

Learning Disability Engagement Survey findings

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Learning Disability Engagement Survey findings

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Learning Disability Engagement Survey findings

1 Introduction

This report seeks to summarise the response to a survey for those who care for or work with an adult with a learning disability in Telford & Wrekin. Alongside the carers' survey an easy read survey for service users was conducted, this was managed by Taking Part and the results are not part of this report.

The survey was launched on 30 September 2020 and open for responses until 11 November 2020, respondents were encouraged to complete the survey online, but paper copies were available on request and posted to service users to encourage response.

In total 52 responses were received, 39 of these on paper and 13 online.

2 Results

Just over three quarters (77%) of respondents to the questionnaire were family/friends of Adults with Learning disabilities, with almost a quarter (23%) being those who work with Adults with Learning Disabilities.

Table 1: Q1. Are you answering this questionnaire as?

	Count	%
A parent / carer / family member / friend	40	77%
Someone who supports / works with Adults with Learning Disabilities (in a paid for or voluntary capacity)	12	23%
Total respondents	52	100%

Those working with Adults with Learning Disabilities came from a number of different organisations, including private / self-employed PAs.

Table 2: Q2. Please tell us the organisation you work for

	Count
My Options - Telford & Wrekin Council	3
Private / self-employed / PA	3
Deaf support & care services ltd	1
Livability	1
Accord Housing Association	1
Bethphage	1
HAP Care Homes Ltd	1
Total respondents	11

2.1 Being Healthy and independent

Respondents were asked what they felt was important to the people they cared for/worked with when at home, out and about and preparing to go out. These free text responses have been grouped into themes for analysis, a complete list of responses are included in Appendix II.

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Respondents felt that the most important thing when at home and out and about was safety and security (51% and 44% respectively), while the most important things for preparing to go out and about were appropriate clothing (38%) and good planning (38%).

Table 3: Q3. What do you view as important to the person/people you care for/work with when they are: Top five themes for each

At home	Out and about	Preparing to go out
Safety and security (51%)	Safety and security (44%)	Appropriate clothing (38%)
Well cared for/supported (24%)	Access activities / entertainment / facilities (24%)	Good planning (38%)
Healthy diet / food (24%)	Socialisation/affection with family/friends (14%)	Emotional/mental health support/reassurance (17%)
Independence / self-confidence (22%)	Having choices (14%)	Well cared for/supported (15%)
Socialisation/ affection with family/friends (20%)	Well cared for/supported (12%)	Keeping routine (13%)

Percentages are of total respondents. A single respondent may have provided several responses.

There were differences in priorities between parent/carers and those working with Adults with Learning Disabilities. While at home, the most important thing for parent/carers was safety and security (55%), but for those working with Adults with Learning Disabilities the top priority was having choices (45%).

Table 4: Q3. What do you view as important to the person/people you care for/work with when they are at home, top three themes split by type of respondent

Parent / carer / family member / friend	Supports / works with Adults with Learning Disabilities (in a paid for or voluntary capacity)
Safety and security (55%)	Having choices (45%)
Well cared for/supported (25%)	Safety and security (36%)
Socialisation/affection with family/friends (25%)	Independence / self-confidence (36%)

Percentages are of total respondents. A single respondent may have provided several responses.

Similarly when considering being out and about, the most important thing for parent/carers was safety and security (50%) and for those working with Adults with Learning Disabilities the top theme was having choice (36%).

Table 5: Q3. What do you view as important to the person/people you care for/work with when they are out and about, top three themes split by type of respondent

Parent / carer / family member / friend	Supports / works with Adults with Learning Disabilities (in a paid for or voluntary capacity)
Safety and security (50%)	Having choices (36%)
Access activities / entertainment / facilities (29%)	Safety and security (27%)
Socialisation/affection with family/friends (13%)	
Well cared / supported (13%)	

Percentages are of total respondents. A single respondent may have provided several responses.

There are only two top themes for those working with ALD as all other themes are tied with just a single respondent

The top two themes when thinking about preparing to go out were the same for both types of respondents, with parent/carers finding appropriate clothing (41%) the most important followed by good planning (38%) and those working with Adults with Learning Disabilities finding good planning (36%) those most important followed by appropriate clothing (27%).

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Table 6: Q3. What do you view as important to the person/people you care for/work with when they are preparing to go out, top three themes split by type of respondent

Parent / carer / family member / friend	Supports / works with Adults with Learning Disabilities (in a paid for or voluntary capacity)
Appropriate clothing (41%)	Good planning (36%)
Good planning (38%)	Appropriate clothing (27%)
Emotional mental health support/reassurance (19%)	Well cared for /supported (18%)
	Having choices (18%)

Percentages are of total respondents. A single respondent may have provided several responses.

Respondents were asked what they viewed as important to keep the person they cared for/worked with healthy, the free text responses have been grouped into themes. Two thirds of respondents (66%) felt that good food / healthy diet was important to stay healthy, along with regular exercise (40%) and regular / appropriate health checks (22%).

Table 7: Q4 What do you view as important to keep the person/people you care for/work with healthy? Top responses

	Count	%
Good food / healthy diet	33	66%
regular exercise	20	40%
regular/ appropriate health checks	11	22%
socialisation	9	18%
personal hygiene	8	16%
medication	7	14%
Care for all needs	6	12%
activities/entertainment	5	10%
support mental health	5	10%
skills building / education	4	8%
outside activities / fresh air	4	8%
Total respondents	50	100%

Percentages are of total respondents. A single respondent may have provided several responses.

The top three themes were the same for both respondent types with socialisation and personal hygiene making the top five for parent/carers and skills building/education and outside activities/fresh air for those working with Adults with Learning Disabilities.

Table 8: Q4. What do you view as important to keep the person/people you care for/work with healthy, top five theme split by type of respondent?

Parent / carer / family member / friend	Supports / works with Adults with Learning Disabilities (in a paid for or voluntary capacity)
Good food / healthy diet (66%)	Good food / healthy diet (67%)
Regular exercise (37%)	Regular exercise (50%)
Regular / appropriate health check (24%)	Regular / appropriate health check (17%)
Socialisation (21%)	Skills building / education (17%)
Personal hygiene (18%)	Outside activities / fresh air (17%)

Percentages are of total respondents. A single respondent may have provided several responses.

Two thirds (67%) of respondents had attended a health check with the person they cared for/worked with, and the majority of these (79%) felt that the professional was able to support the person in a way that took into consideration their needs.

