

Summary Report: **Learning Disability Providers**

Tuesday 12th May 2015 | 2:00 pm
Council Chambers, The Hollies, Midsomer Norton

The group introduced themselves and Sue Blackman gave an overview of the **your care, your way** review. Comments were then invited from the group.

Are we looking for a raft of new services?

Not necessarily. This project is about looking at aspirations against services already available. New ideas may come to fruition.

Feedback from group

- VE Day highlighted the differences in communities now and the change in society
- Recognised this is a “huge ship to turn” and benefits may not be seen for several years, in the meantime we must ensure “business as usual”
- Advocates and enablers are not recognised in overview (before GP)
- GP cluster not particularly relevant to people with learning disabilities (PWLD)
- PWLD not necessarily covered within residential nursing care – “hidden people”?
- PWLD have a right to draw on all resources
- Expectations need to be managed so unacceptable care/services are not simply accepted
- GP and other services to move from a 9-5 weekday situation – resources sit empty for weekends
- Recognised enablement team is excellent. Example given, however this had to be instigated – pathway of care was not automatically implemented after hospital discharge

- Signposting needed – not currently available from GP service
- Noted that everything seems to be online – is this appropriate for less able/older generation?
- Wellbeing hubs in GP/libraries would be a good idea
- A local familiar community setting for information/signposting
- Sirona representatives have been present at One Stop Shops once a month, but this has received little/no interest
- Use of technology vital to steer in right direction
- Attention to be given to self help/management and prevention
- Example given of GP refusal to book interpreters – patients may not be dealt with appropriately or understand the outcome of their visit/prescription. Other examples:
 - Prescription confusion
 - Language not appropriate
 - History not known – PWLD and sensory impairment (SI) may not be capable of relaying history
 - Consider double appointment for PWLD/SI – be proactive!
 - Deaf patients cannot make appointment over the telephone and often have to visit surgery to do so in person
 - A consistent standard needed across all surgeries
- Isolation exists in busy towns/cities as well as remote areas
- Pop up hubs – Chew Valley bus an excellent example!
- Don't put up a barrier because you don't think there's a need
- Patient/service user champions to give another perspective
- Professionals/services to train volunteers
- There is too much bureaucracy around high level monitoring/auditing

How can we engage further with PWLD/SI?

- Action on Hearing Loss and Deafplus are joining together to facilitate events
- Carrswood have informal coffee mornings and “have your say” events
- Acknowledged all groups are very welcoming of outside speakers