# Adults Learning Disability Strategy for Wakefield District

## Review of feedback

## Contents

## 1. Introduction

We wrote our Adults Learning Disability Strategy before the pandemic. It described what we planned to do. We wanted to check if our plans were still right and we wanted people with a learning disability, their carers and professionals to tell us what is important to them.

## 2. Listening to local people, carers, families and professionals

### 2.1 What did we do

Before we started the survey, we talked to the Patient and Community Panel to share with them the reason for the engagement, what we were going to ask and how we were going to go about it. We also had a conversation with Lift Up Friends, a local learning disabilities self advocacy group.

After the discussions, we created a survey that was available online and in paper version. This was in easy read format.

The survey went live on 4 February and closed on 20 March. It was shared in different settings including:

- Learning Disability Partnership Board and their wider distribution list
- Strategic Health Group
- Supported Living contacts
- Carers Wakefield District
- Patient experience group run by the Strategic Health Facilitator – Learning Disabilities
- Lift Up Friends (including a discussion group)
- GP practices newsletter, with regular reminders
- The CCG’s website, intranet and staff communications
- The Local Authority communications
- Covid Community Champions, Patient and Community Panel and the Patient Participation Group Network
- VCS contacts including the Positive Mental Health Network
- Communications and engagement colleagues across the Wakefield District Health and Care Partnership for onward distribution and publicity
- Social media

### 2.2 What did people tell us

In the survey, we asked if people were answering as someone who has a learning disability, a carer or a professional. We have heard from seven people with a learning disability, 24 carers and 20 professionals (51 people in total).

We asked what **the top five things** were that we needed to do. From all of the responses, we heard that, in order of importance, the five things were:

1. Health services and the council work together to plan services
2. There are meaningful and enjoyable activities for people
3. Carers are supported and involved in people’s care
4. People have choice over where and how they live
5. Services are easy to use when they are needed

Below is a table that shows all the options and the feedback we received.

| | | | |
|---|---|---|---|
| Health services and the council work together to plan services | | 74.51% | 38 |
| There are meaningful and enjoyable activities for people | | 74.51% | 38 |
| Carers are supported and involved in people’s care | | 58.82% | 30 |
| Services are easy to use when they are needed? | | 52.94% | 27 |
| Personal budget and individual service funds gives control and means that choice is available | | 37.25% | 19 |
| Support works when people move from children’s to adult services | | 50.98% | 26 |
| People have choice over where and how they live | | 56.86% | 29 |
| There are opportunities to learn new skills or have a chance to get a job | | 45.10% | 23 |
| Suitable Short breaks / respite care that are available | | 49.02% | 25 |

If we look at the same question but break it down by who answered it, we can see the top five priorities in this table. Those that are green are the top five, with the darkest green being the top scoring choice per row.

It shows that for those using learning disability services, the important things were:

- There are meaningful and enjoyable activities for people, and people have choice over where and how they live
- Health services and the council work together to plan services, services are easy to use when they are needed, and there are opportunities to learn new skills or have a chance to get a job

For carers, the important things were:

- There are meaningful and enjoyable activities for people
- Carers are supported and involved in people's care
- Health services and the council work together to plan services, and suitable Short breaks / respite care that are available
- People have choice over where and how they live

Professionals have said that the important things from their point of view were:

- Health services and the council work together to plan services
- There are meaningful and enjoyable activities for people
- Support works when people move from children's to adult services
- Carers are supported and involved in people's care
- All other options scored the same number of votes.

| **What are the top 5 things we need to do?** | **Please tick five.** | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| | Health services and the council work together to plan services | There are meaningful and enjoyable activities for people | Carers are supported and involved in people's care | Services are easy to use when they are needed | Personal budget and individual service funds gives control and means that choice is available | Support works when people move from children's to adult services | People have choice over where and how they live | There are opportunities to learn new skills or have a chance to get a job | Suitable Short breaks / respite care that are available | **Row Totals** |
| Someone who uses services / has a learning disability | 5 | 6 | 3 | 5 | 2 | 2 | 6 | 5 | 1 | 35 |
| Carer | 15 | 18 | 17 | 13 | 8 | 11 | 14 | 9 | 15 | 120 |
| Professional / stakeholder | 18 | 14 | 10 | 9 | 9 | 13 | 9 | 9 | 9 | 100 |
| **Column Totals** | 38 | 38 | 30 | 27 | 19 | 26 | 29 | 23 | 25 | 255 |