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Table 9: Q5. Have you attended a health check with the person/people you care for/work with?

	count	%
Yes	35	67%
No	17	33%
Total respondents	52	100%

Table 10: Q6. If yes, was the professional able to support the person/people in a way that took into consideration their needs?

	count	%
Yes	27	79%
No	7	21%
Total respondents	34	100%

A total of seven respondents felt that the professional did not give consideration to the needs of those they care for and they gave the following comments on their experiences. A full list of comments including those who felt their needs were supported is available in Appendix II.

“Doctors are not happy to help much and actually they realise they cannot do anything because we are living in this difficult times with Covid. Why all surgeries are cancelled? It’s very unfair a specially on elderly and vulnerable people”

“I have had several upsetting and awful experiences at PRH (hospital) they have NEVER made reasonable adjustments for my sons additional needs, and most interaction with the hospital fall well below par! Because my son is non-verbal the medical staff never seem to grasp that he needs an advocate at ALL times. On one occasion when my son was admitted to hospital i had to go home to collect some things and when I returned he was walking the hospital corridor with no shoes or socks, a hospital gown gaping open, being “escorted” by a SECURITY GUARD for example.”

“He is awaiting Trauma therapy. He stops eating through trauma. He had contact with a phycologist and put on the waiting list but as he needs face to face and they aren’t doing face to face at the moment we are just left in the lurch and to struggle on.”

“Some doctors seem to rush the appointment instead of 20 mins I might get 5 mins if I am lucky”

“Was not supportive of patient would not listen to parents advice on how to handle patient. Didn’t speak to patient in terms they’d understand”

“My son required teeth extraction. His fears and mental condition were told to the hospital in advance. No provision for his needs was made. I had to hold him down screaming before he could be operated on. No help was given by medical staff”

“This was a very long time ago”

Around four in five (79%) respondents had attended the GP or hospital with the person they cared for/worked with, and of these two thirds (67%) felt that consideration was given for the person’s needs.

Table 11: Q7. Have you attended the GP or hospital with the person/people you care for/work with?

	count	%
Yes	41	79%
No	11	21%
Total respondents	52	100%

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Table 12: Q8. If yes, was the professional able to support the person/people in a way that took into consideration their needs?

	count	%
Yes	26	67%
No	13	33%
Total respondents	39	100%

A total of 13 respondents felt that consideration was not given for the needs of the person they cared for, and offered the following comments on their experience.

“When needing dental surgery no help whatsoever was given by the anaesthetist to control my son. Before the day, all were involved of his mental condition, and we were told help to quieten and stabilise him would be available. It was not. The anaesthetist went as far as to say he would refuse to treat him if I couldn't hold him down physically, and administer gas myself.”

“Was years ago but was not easy”

“It's getting better to be fair, but my son is now 28 years old, so as you can imagine I have had lots of interaction with medical professionals, so I couldn't describe them all.”

“He had a brain scan at New Cross Hospital. This was necessary but of no help for day to day support”

“They seem to talk to me (mother) instead of the young person”

“{Name} has the mental capacity of a 5mth old baby & needs a family member with him 24/7 to be his voice & explain his needs & how to care for him. The current situation with Covid worries us as there is no way he could be cared for safely in hospital without a member of his family with him to be his voice.”

“No is not quite the right answer , because there are some people who are either trained how to deal with Learning disabilities , e.g. specialised dentists , but general health practitioners in many disciplines need more training as some struggle to understand how to get the right answers from people who have difficulty describing their problems”

“GP not fully understanding severity of disability and comprehension of what person comprehends”

“Busy waiting rooms and queueing system doesn't work for people with autism”

“I found the doctor examining {Name} to be rude. {Name} is very sensitive to touch - the doctor touched his belly, {Name} reacted with pain, the doctor looked at me and said 'that didn't hurt' I think often people can be dismissive”

“staff nurse very good, did a scan, found her bladder was full Dr decided she was constipated, sister fitted a catheter, we were sent home with laxative she slept on the couch for two weeks until she slid onto the floor and I had to call an ambulance, then she was taken into Morris Care and she is still there”

2.2 Having friends and relationships

The majority of respondents (90%) indicated that the person the car for / work with sees their family and friends, the most common place for seeing friends and family was at home (94%).

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Table 13: Q9. Does the person you care for/work with see their family friends?

	count	%
Yes	47	90%
No	5	10%
Total respondents	52	100%

Table 14: Q10. If yes, where do they see them? (please select all that apply)

	Count	%
Home	42	89%
In services	15	32%
In their community	14	30%
Other	13	28%
Total respondents	47	100%

Percentages are of total respondents. A single respondent may have selected several options.

'Other' places mentioned included visiting family homes, volunteer work, outside and at college. A full list of 'other' comments is available in Appendix II.

Of the small number responses that indicated the person they care for / work with does not see their family and friends all five respondents said that the person would like to. Four of these respondents replied to the question asking; is there something that could support the person to see their family and friends?

"With autism it is really hard for them to make/keep friendships. The only way is with centres able to have group meetings where they can mix with likeminded people. And in a routine of each week. Even if it was just talks on any subjects etc. so if they don't want to talk then they still have something to keep them interested. At the moment there is absolutely nothing for autistic adults at the moment. His mental health is suffering. There is nothing to keep him stimulated."

"Because of covid-19 our family live in Yorkshire and it's impossible to go and see them at this time"

"Video calls in place with parents and brother and children. {Name} copes well with seeing them via phone calls"

"Covid's fault we have to stay distance No places to go anymore"

Respondents were also asked what they thought the person they cared for /worked with would like to do with their friends and family in the future, the top ten themes are shown in the table below with a full list of comments available in Appendix II.

The most common suggestion was to eat out / meet in cafes/pubs (16%) followed by days out (14%).

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Table 15: Q13. What do you think the person/people you care for/work with would like to do with their friends and family in the future? Top ten themes split by type of respondent

	All respondents	A parent / carer / family member / friend	Someone who supports / works with Adults with Learning Disabilities (in a paid for or voluntary capacity)
Eat out / meet in cafes/pubs	16%	13%	27%
Days out	14%	13%	18%
Visit family/friends in homes	12%	15%	0%
Holidays	12%	8%	27%
Happy with how things are	12%	10%	18%
Day services	8%	10%	0%
Celebrate special occasions	8%	10%	0%
See family daily / more often	8%	8%	9%
Difficult to make friends / doesn't have friends	6%	8%	0%
Group meetings	6%	8%	0%
Continue support/contact from them	6%	5%	9%
Total respondents	50	39	11

Percentages are of total respondents. A single respondent may have given several responses..

2.3 Having Choice

Just over half (54%) of respondents indicated that the person the care for/work with makes their own decisions. The most common decisions were around leisure activities (63%), food (37%), clothing (26%) and where to go (26%). A full list of comments about choices are available in Appendix II.

