Do you have your eyes test Informed by: ☐ Yes ☐ No https://www.myhealthguideapp. ☐ I Don't Know com/ Informed by: Do you get your teeth checked? ☐ Yes https://www.mencap.org.uk/sit ☐ No es/default/files/2016-☐ I Don't Know 04/ELDSA%20easy%20read%20v1. Top Tip: Brush Your Teeth Everyday pdf Informed by: https://www.england.nhs.uk/wp ☐ Yes ☐ No content/uploads/2019/05/action □ I Don't Know -from-learning.pdf ☐ Yes □ No ☐ I Don't Know ☐ Yes ☐ No ☐ I Don't Know What exercise do you do each week? Walking ☐ Swimming Dancing e.g. Zumba Singing in a Choir Team Sports Other Top Tip: You can ask for help to get more active at your GP Surgery ood to do 30 minutes activity every Ask about flu Gives opportunity to ask about vaccination Reasonable Adjustments Even more important in the context of COVID

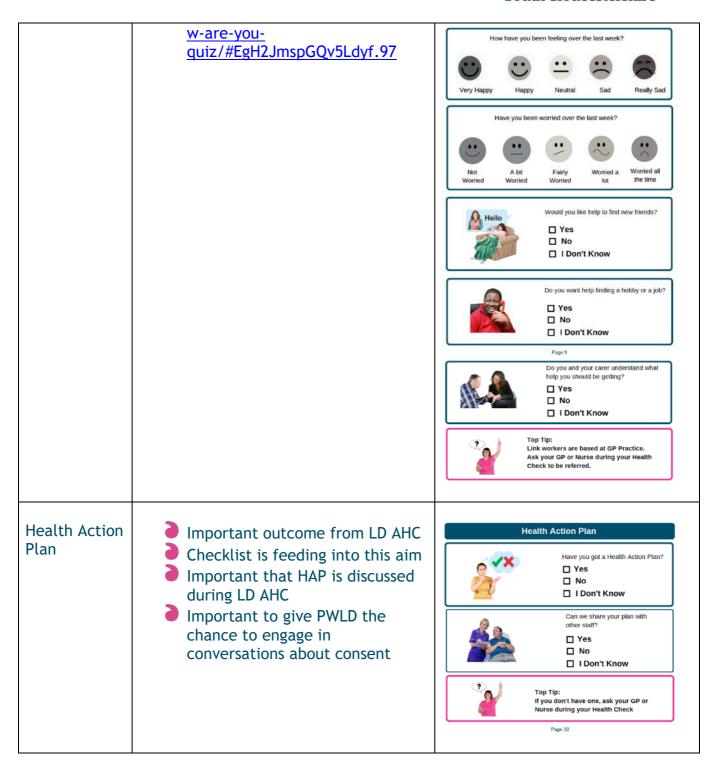






Health Screening - Female Health These are often missed sure your cervix is healthy. Screenings Often an 'embarrassing' topic Your cervix is in your vagina. Needs to be explained in an Have you had a smear test? accessible way ☐ Yes ☐ No Opens up the conversation for ☐ I Don't Know **GP/Nurse** Do you check your own boobs? ☐ Yes П № ☐ I Don't Know Have you had any changes in your period? ☐ Yes ☐ No ☐ I Don't Know Health Screening - Male Do you check your own testicles? □ No ☐ I Don't Know Sexual Health PWLD have sexual health needs Sexual Health Informed by: Do you have sex with a partner? https://www.mencap.org.uk/ad ☐ Yes □ No vice-and-support/relationships-☐ I Don't Know and-sex Informed by: Do you use condoms? ☐ Yes https://lifesupportproductions.c ☐ No o.uk/2019/09/20/you-your-☐ I Don't Know body-growing-up-relationshipsand-sex/ Mencap have lots of information about sex and relationships Social PWLD might not be aware of the **Prescribing** Social Prescribing SP offers another route to share the Checklist with PWLD Social prescribing is about helping people to stay healthy by getting involved in their Good intervention or prevention local community. Social prescribing Link Workers support opportunity around mental people to do this. health and wellbeing How to access service - Referral via GP Informed by: https://www.nhs.uk/oneyou/ho







Questions for carer/suppor ter

- Important part of PWLD life
- What they are entitled to
- Prompts for carer/supporter and GP/Nurse
- Medicines where many taken, instead of asking carer to list, gives a prompt for discussion with GP/Nurse
- Opportunity for prevention or intervention around mental health and wellbeing

