



Supporting people with a learning disability to attend annual health checks

Learning Disability England Conference
Presentation

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Hello and Welcome

- State your name, role and organisation.

Who we are:

Led by Black, Asian and ethnically minoritised people, we are an evidence-based, policy and practice charity working to tackle racism and racial inequalities.

Our vision:

A society without racism.

Our mission:

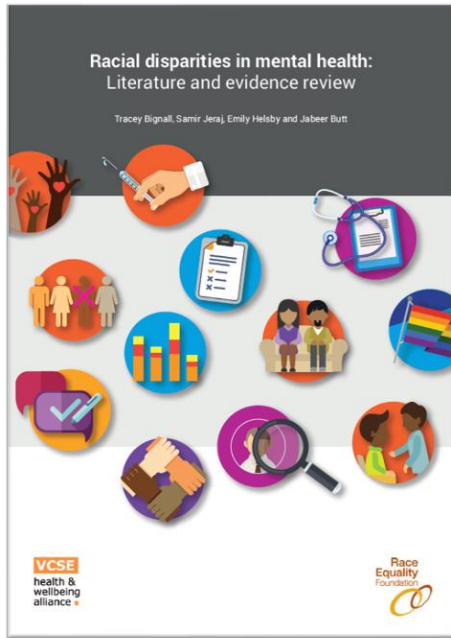
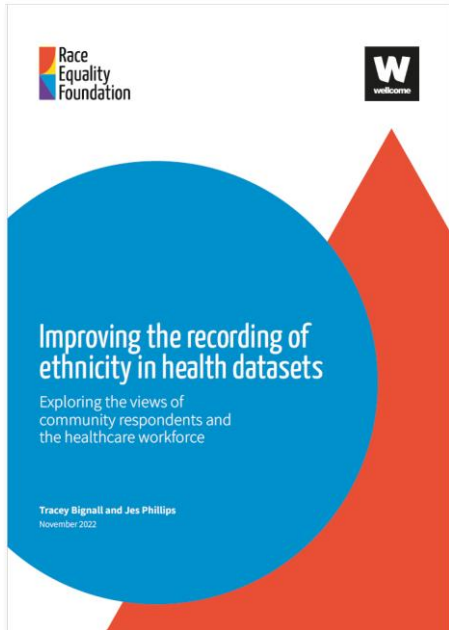
To tackle racism in UK society and positively transform the lives of our Black, Asian and ethnically minoritised communities.

Some of our work



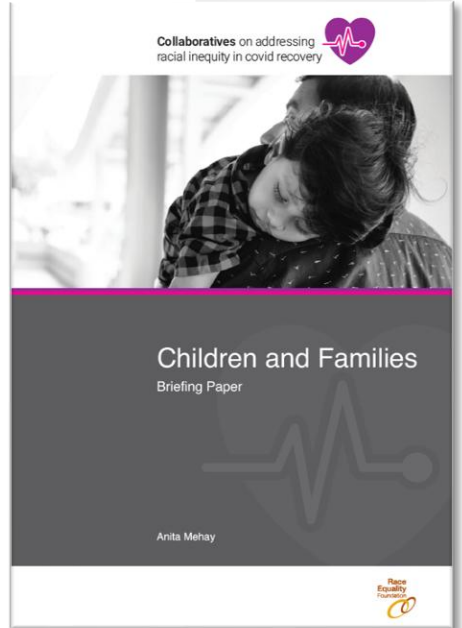
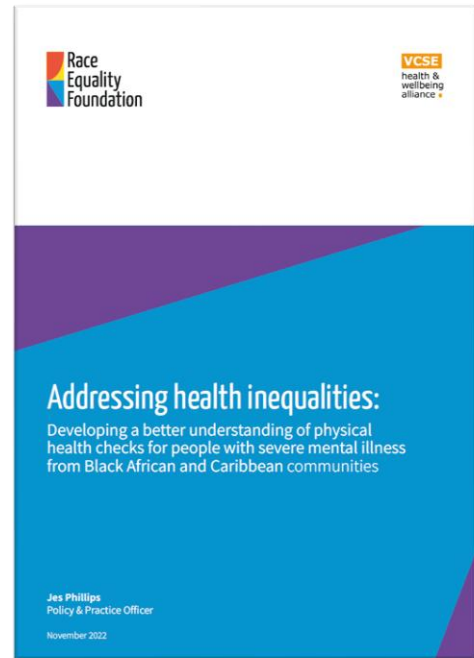
A community based approach to improving blood pressure monitoring