Table 16: Q14. Does the person/people your car for/work with make their own choices? (for example, going to the shops, going to the park, going to the doctors etc.)

	count	%
Yes	28	54%
No	24	46%
Total respondents	52	100%

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Table 17: Q15. If yes, what do they make choices about?

	Count	%
leisure activities	17	63%
food	10	37%
clothing	7	26%
where to go	7	26%
needs prompting / options	5	19%
every aspect	4	15%
going to bed / getting up	3	11%
bathing / showering	2	7%
Encouraged to be part of family plans	1	4%
communication is barrier to decision making	1	4%
appointments	1	4%
making choices can cause anxiety	1	4%
holidays	1	4%
Total respondents	27	100%

Percentages are of total respondents. A single respondent may have given several responses.

For those respondents who indicated the person they care for / work with does not make their own choices, the majority (82%) said the person did not want to make more choices.

Table 18: Q16. If no, do they want to make more choices?

	count	%
Yes	4	18%
No	18	82%
Total respondents	22	100%

Of the four respondents who felt the person they care for/work with would like to make more choices, three of these offered suggestions on things that could support the person to make their own choices.

“Be supported to be confident, believe in self -has had a lot of years being told they can't and won't be able to. Build on life plan-experience lots of positive role models - peer support groups empowered by communities and social care profession”

“One on one support”

“Having the support by having more one to one sessions and being prompted and encouraged”

All respondents were asked if they felt the person they cared for / worked with could make more choices and what these choices would be about. The most common themes in comments was around people needing help to make choices (21%), activities that they could choose (18%) and people being unable to make choices (15%) or already making all the choices they can (10%).

The table below shows all themes with more than one respondent. A full list of comments is available in Appendix II.

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Table 19: Q18. If you feel they could make more choices, what would these choices be about?

	Count	%
needs help to make choice	8	21%
Activities	7	18%
Lacks capacity / doesn't make choices	6	15%
No more choices / makes all choices	4	10%
would make inappropriate / not safe / unrealistic choices	3	8%
new things / more adventurous	2	5%
who work with them	2	5%
food	2	5%
All respondents	39	100%

Percentages are of total respondents. A single respondent may have given several responses.

2.4 Getting out and about

More than three quarters (79%) of respondents indicated that the person they cared for / worked with gets out and about, with the most common outings being walks / bike ride (54%), shopping (49%), and cafes/pubs/eat out (27%). A full list of responses is available in Appendix II.

Table 20: Q19. Does the person/people you care for/work with get out and about?

	count	%
Yes	41	79%
No	11	21%
Total respondents	52	100%

Table 21: Q20. If yes, what do they do? Top themes from responses.

	Count	%
walks / bike ride	22	54%
shopping	20	49%
cafes/pubs /eat out	11	27%
cinema	9	22%
Organised group	6	15%
museums / places of interest	6	15%
visit family & friends	5	12%
swimming / gym	5	12%
bowling	4	10%
Total respondents	41	100%

Percentages are of total respondents. A single respondent may have given several responses.

For those who did get out and about, respondents were asked if they went by themselves. Almost all respondents (95%) indicated that the person they cared for / worked with did not go out by themselves.

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Table 22: Q21. Do they go by themselves?

	count	%
Yes	2	5%
No	39	95%
Total respondents	41	100%

Respondents indicated that the most likely person to support were parent/grandparents (61%), followed by sibling/other family (29%) and care provider (24%).

Table 23: Q22. If no, who supports them? Top five responses

	Count	%
Parents / grandparents	23	61%
sibling /other family	11	29%
care provider	9	24%
staff	6	16%
PA	6	16%
Total respondents	38	100%

Percentages are of total respondents. A single respondent may have given several responses.

For those who did not get out and about respondents were asked if they wanted to and what could support them to do so and what they would like to do. The majority of respondents indicated that the person they cared for / worked with would like to get out and about.

Table 24: Q23. If they do not get out and about, do they want to??

	count	%
Yes	8	89%
No	1	11%
Total respondents	9	100%

The following suggestions were given for supporting people to get out and about;

“Someone to watch him at every stage for his safety outside the home”

“A person to go with her.”

“Stop Covid restrictions”

“Going to a club with other like-minded people routinely each week. A social group where there would be usually the same set of people to meet and talk too. Perhaps learning some skills too. Something to look forward to doing.”

“Full support to get out and have fun with friends”

“Training/support- in building confidence -plan safe ways to achieve things- practice with support- take risks -in safe ways - direct payments -flexible to life situations. Set goals and times to achieve not just get support for ever and not move on”

“A personal assistant”

“Supervisor”

The following suggestions were given as things the people they cared for/ worked with would like to do;

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“Meet people and walk in the countryside”

“All the Day services activities that she is now excluded from. Swimming, Bowling Walking, arts and crafts, exercise groups. Preparing food, sailing with Sailabilty, computers, reading and writing classes.”

“Go to pub, cinema, shops”

“Social groups again i cannot stress how important this is. Workshops too where he would learn new skills.”

“Sports, music, walking”

“{Name} suffers with severe anxieties, learning disability and autism so going out can be a problem PA could take him out for an hour that could help him”

“Have fun”

2.5 Having a job

Respondents were asked about the person they cared for / worked with learning new things. Almost all respondents (94%) indicated that the person needed help to learn new things and three quarters (75%) of these agreed that the person gets help to learn new things.

Table 25: Q25. Does the person/people you care for/work with need help to learn new things?

	count	%
Yes	47	94%
No	3	6%
Total respondents	50	100%

Table 26: Q26. If yes, does the person/people you care for/work with get help to learn new things?

	count	%
Yes	33	75%
No	11	25%
Total respondents	44	100%

Respondents were then asked about the person they cared for/worked with having a job. Almost all respondents (96%) indicated that the person the cared for / worked with did not have a job, with just two respondents reporting that their person had a job.

Table 27: Q27. Does the person/people you care for / work with have a job?

	count	%
Yes	2	4%
No	49	96%
Total respondents	51	100%

Of those two with jobs, one was paid and one voluntary and the following details were given.

Q29. What are they doing?

“Voluntary work in {Shop Name} twice a week in an afternoon. Not possible at the moment due to Covid”

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“Catering assistant with support”

For those people who did not have a job, respondents were asked if they would like to have a job and if so what could support them to do so. Just under a quarter of respondents (23%) indicated that the person they care for / work with would like to have a job, with suggestions for supporting them to do so including education, additional support and more opportunities.

Table 28: Q30. If no, do they want to have a job?

	count	%
Yes	10	23%
No	34	77%
Total respondents	44	100%

Q31. If, what could support the person/people to have a job

“He would love to work, however he cannot read or write, and is not fully toilet trained, so would need a support worker to help him with everything.”