We then asked if people felt that of the five things, these were happening now and people felt that:

| | | |
|---|---|---|
| Yes | 1.96% | (1) |
| Yes, most of the time | 7.84% | (4) |
| Yes, some of the time | 60.78% | (31) |
| No | 29.41% | (15) |

When we split the same question by who was responding, we found that:

| | Yes | Yes, most of the time | Yes, some of the time | No | **Row Totals** |
|---|---|---|---|---|---|
| Someone who uses services / has a learning disability | 0 | 2 | 4 | 1 | 7 |
| Carer | 1 | 1 | 11 | 11 | 24 |
| Professional / stakeholder | 0 | 1 | 16 | 3 | 20 |
| **Column Totals** | 1 | 4 | 31 | 15 | 51 |

We asked about **what works well at the moment** and 36 people made comments. The examples that people gave us included:

- Services working together, across health and social care
- Respite care and day services
- Activities and other services available to people
- Support with living independently
- Support and listening to carers and service users, especially in crisis
- Three people also mentioned that, although there are things that are working well, there are some parts of it that could do with improving. For example, respite care is available but not everyone has it and job opportunities are there, but not very varied.

When asked **what could be better**, 36 people told us that:

- Services working together more to prevent crisis and making services available when they are needed. Joint working between services and services taking responsibility for what is within their roles. Also to make it easier for third sector services to provide support to those who need it. The theme of joined working and partnership working.
- Support with getting a job and better opportunities for education post 18 years of age.
- Planning, support and communication during transition and services working together during this time was also noted several times.
- Suitable short breaks and respite care. Lack of respite post age 18.
- Better choice of support and activity regardless of the finance arrangements for those who use them or need them. More activities for young people, age appropriate and better signposting to these. Recognition of the funding difficulties for third sector organisations.
- Listening to those who use local services and their families. Getting voices heard more and involving people in creating flexible plans.
- Support in hospital and when leaving, including the person and their family in planning for leaving the care setting.
- Support with finances – e.g. when moving to supported living and better explanation of managing budgets. Budgets for carers who provide 24/7 care.

- Recognise the needs of the young people who, although adults, still have the same needs they had when they were children.
- Accessible information; local offer website information could be easier to navigate

Comments that were made once:

- Support for carer/family when needed
- Those who provide services to do interactive sessions with people they support.
- Clarity from those who buy services on what is needed locally
- Better communication between all parties – families, services and those who need the support
- Advocacy service
- Practical support e.g. Also offering carers assistance with wet room facilities as to enable them to minimise breakages and ease of cleaning.
- Pressures on current staff

**What could be done differently to make things better?**

We wanted to know what would help people and 34 people shared their views. They said that what would make things better is:

- Getting opportunities to work as for some, Covid-19 has impacted on their ability to work. Greater support to get young people into paid or voluntary employment, and range of provision for employment support, including for over 25's.
- Giving the people we support more control and choice of who they live with and where. Also support in making choices and decisions.
- Carers of those who are leaving school to have access to the options open to them for further meaningful activities and development, relevant to each person's particular disability and wishes. Support during transition.
- Easy to use and understand access to help, advice, support without having to have a referral or lengthy waiting lists. Promotion of services to make access easier.