A qualitative study on the recording of ethnicity in health settings



A literature and evidence review of racial disparities in mental health

Report on physical health checks for people with severe mental illness



A series of briefings as part of the race equity collaboratives on the impact of Covid 19 and what should happen next

Aim of the session

To increase knowledge of staff in voluntary sector organisations and those with lived experience so they can better support people with a learning disability to access and participate in annual health checks.

How will we do this?

- Build on existing knowledge of annual health checks
- Improve understanding on what works in addressing the barriers faced by people of Black, Asian and minoritised ethnic backgrounds with a learning disability.
- Gain in-depth knowledge of annual health checks, their purpose, and their potential impact in improving health outcomes.
- Share resources promoting annual health checks for people with a learning disability within the voluntary sector.

Do people with a learning disability have poorer health?

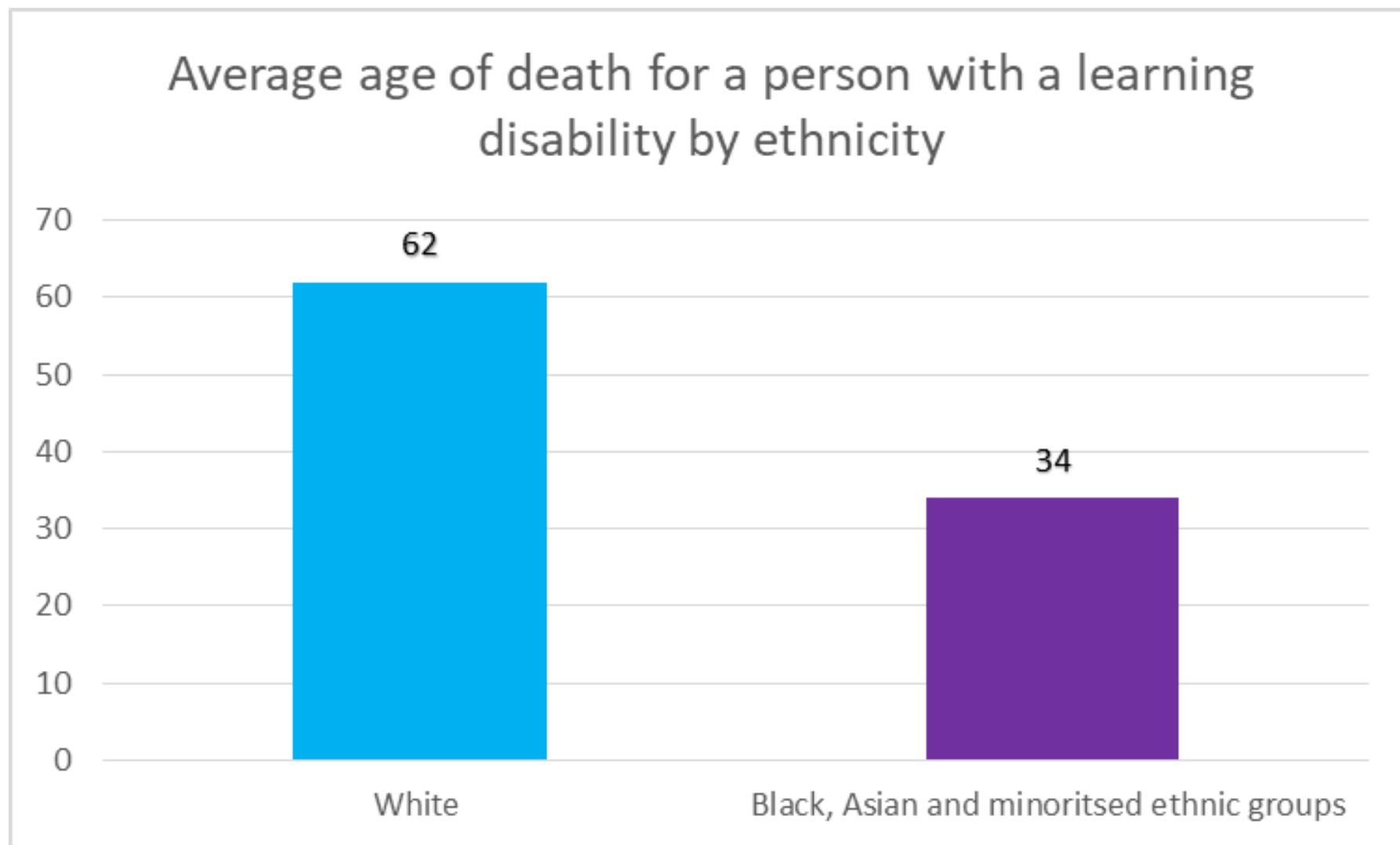
- People with a learning disability are **three to four times** more likely to die from an avoidable causes, mainly due to a lack of timely and effective treatment.
- On average men with a learning disability die 20 years earlier and women 23 years earlier.
- The most commonly reported underlying causes of death in 2022 for people with a learning disability were related to diseases of the circulatory system, diseases of the respiratory system, diseases of the nervous system, congenital malformations, deformations and chromosomal abnormalities (Learning from Lives and Deaths, 2022-23).