“*Education, Math & English * Deaf communication support * Education New skills”

“I don’t know - they get very irritated by other people”

“It needed to be on the agenda years ago- more self-employed opportunities using individual’s skills and talents”

“He would need help with job application and any other things related to a job”

“A routine of simple tasks with guidance that allows for slow changes in any routine and constant close supervision”

“Supported internship opportunities Menu of supported voluntary work”

“More opportunities in volunteering would be good - as it feels like a job and creates a sense of worth, I'm hoping {Name} could work more with animals in the future as this is something he would love to do”

“Someone to get her up in the morning, get her breakfast, get her ready and deliver her to wherever. I have no idea what she could do as a job with very bad speech, hearing and agility but she says she wants a job”

“I feel he would enjoy a job but he’d struggle to do the task to an expected standard”

For those people who do not want a job, respondents were asked if they felt they could have a job in the future. The majority of respondents (81%) felt that the person that they cared for / worked with would be unable to have a job in the future.

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Table 29: Q32. Do you feel they could have a job in the future?

	count	%
Yes	4	15%
No	21	81%
Don't know	1	4%
Total respondents	26	100%

The comments of those respondents who felt the person they cared for / worked with could have a job in the future are shown below. A full list of comments is available in Appendix II.

“At present he has been going through a lot of trauma and high anxiety. He is not fit to work at present but he hopes to work in the future.”

“At the moment {Name} isn't ready for a job he's still learning he's goes to a support group on a thurs and friday learning life skills maybe in the future he can do voluntary work it depend if {Name} can cope”

“The person may be able to carry out light duties via an outsource scheme, such as filling envelopes at home perhaps. I do not believe the person would be able to maintain a regular job without support or for longer than a few hours”

2.6 Having the right support

Respondents were asked if anyone else supported the person they cared for/worked with. Just under half (45%) of respondents indicated that there was no one else supporting the person they cared for / worked with.

Table 30: Q33. Does anyone else support the person/people?

	count	%
Yes	23	45%
No	28	55%
Total respondents	51	100%

Those who answered yes were asked who provides support and what they support with. The most frequent support came from family (65%) support services (13%) and carers (13%). The most common tasks supported were all aspects of daily life (30%) and cooking/food (22%).

Table 31: Q34. Who provides support?

	Count	%
Family	15	65%
Support service	3	13%
Carer	3	13%
PA	2	9%
Psychiatrist	1	4%
voluntary group	1	4%
friends	1	4%
Total respondents	23	100%

Percentages are of total respondents. A single respondent may have given several responses.

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Table 32: Q34. What do they support with?

	Count	%
All aspects of daily life	7	30%
cooking/food	5	22%
personal care	4	17%
getting out and about	4	17%
education/life skills	3	13%
residential care	2	9%
Cleaning/laundry	2	9%
mental health	2	9%
respite care	2	9%
making appointments	1	4%
advocate	1	4%
support	1	4%
Total respondents	23	100%

Percentages are of total respondents. A single respondent may have given several responses.

All respondents were asked what type of help they felt the person/people they cared for/worked with would need in the future. The top responses were;

- Needs support with everything / 24:7 care (20%)
- Education/life skills (13%)
- Getting out and about / accessing community (13%)

Table 33: Q35. What type of help do you feel the person/people needs in the future? Top 10 responses

	Count	%
Needs support with everything / 24/7 care	9	20%
education/ life skills	6	13%
getting out and about / accessing community	6	13%
Support to live alone / be independent	5	11%
Activities	4	9%
Socialising	3	7%
care to replace parents	3	7%
cooking/food	3	7%
training/employment opportunities	3	7%
PA / 1-2-1 support	3	7%
Total respondents	45	100%

Percentages are of total respondents. A single respondent may have given several responses

2.7 Respite

Just over a third of respondents (37%) indicated that they or the person they cared for /worked with had access respite care.

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Table 34: Q36. Have you, or the person/people you care for/work with accessed respite?

	count	%
Yes	19	37%
No	33	63%
Total respondents	52	100%

Those respondents who had access respite, were asked what type of respite they would like to see in the future. The most common comments were for reliable/ stable care we can be confident in (19%), not being able to access respite due to Covid (1%) and activities focused (19%)

Table 35: Q37, if yes, what type of respite would you like to see in the future? Top responses.

	Count	%
Reliable/ stable care we can be confident in	3	19%
Cant access due to Covid	3	19%
Activities focussed	3	19%
Not needed now due to fulltime care	2	13%
Family home only	2	13%
Holiday / weekend away	2	13%
residential	2	13%
Total respondents	16	100%

Percentages are of total respondents. A single respondent may have given several responses

2.8 Covid-19

Respondents were asked how positive or negative their experience of the Covid lockdown had been, 3 out of 5 respondents reported a negative experience, with around a quarter (24%) reporting a very negative experience.

Table 36: Q38, Overall, how would you rate your experience of the Covid Lockdown?

	Count	%
Very positive	3	6%
Somewhat positive	6	12%
Neither positive or negative	11	22%
Somewhat negative	18	36%
Very negative	12	24%
<i>Total positive</i>	<i>9</i>	<i>18%</i>
<i>Total negative</i>	<i>30</i>	<i>60%</i>
Total respondents	50	100%

The most common reasons given for a negative experience of the Covid Lockdown were; mental health impact (33%), lack of support (20%) and lack of activities/entertainment (20%). A full list of comments is available in Appendix II.

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Table 37: Q39, Please tell us why? Negative experience

Negative experience	Count	%
mental health impact	10	33%
Lack of support	6	20%
lack of activities/entertainment	6	20%
reduced social circle / miss friends/family	5	17%
alone/isolated	5	17%
Total respondents	30	100%

Percentages are of total respondents. A single respondent may have given several responses

There were nine comments describing a positive experience of Covid Lockdown;

“My son is in a small Care Home in {Place Name}. He lives with six other residents of a similar Peer Group, There are three homes in the Complex making a total of 26 Residents, throughout this time they have all been kept safe and well, they go out for rides in a car or a walk around the village, but they do not go into shops and remain in their Support Bubble.”

“It wasn’t very different to our lives in general. The only difference was they couldn’t go to the day centre or for a wander around the town centre.”

“{Name}’s college closed so he was at home full time. He thoroughly enjoyed - luckily the weather was kind to us!”

“Good communication from T&W in relation to this subject”

“Have seen a lot of neighbourliness - also see a focus on services - building based ones closed - people do find other ways- shows how limiting a day service can be and why parents like them for the security of a break - cared for in a safe place - shows that we are focussed on people having a service not a life - good to see this is being recognised and ideas starting to do things differently -no going back to how it was before is sometimes a good thing!”