- Health and social care services working together better on buying the right services and better use of budgets. Working jointly to support those with learning disability and their carers.
- More support for those in wheelchair as transport is difficult to access the community
- The NHS and social care should be treated equally.
- Activities and how these are organised. Easy read/video information on the activities that are available. Activities tailored for young people and older adults.
- More support from LD nurses in hospital and GPs
- Monthly statements on finances to help funding management. Better support for low income families.
- Better use of charities to support independent living
- Not privatising care services
- Make sure that all services and staff have the appropriate understanding and training of all hidden disabilities as well as learning disability.
- Regular reviews and good communication to make sure there is consistency.
- Simplify complex funding routes and service criteria.
- Thinking outside of the box when looking at services and solutions.
- More talking to those that need the activities and their families. Communication between services and with those using services as to how to plan residential support, support to family carers, identify that plans are person centred, and more opportunities are available that encourage new opportunities.
- More care and interest from social services
- Acknowledge that although they are in terms of age they may be adults, their needs are still the same as when they were children
- Consider how the roles could more appealing to attract potential staff
- Making sure people are not lost in the system.
- Discharge planning from hospital. More support for health appointments and reasonable adjustments. NHS recognising people.

**What else do we need to think about to have the right support and services?**

We asked what else we needed to think about when it comes to aspects below and people gave feedback on each.

- Health
    - Staff to be listed to, e.g. when liaising with medical professionals
    - Joined up working
    - Increased awareness and training for GPs and their teams on LD, general training on supporting people with LD and their carers
    - Specialist support in dieting, improvements in eating and activities
    - More information easily available. More accessible information
    - Medical needs
    - Referrals from GP to hospitals including LD nurse
    - Ability for carer to contact GP on behalf of their loved one.
    - Less medicating of people with LD
    - Health professionals are the experts on health issues but treat Support workers and family carers and the individual themselves as the experts on the individual.
    - Cater for adults with SEN
    - Better understanding of the health inequalities in Wakefield
    - Access to appointments in a timely manner
    - Access to primary services
    - Reasonable adjustments
- Education and work
    - Support in getting employment or volunteering opportunities was a key theme in this section and an area for improvement noted by people with a learning disability, carers and professionals. This included having more job availability and courses and opportunities to develop skills that are transferable to the workplace. Better transitions between school/college and work opportunities were also noted.
    - Need for post school and college opportunities, for example life skills. Continuing education in a working environment and opportunities other than day ones.
    - Extend funding for services directed at over 25's

  - Recognise that skills centres offer a place for people with a learning disability to have a role and meet people
  - No clear paths
  - Cater for adults with SEN
  - Tap into projects and programmes available in not for profit organisations
- Support from organisations
  - Pay a better rate for services and be clear what needs commissioning.
  - Using the services offered by charities.
  - Joined up communication between organisations and carers.
  - Knowing what is available and having more involvement so that services can share what they offer.
  - Closer partnership working should be prioritised, organisations working better together and sharing information.
  - More advocacy and the role of self-advocacy groups
  - Few people commented more generally with one person questioning if this is available, one feeling that support is not working, one noting this is essential and two commenting on good support.
- Accessing different services
  - More choice in local groups and meaningful activities. Activities suitable for the level of disability. More social clubs and considering physical activity for health and well-being.
  - Work based activities leading to real job opportunities, sponsored work placements and promoting self-employment
  - Lack of activities high end placements not delivering
  - Increase services and opportunities. Making services accessible and sharing what is available
  - Support providers to set up activities by funding these for people
  - Funding routes
  - Training and facilities
  - Care provision has been impacted by the pandemic
  - Update the Local Offer page and make it easier to navigate. Provide more information and information to be accessible to all.

- Feeling well, safe and supported by others
    - Giving more support for people in wheelchairs
    - Continue to work with the hate crime initiative
    - Care plans drawn up in conjunction with carers
    - More groups where voices are heard and carer support networks
    - Specialist support in sexual health and relationships
    - Services need to know how to communicate well
    - Availability of an advocate
    - Provide services via phone or online rather than having gaps in support
    - Doesn't really happen
    - Robust Safeguarding policies in place and investigations conducted in a timely manner.
    - Two people noted they felt safe and supported
    - Communication for people who are non-verbal
    - Empowerment to the person at the centre of protection plans to take risks and to be able to participate in life experiences.
    - Appropriate funding/salary for specialist staff to offer revitalised support to persons who have limited physical ability.
- Having choice and control over where I live
    - We received comments from people who said they were happy where they live and also others who said that this is important, including being involved in the process.
    - Housing was mentioned with suggestions to commission more specialist housing and looking at options for independent living in a house of multiple occupancy.
    - Two people felt this was working well in most situations, although two people said it wasn’t
    - Need for more choice
    - Adapt careers strategies in school/college to include all Preparing for Adulthood (PfA) pathways - including Independent Living
    - Using tools to ascertain this