Premature mortality - what happens as a result of poorer health?

- In 2022: 3,648 unique deaths were notified to LeDeR of people with a learning disability (including autistic people with a learning disability) in the 12 months of 2022 (January 1st to December 31st). This includes 285 notifications of deaths of children aged 4-17
- 8% of reviews were of people from ethnic minority backgrounds, which includes Asian or Asian British, Black or Black British, Caribbean, or African, mixed or multiple ethnic backgrounds and other ethnic backgrounds.
- 74% of those who have died had a do not attempt cardiopulmonary resuscitation (DNACPR) decision in place at the time of death. In comparison to previous years, there was a lower proportion of deaths where a reviewer was unable to determine whether DNACPR documentation had been correctly completed and followed

How is the experience of people of Black, Asian and minoritised ethnic backgrounds different?

- People from Black, Asian and minoritised ethnic backgrounds have a significantly lower median age at death than people identified as 'White'.
- The median age at death for people from ethnic minority groups is 34 years compared to 62 years for the 'White' ethnic group.
- Black, Black British, Black Caribbean, or Black African: +190% increased risk of dying earlier when compared to White counterparts.
- Other: +168% increased risk.
- Asian or Asian British: +150% increased risk.
- Mixed ethnicity: +81% increased risk.



REDUCING HEALTHCARE INEQUALITIES

The Core20PLUS5 approach is designed to support Integrated Care Systems to drive targeted action in healthcare inequalities improvement

CORE20
The most deprived **20%** of the national population as identified by the Index of Multiple Deprivation



PLUS
ICS-chosen population groups experiencing poorer-than-average health access, experience and/or outcomes, who may not be captured within the Core20 alone and would benefit from a tailored healthcare approach e.g. inclusion health groups



Target population

CORE20 PLUS 5

Key clinical areas of health inequalities

1



MATERNITY
ensuring continuity of care for women from Black, Asian and minority ethnic communities and from the most deprived groups

2



SEVERE MENTAL ILLNESS (SMI)
ensuring annual health checks for **60%** of those living with SMI (bringing SMI in line with the success seen in Learning Disabilities)

3



CHRONIC RESPIRATORY DISEASE
a clear focus on Chronic Obstructive Pulmonary Disease (COPD), driving up uptake of Covid, Flu and Pneumonia vaccines to reduce infective exacerbations and emergency hospital admissions due to those exacerbations