“Been able to spend more time together as a family”

“Had to stay in for 12 weeks due to medical problems, put a strain on family”

“We followed a routine that has kept us positive - dog walking, exercise on YouTube - Zumba, yoga, walking etc. gardening”

“We have coped. Despite being shouted at for holding hands or not wearing masks Luckily my son does not understand the pandemic”

Respondents were asked how worried they were about Covid, the majority (84%) were worried about Covid, with a third (34%) very worried.

Table 38: Q40. How worried are you currently about Covid?

	Count	%
Very worried	17	34%
Fairly worried	25	50%
Not worried at all	3	6%
Don't know	5	10%
Total respondents	50	100%

Those respondents who indicated they worried were asked to give details about what they were worried about. More than a quarter of respondents were worried about being ill/person care for

Learning Disability Engagement Survey findings

being ill (27%), respondents were also concerned about the additional risks for people with Learning Disabilities / underlying conditions (15%) and people not taking care / being complacent about safety measures (15%).

Table 39: Q40. Please tell us what you are worried about? Top responses

	Count	%
being ill / person care for being ill	11	27%
additional risk for LD / underlying conditions	6	15%
people not taking care / being complacent	6	15%
back up care for person	5	12%
Lost all life - nothing to do	4	10%
accessing appropriate medical care	4	10%
very isolated	3	7%
Mental health	3	7%
lack of support	2	5%
How we will start again when over / long term effects	2	5%
wearing PPE / keep distance	2	5%
No end in sight	2	5%
Total respondents	41	100%

Percentages are of total respondents. A single respondent may have given several responses

Because of the Covid restrictions Telford & Wrekin Council have had to deliver services and activities very differently, for example using on-line meetings or community based activities and unfortunately restricting access to buildings. Respondents were asked how this had been for the person they cared for / worked with.

The majority (61%) reported a negative experience, with just less than 1 out of 5 reporting a positive experience.

Table 40: Q42, Overall, how has this been for the person you care for / work with?

	Count	%
Very positive	1	2%
Somewhat positive	8	16%
Neither positive or negative	11	22%
Somewhat negative	16	31%
Very negative	15	29%
<i>Total positive</i>	<i>9</i>	<i>18%</i>
<i>Total negative</i>	<i>31</i>	<i>61%</i>
Total respondents	51	100%

Respondents were asked to comment on why they felt the experience had been positive or negative. Those respondents who indicated the person they cared for/worked with had found the changes negative commented that they missed their friends and family (25%), online alternatives were not suitable for them (25%) and they had lost activities, lost mental/physical stimulation (25%).

Learning Disability Engagement Survey findings

Table 41: Q43. Please tell us why? Negative experience, top responses

	Count	%
misses friends / family	7	25%
online alternatives not suitable	7	25%
Lost activities/entertainment. Loss of mental/physical stimulation	7	25%
struggled with change to routine	3	11%
Isolated	3	11%
Nothing offered	3	11%
Confused /doesn't understand	3	11%
Unable to live normal life	2	7%
limited offer	2	7%
Lack of support	2	7%
Total respondents	28	100%

Percentages are of total respondents. A single respondent may have given several responses

There were seven comments received from respondents who indicated the changes had been positive for the person they cared for / worked with:

"It does not appear to have caused a problem, but my son is Residential in Shropshire so has, as far as I am aware at present any contact with anybody from Telford and Wrekin although he is a past Telford and Wrekin Resident and funded by you."

"My daughter has been able to go out with support, so she is still continuing with activities"

"Try to keep clients safe visiting has been allowed in the garden"

"Online meetings has continued to keep her busy and give her a reason to still get out of bed and have a routine"

"Telephone consultations were easy to support service user"

"{Name} has been able to get out with his carers but it is a more streamlined week as many things he enjoyed still can't be accessed easily"

"It has worked, our little bubble. Thank you T&W. Our carers have been marvellous"

All respondents were asked how they felt things could be done differently. The top responses were better/more frequent communication (23%), reopening day centres/groups with Covid safety procedures (14%) and access to activities/resources (11%). A full list of comments is available in Appendix II.

Learning Disability Engagement Survey findings

Table 42: Q44. How do you think things can be done differently?

	Count	%
Need better /more frequent communication	8	23%
Reopen day centres /groups with Covid safety procedures	5	14%
Access to activities /resources	4	11%
Practical support	3	9%
Back to normal as quickly as possible	3	9%
Not a lot can be done	3	9%
Do not make restrictions / no more lockdown	2	6%
Has been managed well	2	6%
Consideration for carers in priority shopping etc.	2	6%
Total respondents	35	100%

Percentages are of total respondents. A single respondent may have given several responses

Respondents were then asked about if the Covid restrictions remain in place and the person they care for / work with is unable to go back to the services they attended before, would they be happy to carry on with the activities they are doing now or would they like to do something else. More than a third of respondents were happy to carry on (37%) with 16% wanting something else/something more with no further details.

Around 1 in 10 respondents (9%) indicated that the person they care for / work with did not have any activities / was not doing anything. A full list of responses is available in Appendix II.

Table 43: Q45. Would they be happy to continue on with the activities they are doing now, or would they like to do something else?

	Count	%
Happy to carry on	16	37%
something else / something more	7	16%
misses groups / return to services did attend	6	14%
More socialisation	4	9%
Doesn't have any activities / not doing anything	4	9%
Total respondents	43	100%

Percentages are of total respondents. A single respondent may have given several responses

Appendix I. Survey



Do you care for, or work with, an adult with a learning disability in Telford & Wrekin?

If so, we want to hear from you.



Introduction

Whilst Covid has brought about new challenges for everyone, we still want to provide quality support in a personalised way so that people with a learning disability and their families and carers, can receive assistance they need to in a way that enhances their independence and enables them to lead meaningful, valued lives within their own communities.

We want adults with learning disabilities to:

- Live happy, healthy, safe and independent lives
- Be respected and have choice and control over decisions that affect them
- Live their lives as active members of their community
- Access employment
- Have access to the right services

It is important for us to understand what Adults with Learning Disabilities need to live independently in their community.

As individuals who care for, or work with, Adults with Learning Disabilities we want to hear your views, as well as the adults themselves, about what is important to them.

This will enable us to develop a local Adults with Learning Disability Strategy which will help us deliver our responsibilities.

Over the few months you might have already shared your views with us through the original engagement survey (March 2020), individual reviews, feedback on day opportunities recovery services or through the Council's resident's survey. Whilst this will not include all of you, we will gather this feedback and include it within the strategy development.



Learning Disability Engagement Survey findings

This survey will focus specifically on adults with learning disabilities and what is important to them, but it will also include some questions which relate to your experiences of Covid.