- Being part of a local community
    - Joining in events such as the Diamond Jubilee, sports and voluntary work opportunities. Engaging locally with business and activities appropriate to age and culture.
    - Access to local groups, their information and activities.
    - Support for young people to be more included in mainstream community activities.
    - Identifying where links can be made to ensure the visits to places are safe for everyone
    - Learn from groups like the Makey Wakey groups.
    - Better community involvement and awareness of people's differences to dispel common myths about people with Autism and Learning Disabilities.
    - Two people noted they feel part of their community although one noted they wished but had experienced vandalism to their flat/house.
- Anything else
    - Encouraging support staff to work in social care.
    - See social care providers as equal and value them.
    - Supporting people with learning disability to access different activities, like model railway clubs.
    - Be able to access what is needed without barriers.
    - Inclusive and updated help, support and advice across the board for everybody, which is easy to access and widely advertised.
    - Regular surveys to get feedback on services and what is needed
    - Careers provision at school and college that reflects all PfA pathways
    - Keeping service users active
    - Understanding culture and religion. Adult social services to consider individual circumstances.
    - Purpose and a structure for people’s days with tangible results and a feeling of job satisfaction. Being part of society's workforce like everyone else.
    - Accessible information and information on events, services, support and advice

The last part of the survey asked people to share any other thoughts. The comments that people shared, included:

- Quality of housing
- Funding for support
- Issues when moving between child and adult services
- Notes of appreciation for the support received
- Need to provide good quality accessible spaces for community groups and charities
- Checking on parents/carers to see how they are coping
- Having more consistent quality and opportunities for all across the district.
- Need for activities after college
- Engaging local people to recognise their responsibility to be inclusive and to understand how it is to wear the shoes of an adult with a Learning difficulty, disability and adults who live with Autism and Asperger Syndrome/Spectrum.
- Encouragement and opportunities for local people to engage and involve their time in enhancing the life and skills of persons who want to be an active part of their community but feel excluded as they are not able to easily understand systems etc.
- Need for monitoring of care
- Cross sector and joined up working
- Considering and supporting offers from providers such as charities
- More involvement and engagement opportunities for people with a learning disability

**Who answered the survey?**

We looked at who responded to the survey. Over a half of those who completed the survey (60.5%) were female, just under 30% were male and 10.5% of people preferred not to say.

The ages of respondents, who chose to share this, were:

18 – 24 (1)

25 – 29 (0)

30 – 34 (0)

35 – 39 (3)

40 – 44 (4)

45 – 49 (5)

50 – 54 (6)

55 – 59 (6)

60 – 64 (3)

65 – 69 (0)

70 – 74 (1)

In terms of ethnic background, 38 people commented:

| | |
|---|---|
| Asian or Asian British | 2.63% (1) |
| White | 89.47% (34) |
| Any other ethnic background | 2.63% (1) |
| Prefer not to say | 5.26% (2) |

Just over a quarter of those who responded considered themselves disabled (10 people).

When asked about long-term conditions, impairments or illness, 21 people commented:

- Physical or mobility impairment (such as using a wheelchair to get around and / or difficulty using your arms) 14.29% (3)
- Sensory impairment (such as being blind / partially sighted or deaf / hard of hearing) - - - 4.76% (1)
- Mental health condition (such as having depression or schizophrenia) - 9.52% (2)
- Learning disability (such as having Downs Syndrome or dyslexia) or a cognitive or developmental issue (such as autism or a head-injury) - 33.33% (7)
- Long term condition (such as cancer, HIV, diabetes, chronic heart disease, or epilepsy) - 19.05% (4)
    - Prefer not to say - 19.05% (4)
- No: 23.81% (5)

Looking at carer status, 38 people commented. Of these, just over a half said that they were a carer (22).