4



EARLY CANCER DIAGNOSIS
75% of cases diagnosed at stage 1 or 2 by 2028

5



HYPERTENSION CASE-FINDING
and optimal management and lipid optimal management

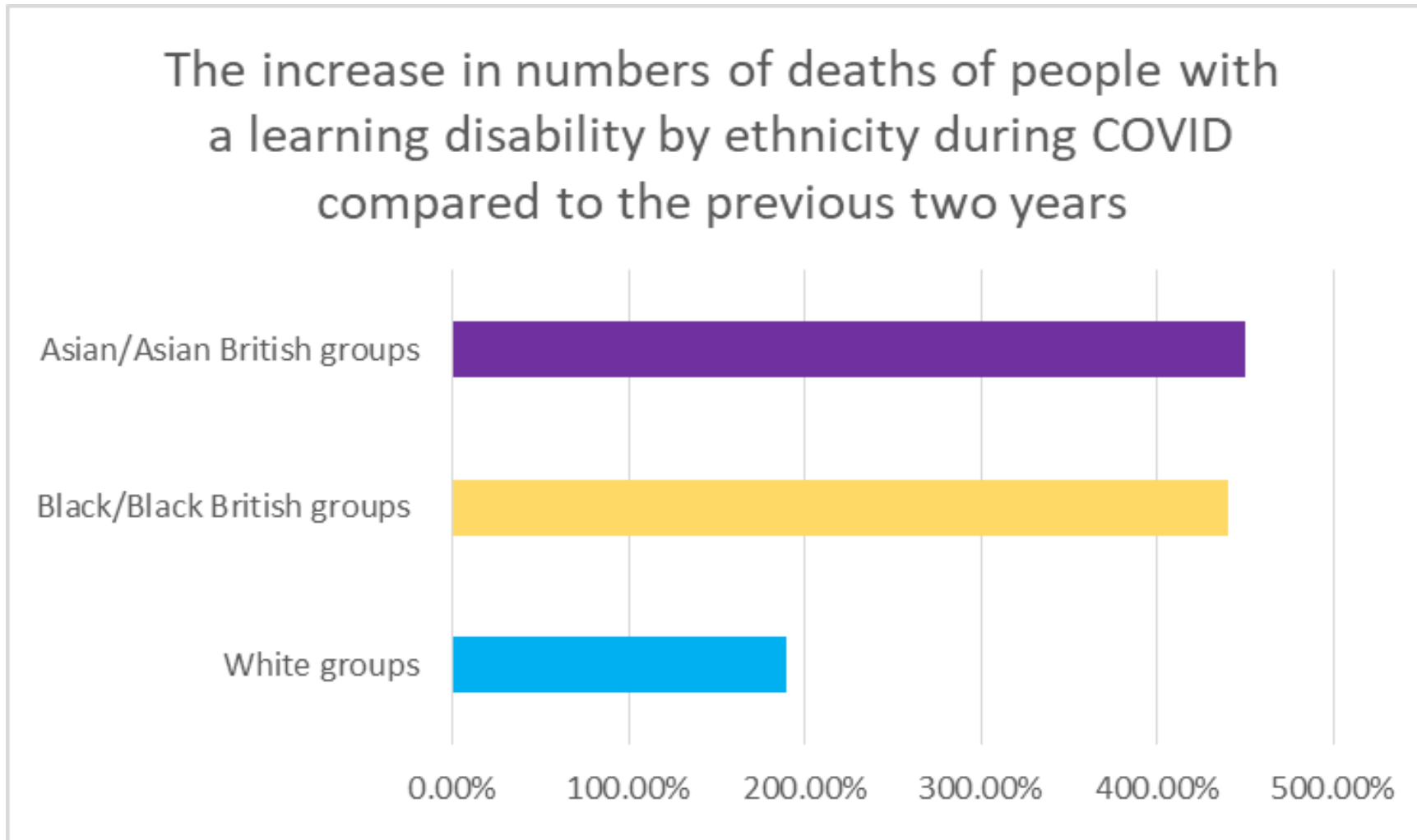


SMOKING CESSATION
positively impacts all 5 key clinical areas

What was the impact from Covid-19?

- The number of deaths of people with a learning disability from all causes in 2020 for White groups was 1.9 times the number in the two previous years.
- For Asian and Asian British groups, it was 4.5 times the number and for Black and Black British groups, 4.4 times (Public Health England, 2020).
- Disproportionate amount of Black Caribbean patients had do not attempt cardiopulmonary resuscitation orders during Covid-19 (Bows and Herring, 2022).

Covid-19 Impact



Group discussion

- Why do you think people with a learning disability from Black, Asian and minoritised ethnic backgrounds die at an earlier age?
- What do you think could be done to prevent these early deaths?

What did we learn from ‘We Deserve Better’?