The following legislation and guidelines are important:

- The Care Act 2014
- Children and Families Act 2014
- Human Rights Act, 1998
- Mental Capacity Act 2005
- Mental Health Act 2007
- Autism Act 2009
- Transforming Care Programme (TCP)
- Think Local Act Personal

What do we want to know?

Q1 Are you answering this questionnaire as?

- | | | |
|--|--------------------------|--|
| A parent / carer / family member / friend..... | <input type="checkbox"/> | Please go to Q3 |
| Someone who supports / works with Adults with Learning Disabilities (in a paid for, or voluntary capacity) | <input type="checkbox"/> | Please answer Q2 and read Note 1 below |
| An organisation | <input type="checkbox"/> | Please read Note 2 below |

Q2 Please tell us the organisation you work for

Note 1: for those who support/work with Adults with Learning Disabilities

If you support/work with more than one person please summarise your response to reflect all the people you work with where possible

Please go to Q2

Note 2: for those responding on behalf of an organisation

This questionnaire is designed to be answered by individuals. If you would like to be involved on behalf of an organisation please email LDengagement@telford.gov.uk

Learning Disability Engagement Survey findings

Being Healthy and Independent

Q3 What do you view as important to the person/people you care for/work with when they are:

At home

--

Out and about

--

Preparing to go out

--

Q4 What do you view as important to keep the person/people you care for/work with healthy?

--

Q5 Have you attended a health check with the person/people you care for/work with?

Yes..... Please go to Q8

No Please go to Q7

Learning Disability Engagement Survey findings

Q6 If yes, was the professional able to support the person/people in a way that took into consideration their needs

Yes

No

Please describe your experience

Q7 Have you attended the GP or hospital, with the person/people you care for/work with?

Yes Please go to Q8

No Please go to Q9

Q8 If yes, was the professional able to support the person/people in a way that took into consideration their needs

Yes

No

Please describe your experience

Learning Disability Engagement Survey findings

Having friends and relationships

Q9 Does the person/people you care for/work with see their family and friends?

- Yes..... Please go to Q10
No..... Please go to Q11

Q10 If yes, where do they see them? (please select all that apply)

- Home.....
In services.....
In their community.....
Other (please provide details below).....

Please go to Q13

Q11 If no, do they want to see family/friends?

- Yes..... Please go to Q12
No..... Please go to Q13

Q12 If yes, is there something that could support the person/people to see family and friends?

Q13 What do you think the person/people you care for/work with would like to do with their friends and family in the future?

Learning Disability Engagement Survey findings

Having Choice

Q14 Does the person/people you care for/work with make their own choices? (for example, going to the shops, going to the park, going to the doctors etc)

Yes..... Please go to Q15
No..... Please go to Q18

Q15 If yes, what do they make choices about?

Please go to Q18

Q16 If no, do they want to make more choices?

Yes..... Please go to Q17
No..... Please go to Q18

Q17 If yes, is there something that could support the person/people to make their own choices?

Q18 If you feel they could make more choices, what would these choices be about?

Learning Disability Engagement Survey findings

Getting out and about

Q19 Does the person/people you care for/work with get out and about?

Yes..... Please go to Q20
No..... Please go to Q23

Q20 If yes, what do they do?

Q21 Do they go by themselves?

Yes..... Please go to Q25
No..... Please go to Q22

Q22 If no, who supports them?

Please go to Q25

Q23 If no, do they want to get out and about?

Yes..... Please go to Q24
No..... Please go to Q25

Q24 If yes,

What could support the person/people to get out about

What would they like to do?

Learning Disability Engagement Survey findings

Having a job

Q25 Does the person/people you care for/work with need help to learn new things?

Yes..... Please go to Q26

No..... Please go to Q27

Q26 If yes, does the person/people you care for/work with get help to learn new things?

Yes

No.....

Q27 Does the person/people you care for/work with have a job?

Yes..... Please go to Q28

No..... Please go to Q30

Q28 If yes, is it a paid job?

Yes

No.....

Q29 What are they doing?

Please go to Q33

Q30 If no, do they want to have a job?

Yes Please go to Q31

No Please go to Q32

Q31 If yes, what could support the person/people to have a job?

Please go to Q33

Q32 Do you feel they could have a job in the future?

Learning Disability Engagement Survey findings

Having the right support

Q33 Does anyone else support the person/people? This could be a neighbour, friend or family, voluntary organisation, not just paid support, and it may be more than one person

Yes..... Please go to Q34
No..... Please go to Q35

Q34 If yes:
Who provides support?

What do they support with?

Q35 What type of help do you feel the person/people needs in the future?

Respite

Q36 Have you, or the person/people you care for/work with accessed respite?

Yes..... Please go to Q37
No..... Please go to Q38

Q37 If yes, what type of respite would you like to see in the future? (e.g. activities focused, residential etc)

Covid-19

Q38 Overall, how would you rate your experience of the Covid Lockdown

- Very positive
- Somewhat positive
- Neither positive or negative
- Somewhat negative
- Very negative

Q39 Please tell us why?

Q40 How worried are you currently about Covid?

- Very worried Please go to Q41
- Fairly worried Please go to Q41
- Not worried at all Please go to Q42
- Don't know Please go to Q42

Q41 Please tell us what you are worried about

Q42 Because of the Covid restrictions we have had to deliver services and activities very differently, for example using on-line meeting or community based activities and unfortunately restricting access to buildings

Overall, how has this been for the person you care for/work with?

- Very positive
- Somewhat positive
- Neither positive nor negative
- Somewhat negative
- Very negative

Learning Disability Engagement Survey findings

Q43 Please tell why?

Q44 How do you think things can be done differently?

Q45 If the Covid restrictions remain in place and the person you care for/support is not able to go back to the services they attended before, would they be happy to carry on with the activities they are doing now, or would they like to do something?

The engagement period is open from 30 September to 11 November 2020

Contact details: LDengagement@telford.gov.uk 01952 383009

Thank you for taking the time to complete this survey.

Please return to to following address:

Freepost RTKJ-KGJA-ASXU
Organisational Delivery & Development
ALD Engagement
Telford & Wrekin Council
Darby House
Lawn Central
Town Centre
Telford
TF3 4JA

Learning Disability Engagement Survey findings

Appendix II. Free text responses

I.i. Being Healthy and Independent

Q3: What do you view as important to the person/people you care for/work with when they are at home?