## 2. What did we do with the feedback?

We have used the feedback and all that we have heard to see what we need to do. We took our plan to the Lift Up Friends group to share with them what people have told us and what we plan to do. We talked about what the priorities should be and what should happen next.

It was decided that we should focus on four priorities and three cross cutting themes. The group recommended to focus on these:

- Health services and the Council working together to plan services
- There are meaningful and enjoyable activities for people
- People have a choice over where and how they live
- There are opportunities to learn new skills or the chance to get a job

After that, we shared what we have heard with the Learning Disability Partnership.

## 3. Next steps

We will prepare a draft Adults Learning Disability Strategy. We will organise an action planning event to get people’s views about the work we need to do under each priority. This will help us achieve what we agreed in the strategy.

# 4. Appendices

**Have your say on the Adults Learning Disability Strategy**

We wrote our Adults Learning Disability Strategy before the pandemic. It described what we planned to do. We want to check if our plans are still right and we want people with a learning disability, their carers and professionals to tell us what is important to them.

Please fill in our survey and tell us what you think.

https://www.smartsurvey.co.uk/s/LDstrategyWKF/

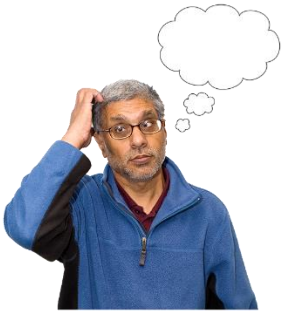
If you run a local group or provide services, please share with those you support. We are also keen to go out and about and speak to people, so please let us know if there is an opportunity to come and visit your group.

Please call us on 07812 469944 or email wakccg.engagement@nhs.net. We can send paper copies to you, and you can send them back to us by writing 'Freepost NHS WAKEFIELD CCG' on an envelope. You don't need a stamp.

The survey will close on 20 March. Thank you in advance for your help and support.

## Adults Learning Disability Strategy for Wakefield District – What do you think?

We wrote our Adults Learning Disability Strategy before the pandemic.  It described what we planned to do. We want to check if our plans are still right. We want people with a learning disability, their carers and professionals to tell us what is important to them.



Once we get it right, we can develop action plans to do the work.

We need your help to get it right. Please fill in our survey and tell us what you think.

If you need help completing this survey, please call us on 07812 469944 or email [wakccg.engagement@nhs.net](mailto:wakccg.engagement@nhs.net). You can use this number to ask for a paper copy of the survey. You can send it back to us by writing 'Freepost NHS WAKEFIELD CCG' on an envelope. You don't need a stamp.

**Are you completing this as:**

- ☐ Someone who uses services / has a learning disability
- ☐ A carer
- ☐ A professional / stakeholder

### 1. What are the top 5 things we need to do? Please tick five.

| | |
|---|---|
| Health services and the council work together to plan services | |
| There are meaningful and enjoyable activities for people | |
| Carers are supported and involved in people's care | |

| | |
|---|---|
| Services are easy to use when they are needed? | |
| Personal budget and individual service funds gives control and means that choice is available | |
| Support works when people move from children’s to adult services | |
| People have choice over where and how they live | |
| There are opportunities to learn new skills or have a chance to get a job | |
| Suitable Short breaks / respite care that are available | |

**2. Of the top 5 things – do you think these are happening now?**

- ☐ Yes
- ☐ Yes, most of the time
- ☐ Yes, some of the time
- ☐ No

What works well?

What could be better?

### 3. What could be done differently to make things better?

### 4. What else do we need to think about to have the right support and services?

| | *Please write in:* |
|---|---|
| Health | |
| Education and work | |
| Support from organisations | |
| Accessing different activities | |
| Feeling well, safe and supported by others | |
| Having choice and control over where I live | |
| Being part of a local community | |
| Other (please tell us more) | |

**5. Is there anything else you'd like to tell us?**

In

against any groups, it is important to collect and analyse the following information. When we write reports no personal information will be shared. Your information will be protected and stored securely in line with data protection rules. If you would like to know how we use this data please see our privacy notice, which you will find on the [Wakefield CCG]() website.