- People with a learning disability from minoritised ethnic backgrounds experience disparities in healthcare.
- Some people experienced discrimination e.g. being spoken to in a distasteful or derogatory way, being denied access to treatment that was deemed to be beneficial or being prompted to pay for services which were expected to be free.
- Support from community and family networks was pivotal for general health and wellbeing.
- Carers also expressed that they lacked support from their wider family and within their communities, possibly due to learning disability being regarded as a “taboo”. This resulted in feelings of isolation among carers.
- Support from self-advocacy groups was particularly important for people who lacked frequent family support.
- Sometimes culturally appropriate services were unavailable.

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Discussion

- What is an annual health check?
- What do you expect to be included in an annual health check?

What is an annual health check?

- Annual Health Checks are for people with a learning disability aged 14 years and older.
- Need to be on the Learning Disability Register to receive an invite.
- Carried out by a GP or a nurse once a year.
- Opportunity to talk about anything that is related to the health and wellbeing of the individual.
- Involves physical health checks, discussions about lifestyle and wellbeing and conversations with carer about their support needs.
- The appointment should be followed with a health action plan.

Annual health checks

LEARNING DISABILITIES

A Guide to Health Checks

For Commissioners, GPs &
Specialist Health Professionals



What We Know

People with a learning disability can have poorer health than other people.



They do not always know when they are ill or need to see a doctor.



They may not be able to tell people that they feel unwell or different.



An annual health check helps people stay well by finding out about any health problems early, so people get the right care.



People should get a health check action plan after an annual health check to help them with any personal health issues.



Having an annual health check can also help the person get to know their doctor and other staff.



Annual health checks are for adults and young people aged 14 or over with a learning disability.



What can you expect in an annual health check?



What are the key components of an annual health check?

- Physical check-up: weight, height, heart rate and blood pressure.
- Check vaccinations are in date.
- May check urine or do a blood test.
- Discuss medicines.
- Talk about lifestyle and staying well.
- Ask about other health conditions.
- Ask about other health appointments.
- Check if carer is getting support they need.
- Develop health action plan.

NHS Long-Term Plan

- Set an ambition that by 2023/24, at least 75% of people aged 14 or over with a learning disability will have had an annual health check.
- The Plan also sets out a commitment to tackle the causes of morbidity and preventable deaths in people with a learning disability and for autistic people
- Performance in 2020-21 was impacted by multiple factors, particularly COVID-19

Annual health checks – who attends?

- Evidence shows that only 71.8% of people received an annual health check in 2021/22, a statistically significant decrease from 75.2% in 2020-21.
- Learning from Lives and Deaths report 2022 found 27% of people with a learning disability did not receive an annual health check in the year before their death.
- There is a lack of data on ethnicity and uptake of annual health checks but some anecdotal evidence of a lack of awareness and uptake by people with a learning disability from Black, Asian and minority ethnic backgrounds.
- There is evidence which demonstrates annual health checks can positively influence survival (Kennedy et al., 2022).

Discussion

- Do you think that everyone who is invited for an annual health check takes up the invitation?
- Who doesn't take up an annual health check, and why?
- If people with a learning disability from a Black, Asian and minoritised ethnic backgrounds are less likely to attend, why might this be?



What are the barriers to accessing and taking up an annual health check?

- Racism as driver of inequality
- Language barriers
- Poor communication from GPs
- Fear and anxiety
- Issues booking appointments
- A lack of accessible and easy read format information
- Lack of reasonable adjustments
- Not everyone with a learning disability is on the GPs register
- Failure to recognise individual needs
- Cultural and religious insensitivity
- Poor transitional care

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Discussion

- How can awareness and attendance of annual health checks can be improved?

What works in improving take up of annual health checks?

Case study 1: Nottingham 2022

What did they do?

In Nottingham City a Primary Care Liaison Nurse ran a programme to support Black, Asian and minority ethnic people with a learning disability to have an annual health check. The nurse did this by seeing people in their home, in the community, or supporting them to attend the GP surgery.

What was the impact?

The programme was successful and the number of people with a learning disability from all ethnic backgrounds having an annual health check increased from around 53% to over 70%.

Case study 2: Grace Eyre “Improving Our Health” 2021-2022

What did they do?

The campaign focused on two things: supporting people to get onto their GP’s Learning Disability Register and having good quality annual health checks.

What was the impact?