Please answ knows as mu	tions for Carers an er these questions to mak uch as they can about the if you are able to, fill these i	se sure the doctor or nurse person you care for.
What reasonable care for?	They would pre	made for the person you fer a naval spray e.g. for flu vaccination h or low pain threshold necodles the manual Blood Pressure Cuff the digital Blood Pressure Cuff
	asonable adjustments the times, quiet waiting room, specific	
	or Nurse the medication have been any changes	ns the person you care for
	d since the last Health Cl ber passed away, behaviour, sleep	
Are you a paid or I	unpaid carer?	
Are you registered	d as a carer with the GP1	Yes / No
Have you had a ca	arers review?	Yes / No
	Page 11	
	ou are worried about o le person you care for.	r would like to ask? It could

Conclusions

This project has produced a Checklist which is a resource that seeks to improve the quality of the LD AHC and the health outcomes for PWLD by offering multiple opportunities for prevention and intervention conversations. By adopting a coproduction approach, the Checklist has had buy-in from health and care professionals, carers and, most importantly, PWLD.

The latest data from Public Health for 2020/21 tells us that of those eligible for an LD AHC in the Bristol, North Somerset and South Gloucestershire area, only 36% took one up. This compares to 37% in the South West region and 50% for England. While this could be an outlier, especially with the impact of the COVID-19 pandemic, these figures demonstrate a need for this Checklist to help promote uptake of LD AHC.

To conclude, this resource provides accessible information that will promote better health conversations between PWLD, their carers/supporters and their GP/Nurse for the long-term benefit of this under-served population.

The full 'Checklist' can be found here: https://www.healthwatchsouthglos.co.uk/LDAHC-Checklist



Recommendations

We believe the following six recommendations to be achievable, affordable and evidence based:



That the Checklist is placed on TeamsNet and Remedy as a resource for professionals



That the Checklist is shared widely between Voluntary Sector Partners



That services promote the resource on social media to encourage conversations around LD AHC and HAPs



That steps are taken to ensure GPs and Practice Managers make good use of the Checklist by sharing with PWLDs and their carers



That the Sirona Community
Learning Disability Team utilise the
Checklist in their work



The Checklist is integrated into systems in the Bristol & North Somerset areas for the benefit of all PWLDs



Stakeholder Responses

Cllr. Ben Stokes, Chair Health and Wellbeing Board South Gloucestershire and Chair Learning Disabilities Partnership Board:

"The Annual Learning Disabilities Health Check is a key tool to helping tackle some of the systemic inequalities that exist in getting access to healthcare for people with Learning Disabilities (LD).

I hope that the relevant health and care professionals will be able to accept the report's recommendations for the widespread use of the newly designed Health Check Checklist. The report also spells-out the significant variation in take-up and quality of service between GP practices in South Gloucestershire.

It is very disappointing that these largely avoidable variations exist and confirms what people with LD and their carers have been telling us for a long time, that "many GPs don't seem to take the health needs of people with LD seriously". The checklist will surely help to make the whole process of the Annual Health Check not only easier but also more effective at reaching a broader spread of people with LD."

Louise Hudson, Locality Development Manager, South Gloucestershire, NHS Bristol, North Somerset & South Gloucestershire CCG:

"What a brilliant piece of collaborative work - after putting you all in touch with each other earlier in the year and then stepping away it's great to see the end result."

Lesley Le-Pine, Bristol, North Somerset & South Gloucestershire CCG:

"This was a fantastic piece of partnership working with Healthwatch and social prescribing - really brilliant. They involved and tested with service users and it provides a great 'get ready' checklist to roll out across BNSSG. Highly recommended - would use again!"



Equality Impact Assessment

Project Name: Improving Health Outcomes for People with Learning Disabilities A co-produced checklist to support Annual Health Checks

Date of Assessment: 2020

Equality issues were identified in the scoping phase of the project to identify overlapping characteristics that impact this group and those that care for them. These have helped to inform our outcomes and recommendations;