A regular rota of care-workers with whom he can develop a happy and trusting relationship. Peace and quiet. A good healthy diet, with choices offered.
A secure environment where he can relax and be himself
Assistance with personal care, shopping, cleaning, cooking, entertainment. My employer needs help with all aspects of living
Being able to relax in an environment that is low anxiety
Being happy, and cared for. Being able to access activities available to the community, and to be able to see friends.
Being healthy and independent
Being warm, feeling safe and secure. my cuddly peter rabbit. lots to entertain - limited use of hands and body. my parents and dog
Choice
Choice, independence, freedom of expressions
Enough care so she is safe, clean, fed and able to live a full "normal" life
Fed, watered, safe, clean, quality of life and welfare
Feeling of security, respected, ability to live independently. Not being lonely, being supported and feeling understood.
Give 24/7 care on food, clothing, medication, cleanliness, transport, laundry, shopping requirements, ills
Happy and safe Home is important
Healthy environment Healthy food
Help with finances Support with cooking Support cleaning the house Helping and supporting health and safety
Independence Self confidence Safe systems
Internet, ipad, comfy private bedroom, somebody always home with him. Good home cooked food, his own loo, regular drinks given. Meds on time and in his routine
It is important that they feel safe and loved and have people and things around them that they are familiar with . It is important they be allowed to set their own routine and that this can be integrated as much as possible with that of the rest of the family
{Name} enjoys having lots of different choices whether it be activities, food, clothes etc {Name} enjoys her independence
{Name} needs lots of support to keep organised. I write a daily tick list for him to help him remember - wash, shave, dressing, putting washing in machine etc He needs a routine to follow as he forgets things
Making sure the home environment is safe & secure. I have everything to meet their needs
Making sure they keep their hygiene, making sure they eat and drink and not to get bored but keeping their routines.
My daughter lives at home with myself and always sees other members of her family when they visit
Providing support and encouragement to become as independent as possible
{Name}'s care should be carried out with in the guidance set out in his care and support plan and the positive behaviour support plan which was written by {Name} consultant clinical psychologist
Safe
Safe environment
Safety with 24/7 care
safety, care, choose
Safety. We are moving to a bungalow to meet my son's needs. Home can be a prison if the person who needs care is left to his own devices. Family members do their best, however, community interaction always necessary.
Someone to help and advise all the time. In care at {Place name}
Taking care of all personal and emotional care needed
That she is safe and feels happy in her environment
That they are safe and that they are able to be self sufficient (cooking cleaning etc). Manage their finances and keep healthy
That they feel safe, that it feels like their home. clean, warm, food. A nice bedroom. To feel comfortable
The most important thing to me when being in the house is knowing that {Name} is safe, well and happy
Their safety, health mental and physical stimulation
They are happy in their environment and every need is catered for
they have choices and can do what they want when they want
Time alone
To be kept safe, warm and well fed and clean and healthy and happy
To be listened to -not over ruled by parents or carers who don't want to let their loved one try things they think they can't do or are too risky -Be independent like others of their age -be supported by others -not parents- have a separate life from family- always go everywhere together-not by choice and sometimes individual doesn't seem to be allowed their own life and although wants to live independently -move out -no one supports it to happen- parents don't see the adult -still a child and not believe they will ever be able to cope away from home!
To be respected and empowered to be part of decision process with regard to their wellbeing
To be safe

Learning Disability Engagement Survey findings

To be safe and the opportunity to anticipate in family life.
To be safe. My daughter has Downs syndrome as well as dementia so I am constantly alert
To keep safe and calm
Visits from family member Regular routine Safety Regular meal times
Warmth, food, comfort, love, understanding, space to be himself, no judgment.
With family that he knows well

Q3: What do you view as important to the person/people you care for/work with when they are out and about?

Accessing various places and being safe
Again to be safe. My daughter has no road sense so safety is paramount
Always accompanied by carer or 1:1, family member. A good walk in fresh air every day, fun, a view, or charity shop to look at books, access to a loo
Any allocated support worker must stay with him when he visits shops to ensure use-by dates are understood and money given is correct, with guidance on change given. {Name} also suffers from agoraphobia, it is very important care support workers stay with him at all times
Appropriate clothes Phone
Being able to access community activities
Being able to socialise with people (in different times to those currently obviously !) . To visit places that are interesting and provide stimulation. They need exercise in good fresh air and basically be able to interact with a wider world than would just be available at home .
Being out with people who are prepared to concentrate and put the needy's safety first.
Choice
Choice to live a life they want to- have support to help -build independence, confidence and friendships- to make steps and achieve goals to be independent and live without paid support when able to do so - be allowed to meet with their friends in community and chances to be connected to community life
choice, freedom, independence, volunteering, being able to go out
Ease of transportation, mobility, ease of access to banks and post offices. Safe and clean streets, services within a reasonable distance to home. Benches and seats to support mobility issues. Well kept and safe pavement and roads. Traffic travelling at legal speed. Shelters at bus stops. Antisocial behaviour tackled, reduction of crime.
Forethought to reduce the likelihood of coming across dogs - he is terrified, particularly when they are not on a leash. Encouragement to walk - he is poor at exercising!
Getting out and meeting like minded people is really a top priority. At present with centres closed and no social groups through the Covid situation it's really heart-breaking to say that the going out is now non existent. My son is at home 24/7 and having no outside social. This In turn affects his mental health greatly.
Have choices and places to go meet up with friends being social keeping safe and supported
Having someone with them when they go out
He can not live home without assistance
{Name} enjoys being able to go out & go shopping for her Saturday paper & sweets. {Name} enjoys the freedom going out grants her
{Name} likes to get out and about but needs support on each outing - sometimes he will feel too exhausted and not be able to go out, other times he can manage a small outing or couple of hours
lots to see and do - gets bored easily
Loves to go out and about but needs someone accompanying at all times. Not safe on roads
Make sure they wear PPE when out and assist them with 2 meter apart during out in the community
Making sure the person is safe
Making sure they are in a safe happy environment with support, interacting with others
My daughter goes out every day with shared lives and at weekends with Dad
Not being judged by others, having access to all facilities without prejudice. Being able to see friends regularly.
Personal security Safe systems
Plan where you are going, that they will be accepted and able to join in
presence in the community as equal with the public
Regular trip out in my car Interesting places to visit Suitable facilities for my needs
Safety
safety 24/7 care. My son cant be left alone
Safety, Acceptance, space, no judgment, understanding.
Safety. As very vulnerable. does not read or know her way around so needs support to get places and appointments
Someone with him to keep him safe and give advice if needed
supervised, safe, access
That their safe and manage to get to where they're going safely and easily
That they are well aware of safety

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That they have the appropriate funds and passes (bus pass, gym pass etc). How to use and what type of public transport
That they know where we are of they need us. That they feel safe
They are somewhere familiar - not too loud or busy. Have an 'exit plan' if it gets too much for them. Be prepared!
they have options and are shown them all depending on their likes
to be safe
To be taken out to whatever they want to do - cinema, out for meals, theatre, shopping for clothes and whatever
To be with people who know him well
To make sure they don't come to no harm and avoid danger
Transport, provide vehicle and fuel, purchase of clothes, holidays, pay for meals out, prepare sandwiches for visits to his centre. Doctor (hospital) dental appointments
Unsafe
variety, safety, walks, trips
Very rare to go out and usually to hospital visits etc. Extra care to be taken because covid 19

Q3: What do you view as important to the person/people you care for/work with when they are preparing to go out?