- 30 staff trained across services in ‘good quality’ annual health checks
- Increased the amount of people who have had annual health checks
- Sent healthcare packs out to everyone they support in several community languages.
- Supported/ created useful resources.



Enclosed in this pack:

- Preparing for my Annual Health Check
- Learning Disability Register information
- Taking Control of food portions and labels
- Flu Vaccine information

Case study 3: Gateshead

In late 2020, uptake of annual health checks in Gateshead was low, particularly among young people aged 14-25 years, while awareness was inconsistent.

The Integrated Care Board (ICB), led by the Designated Clinical Officer (DCO), began a piece of work that has increased uptake year-on-year since late 2020.

What did they do?

- Regular, supportive calls to primary care settings.
- Training and information for GP practices, families and education settings.
- Developed '[the postcard](#)': given to schools to use in Education health and care plan annual reviews with young people from Year 9 onwards.



Dear Dr

GATESHEAD NHS

I have a Learning Disability, please ensure that:

- I am on this Practice's Learning Disability register
- I have a Learning Disability Annual Health Check (from age 14 onwards)
- We discuss my Health Action Plan (where appropriate)
- I am invited for a flu immunisation every year (either by injection or nasal spray)

My name is

My date of birth is

The best way to contact me is:

- Easy read letters
- Phone number
- Text to:

Adjustments that would help me with an appointment would be:
for example, 'I would like an appointment at a quiet time'



Discussion

- What could you do in your organisation to increase awareness and uptake of annual health checks?
- How can you work with your local services and/or other voluntary sector organisations to raise awareness and uptake of annual health checks?
- Are you aware of any existing work going on?

Race Equality Foundation video, 2024






Race Equality Foundation - Easy Read Leaflet

Get your Annual Health Check

? What is an Annual Health Check?

14+  Annual Health Checks are for people with a learning disability over 14 years old.

 An Annual Health Check is usually done by your doctor or a nurse once a year. You can ask them about anything that is hurting or worrying you.

  The check is done to help you stay healthy. You don't need to be ill to get a health check.

?

Why is it good to have an Annual Health Check?



You can get to know your doctor. They can give you ideas about how to stay healthy.

You can talk to a doctor or nurse about anything you might be worried about.



If there is anything wrong then the doctor can sort it out before it gets worse.

Get your Annual Health Check

?

What happens at an Annual Health Check?

A doctor or nurse may:



Check things about your body, like your heart and blood pressure.



Take some measurements, like your height and weight.

Resources from Leeds

free health check  for over 14's



get checked out

Check up

- Do you have a Learning disability?
- Are you over 14?

Ask for a **free** learning disability health check at your local GP practice.

www.learningdisabilityservice-leeds.nhs.uk/get-checked-out


Leeds and York Partnership
NHS Foundation Trust

 **Get Checked Out Checklist**

Please fill this book in and bring it back to the GP surgery

 →  Date:

Name:

I prefer:

Date of birth:

Who is important to you?

Address:


Telephone:

Email:

Resources

My Health Check

PRE-ASSESSMENT QUESTIONNAIRE



We would like to invite you to your Annual Health Check



Step 1. Please fill in this questionnaire and return it to your GP Practice **BEFORE** your health check

If you need help to fill in your questionnaire you may like to ask a family member, a friend, your carer or support worker

You may like to think about some of your answers before writing them down – you may like to complete the questionnaire over several days


Step 2. Your GP Practice will look at your completed questionnaire, then tell you the **DATE** of your health check

MY ANNUAL HEALTH CHECK


 ?	Date		
	Time		

[NHS Gloucestershire ICB](#)


Annual Health Checks




What is an Annual Health Check?




Annual Health Checks are for people with a learning disability.




An Annual Health Check is done by your doctor or a nurse once a year.



It is there to help you stay healthy.



You can get an Annual Health Check if you are aged 14 or older.



[Mencap Easy Read Leaflet](#)

Summary

Annual health checks
as a preventative
measure

The role of the
learning disability
register

Health inequalities
experienced by Black,
Asian and minoritised
ethnic people with a
learning disability

Barriers to accessing
annual health checks

The role of the
voluntary sector in
raising awareness to
increase uptake

Collaboration and
action planning

Contact

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www.raceequalityfoundation.org.uk