**What is your postcode?** Please write in e.g. WF1, WF9 ______

**What is your gender?**

☐ Female
☐ Male
☐ Prefer not to say
I describe my gender in another way (please write in): ________

**How old are you?** __________

☐ Prefer not to say

**Which country were you born in?**

☐ United Kingdom
☐ Prefer not to say
Other (please tell us which country): _____________

**What is your ethnic group? (Please tick which option applies)**

☐ Asian or Asian British
☐ Black or Black British
☐ Mixed or multiple ethnic groups
☐ White

☐ Any other ethnic background (please tell us): ____________
☐ Prefer not to say

**Are you disabled?**

☐ Yes
☐ No
☐ Prefer not to say

**Do you have any long term conditions, impairments or illness? (please tick any that apply)**

☐ Physical or mobility impairment
(such as using a wheelchair to get around and / or difficulty using your arms)
☐ Sensory impairment
(such as being blind / partially sighted or deaf / hard of hearing)

☐ Mental health condition
(such as having depression or schizophrenia)

☐ Learning disability
(such as having Downs Syndrome or dyslexia) or a cognitive or developmental issue (such as autism or a head-injury)
☐ Long term condition
(such as cancer, HIV, diabetes, chronic heart disease, or epilepsy)

☐ Other (please write in)

☐ Prefer not to say

**Are you a carer? (Do you provide unpaid care / support to someone who is older, disabled or has a long-term condition)**

☐ Yes
☐ No
☐ Prefer not to say

## Thank you for completing our survey.

## Adults Learning Disability Strategy for Wakefield District: Social media messages

1. 🗣 We want people with a learning disability, their carers, and professionals to tell us what is important to them. This will inform our Adults Learning Disability strategy and our work going forward.

   Fill in our short survey. 👉 www.smartsurvey.co.uk/s/LDstrategyWKF

2. 📢 Share your views on what we need to do to improve the lives of adults with learning disabilities in our district.

   If you are a person with a learning disability, a carer, or a professional, tell us what is important to you via our short survey.
   👉 www.smartsurvey.co.uk/s/LDstrategyWKF

3. Are you an adult with a learning disability living in Wakefield District? Share your views and help inform our Adults Learning Disability strategy. ✍

   Fill in our short survey: www.smartsurvey.co.uk/s/LDstrategyWKF

**PRESS RELEASE**

## Have your say on Wakefield District's Adults Learning Disability strategy

On behalf of Wakefield District Health & Care Partnership, NHS Wakefield Clinical Commissioning Group and Wakefield Council would like to hear the views of adults with learning disabilities to understand what is important to them. We also want to hear from carers and professionals.

The Partnership wrote the Adults Learning Disability strategy before the pandemic. It described what we planned to do, and we want to check if our plans are still right so that we can develop action plans to do the work.

Views can be given by completing a short survey. The survey is anonymous, but your views will be used to help inform the Adults Learning Disability strategy for Wakefield District.

Share your views via this short, anonymous survey: www.smartsurvey.co.uk/s/LDstrategyWKF. The survey will close on 20 March.

If you need help completing this survey, please call us on 07812 469944 or email wakccg.engagement@nhs.net. If you would like the survey printed or in another format, please use these details.

**ENDS**

**NOTES TO EDITOR:**

**Wakefield District Health & Care Partnership works to improve the health and wellbeing of local people, by reducing health inequalities, providing continuity of care and improving our services. Our partnership includes NHS organisations, Wakefield Council, Healthwatch Wakefield, housing, voluntary and community sector organisations. We are proud to be part of West Yorkshire Health and Care Partnership.**

**For further information, please contact the NHS Wakefield CCG communications team by email on wakccg.communications@nhs.net**