Equality Group	Negative Impact	Positive Impact	No Impact	Unsure of Impact	Reason(s)
PWLD - lived experienc e	yes	-	-	-	Our patient feedback reports in 2020 heard about the lived- experience of PWLD and their carers. Concerns were raised about the lack of appropriate, accessible information, specifically in relation to health checks. See listed sources of information and reasons why this project was selected as a priority for action, including health
					disadvantages for PWLDs - report pages 6-7
Carers	yes	-	-	-	NICE Quality Standards (March 2021) recommend that carers are supported to actively participate in decision making and planning for the person they care for.
					https://carers.org/news-and-media/news/post/114-nice-guidance-on-providing-high-quality-support-for-adult-carers
Women/ Girls	yes	-	-	-	On average, the life expectancy of women with a learning disability is 18 years shorter than for women in the general population. (Mencap)
Men/ Boys	yes	-	-	-	On average life expectancy for boys and men with a Learning Disability is 14 years shorter than men in the general population. (Mencap)
LGBTQ+	yes	-	-	-	Their needs are often overlooked, particularly mental health needs.
White People	yes	-	-	-	Disadvantage occurs if the white person experiences socio- economic deprivation as this is known to inhibit/affect healthy lifestyle choices.
BAME	yes	-	-	-	People with learning disabilities from black and minority ethnic communities face 'double discrimination' in accessing public services (NICE.org.uk)



					https://raceequalityfoundation.org.uk/wp-content/uploads/2018/03/health-brief15-1.pdf Support for language skills both for those who have low verbal ability and those service users, families and carers who may have difficulty with English (NICE.org.uk)
Physical Disability					People with learning disabilities have a much greater propensity to develop health problems - both physical and mental health, as compared with the general population. (Foundation for people with LDs) There are additional challenges & service needs for those with profound disabilities, particularly individuals who are non-verbal or have a mental health disability too (NICE.org.uk) Problems associated with 'diagnostic overshadowing', where the learning disability trumps the physical or mental health need. Causes concern if professional misses the clues from symptoms presented. https://www.ghc.nhs.uk/files/A%20-Z%20of%20Health%20Issues%2020120.pdf
Faith Groups	-	-	x	-	It is not anticipated that there would be a likelihood of people being proportionately more or less impacted as a result of their faith
Pregnanc y & Maternity	х	-	-	-	Nationally 7% of people with a learning disability are parents, and many have a mild impairment. 40% of these parents don't live with their children. Impact from not receiving suitable antenatal care and education. (Best beginnings)
Marriage & Civil Partnershi p	-	-	X-	-	It is not anticipated that there would be a likelihood of people being proportionately more or less impacted as a result of marriage or civil partnership.



Encourage positive conversations around health/wellbeing to help counteract multi-morbidity harder to measure but could be followed up qualitatively Give a strong voice to those who may not be able to do Gloucestershire who work with PWLDs – follow on social Provide qualitative insights about the needs of PWLD Build relationships with GP Practices through the GP LD Used across South Gloucestershire - follow up and Coverage of the project findings and recommendations Find out what the mains health issues for PWLD are media, subscribe to email lists, join meetings/support Increased uptake of LD AHC - compare numbers Leads – email communication, follow on social media sful? Pick THREE Build relationship with Community groups in South Bring together professionals and PWLD to cover Interim intended outcomes (quick wins) Improve the health outcomes for PWLD in local media outlets, websites, FB, etc. Reduce health inequalities for PWLD see which Practices use/circulate What short term changes would you expect to see? your main intended outcomes Main intended outcomes before and after project multiple different angles What are the links between your supporters want to create? Intended impacts How will you measure them? How will you measure them? (where it exists) that is useful, accessible, Publication of finding on Updated questionnaire Publication of a report forwarded to services What are the services, goods and products that will arise from project newspaper coverage Contribute towards improving health outcomes for people with LD; specifically ensuring that PWLD get the most out of their LD AHC and come away with a Health Action Plan recommendations recommendations and co-produced How will you measure them? our media and providers and Report and Realistic Outputs What is or is not already sent out by Primary Care four Project Title: Learning Disability Annual Health Checks – user led improvement of pre-check questions Context/Risks How might key processes and ev Engaging successfully with PWLD Creating accessible information Organise focus groups with PWLD Meet regularly with professionals From the focus groups shape the to evaluate and monitor project information to help patient and questionnaire to include more Problem = not all people receive a pre-visit questionnaire, and the questions are not asking about general health and Carers/professionals Co-produce a pre-check People with a learning disability (PWLD) often have poorer physical and mental health than other people project and outcome. Team capacity What will your project do? Nationally ¼ of people with LD attend their LDAHC, NHS England want to bring this up to 75% Activities Project aim and objectives what does the project seek to achieve? Give an overall ain and some specific objectives What financial and non-financial resources are committed to the project? Include contributions partners South Glos Council South Glos Public Health Other community groups Enough evidence and data to support the project proposal Evidence of the solution what evidence makes you think this will work? Milestone Trust PWLD is a JSNA priority in South Gloucestershire Paul's Place BNSSG CCG Great interest from partners and stakeholders Involvement with services users and partners The Hive Inputs Duration (heavily impacted August/September = focus and their carer/supporters October = create checklist What is the location, setting, target and duration of your project? Target = People with LD by COVID-19 Pandemic): What p Project Logic Model November/December = Setting = Focus groups Focus and scope Early 2021 = write up Location = South release checklist Gloucestershire The issue eport?



Letter to Primary Care services



To all GP Practice and Primary Care Professionals

RE: New Checklist to help people with learning disabilities get the most from their Annual Health Check

This 'Checklist' is for patients and their carers/supporters to fill in before their Annual Health Check. Please promote the use of this tool widely to help people prepare for their annual health check with your practice. This helps to save time by giving you information in advance and helps the person understand what their health check is for.

Our ask:

- ✓ Share the checklist please send it to patients when you send them an invitation letter to their to Annual Health Check. It is available on TeamsNet and Remedy or can be downloaded here.
- ✓ Encourage people to keep their Health Action Plans up to date so everyone working with the person can support them to keep well e.g., CLDT, Social Prescribers, day services, carers and family, the One You South Gloucestershire service.

Why this is important: The death rate of people with learning disabilities in England was up to six times higher from COVID-19 during the first wave of the pandemic than the general population. This could be due to higher likelihood of other health problems like diabetes, respiratory problems obesity and difficulties recognising symptoms and understanding guidance. (Deaths of people identified as having learning disabilities with COVID-19 in England in the Spring of 2020)

Background: Healthwatch South Gloucestershire have worked with BNSSG CCG, Southern Brooks Community Partnerships and South Gloucestershire Council to look at how to improve the quality of the annual health check and as a result a new checklist was developed. The content of the checklist has been developed in collaboration with a focus group of people with learning disabilities, and a steering group of carers, supporters and professionals.

The Checklist: This supports people with learning disabilities and their carers to help recognise when things aren't right, take actions to keep healthy, to speak up and seek help. This checklist will be used to promote take-up of Annual Check-ups, raise awareness of their importance and contribute towards improving the health outcomes for those with LD. It will also raise awareness of Health Action Plans, highlighting factors that are sometimes missed (such as constipation) and the importance of health screenings (such as breast and testicular cancer).

Kind Regards,

Maisy Griffiths	Lesley Le-Pine	Zain Patel	Toria Wrangham	Louise Lees
Area Lead (Healthwatch SG)	Quality Lead & LeDeR Programme Manager (BNSSG)	Transformation Manager - LD (BNSSG)	Social Prescribing Manager (Southern Brooks)	Specialist Health Improvement Officer (South Glos Council)











Breakdown by GP Practice for Quarter 4 (ending March 31st 2019)

GP Practice	The number of patients aged 14 years or over in the financial year on the practices agreed learning disabilities register.	Quarterly count of registered patients aged 14 years or over, at the 31 March 2019, on the practice's Learning Disability register who have received a learning disability health check by the GP practice and have not received a health check in a previous quarter in this financial year.
ALMONDSBURY SURGERY	No figure provided	0
BRADLEY STOKE SURGERY	37	10
CADBURY HEATH HEALTHCARE	46	3
CLOSE FARM SURGERY	27	5
CONCORD MEDICAL CENTRE	53	26
CONISTON MEDICAL PRACTICE	No figure provided	7
COURTSIDE SURGERY	32	9
EMERSONS GREEN MEDICAL CENTRE	27	1
FROME VALLEY MEDICAL CENTRE	43	14
HANHAM HEALTH	69	7
KENNEDY WAY SURGERY	31	14
KINGSWOOD HEALTH CENTRE	62	4
LEAP VALLEY MEDICAL CENTRE	58	18
ORCHARD MEDICAL CENTRE	106	58
PILNING SURGERY	24	10
ST MARY STREET SURGERY	42	0
STOKE GIFFORD MEDICAL CENTRE	71	14
STREAMSIDE SURGERY	15	0
THE DOWNEND HEALTH GROUP	125	42
THORNBURY HEALTH CENTRE - BURNEY	No figure provided	14
THREE SHIRES MEDICAL PRACTICE	No figure provided	2
WELLINGTON ROAD SURGERY	16	12
WEST WALK SURGERY	44	24
TOTAL	028	394

101AL 928 294



Get in touch



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