Advice on what to wear to keep cool in summer warm in winter
Appropriate clothes for weather sun cream sun hat coat hat and gloves deciding where to go
be listened to no matter what others think - have their choices in life supported and allowed to make mistakes take risks - Have people who understand its about getting a life -not a service.
Because {Name} suffer with severe anxieties I like to make sure I prepare him well in advance before we make any journeys out
Being able to get themselves ready with or without support. Supportive aids to assist within the home, ie stair lifts, rails etc. Knowing that the transportation systems are on time and will not speed past the bus stop.
Choice
Choice of what to wear
clean clothes
Deciding on everything from clothes to routing. The person in care needs to be helped and directed.
enable person to be as independent as possible
Ensure they have suitable clothing for the occasion are aware of where they are going and what they will be doing
Happy
Have appropriate passes, flat keys and a plan of public transport. Communication cards (profoundly deaf) bank cards and money
Having help with all aspects of daily life, finance and health.
Having reassurance about where they are going
Having time to be able to get ready both on terms of getting the right clothes , going to the toilet if necessary , and being not rushed and in the right frame of mind .
Help with organising. Shoes need to be tied, zips/buttons done up ({Name} cant do this)bag/mask/wallet etc. Checking shoes go right feet / clothes right way round / clean
{Name} likes to write a shopping list before & to be told the place as it calms her anxiety about going out into the community
Knowing where they are going, what they will be doing and who with. Having the right clothing on e.g. weather and what they need to take with them, money, drink, food etc
Looking smart and tidy
Looks tidy, clean, reassurance, supported, prepared
Make sure clothing is appropriate to weather
Making sure adequately dressed
Making sure she has correct clothing on
Making sure the disabled person has everything necessary needed for going out
My daughter is always assisted to prepare to go out
My son needs to be dressed and where we take him needs careful planning
Needs assistance with. He is very isolated gentleman because does not have any family and nobody expect me care for him.
Needs carer to help
Nothing in particular
Plenty of warning; keeping to an agreed timetable for leaving and getting home again; reassurance about where he is going, who he is likely to meet.
Routine - its major meals, loo, drinks, help with coat, shoes, somebody always with him
Routine Planning Communication
Routine, pre warning, a plan, anxiety awareness.

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{Name}'s life is run to a routine it is therefore important to him they arrive on time and we know the care support worker allocated otherwise he starts out anxious
Suitable clothing and waterproof covers for my wheelchair
Take everything you think you may need. Social stories well in advance if you are going somewhere new. Get them ready (i.e shoes) at the last minute
Taking time, having patience for any changes that can happen plans often go wrong
talk to the young person explain where we are going and why
That I have warm clothes because of health issues
That she has everything she needs for her trip out and make sure she is dressed appropriately for weather
That she has everything she would need for where she is going
That they have everything they need e.g. money, to know where they are going and who with. Prepared for all weathers there are staff to support them to get ready and take them out whether in a car, public transport or walking
To get them ready when they don't understand time, money, what clothing to wear especially in winter and transportation to wherever
warmth, care, safety, cleanliness
Wearing mask, gloves, to carry a bottle of sanitiser. Enough money to use while in the community
With being autistic routine is a must in having preparation to go out... giving lots of notice and giving him the info of where he would be going, but with Covid and nowhere for him to go..

Q4: What do you view as important to keep the person/people you care for/work with healthy?

A constant eye, is non-verbal so head to toe he needs help, good help. Loving care is important. Someone that knows his needs, his past history and is on the ball
A good balance of being outdoors, doing different activities and rest. Talking and encouraging with skills around the home / social skills. Trying to move forward through life with confidence
A good healthy diet; encouragement to walk; regular check-ups with GP and dentist.
Access to gyms/exercise opportunities Access to an autism friendly dentist and doctors' appointments
Being able to have a social meeting group with likeminded people which at present there isn't. His health has suffered greatly. He is also awaiting trauma therapy and nothing is happening with that as it would have to be face to face.
Being clean, clean continence pads. Good diet - unable to feed herself. Clean dry clothes correct medication at right times of day
Cleanliness and safety at all times
Diet & Exercise
Diet, exercise, go to the doctors, dentist and optician when necessary
Diet, personal care and cleanliness, just good old care
Do you mean physically? Or mentally?
Eating Healthy and generally looking after her health
eating the right food
Exercise is important for my mental health and medical diagnosis of osteoporosis. it should be done as frequently as possible. Access to the community helps me to socialise with other people something I must do to helps me with my anxiety of open spaces.
Exercise long walk/runs balanced diet entertainment
Exercise and healthy eating. Regular medical and dental checks good contact with family and friends to maintain good mental health
Feeding him all of his meals, getting him out & about trying to keep him safe & active
Food, variety, fresh air, staying positive if possible, friends, interaction with peers is vitally important, family
Give {Name} his medication to help with his anxieties and behaviour and was wash his hair with a special shampoo for his skin condition and also he's a fussy eater I have to make sure he's eating properly
Good balanced diet, regular exercise/activity and mental wellbeing
Good diet. Exercise. Correct medication. Proper care and support
Good food , Company, Activities, Understanding staff, Regular health checks
Good health Eating a well-balanced diet
Healthy and balanced diet, regular exercise. meeting all care needs, personal care
Healthy diet, outdoor activities
healthy diet, try to go out walking
Healthy food (with some treats !) , Exercise , and mental stimulation , eg by doing games , puzzles , anything which makes them think and make positive actions rather than always following someone else's instructions.
Healthy lifestyle, food, doctors appointments, dentist too. Last week a flu jab
Healthy lifestyles from childhood is key - education of parents /carers and individuals - diet- exercise - mental health and positive can do attitude to life -have goals and expectations to be independent and only support if needed -and support aimed to learn what's needed and then back off. Prevent ill health, not cure it later on.
Healthy food, being clean, exercise, doing things they enjoy

Learning Disability Engagement Survey findings

It is important to give {Name} a choice of food that healthy & filling. It is also important to ensure {Name} has her medication in a timely manner to her preferences
It would help a lot if government would stop this whole thing about Covid 19. Many people dies every year for flu and nobody ever did lock down or this all silly things.
Making sure they have some sort of exercise, looking at diet also any emotional worries
Medication, diet, hydration, hygiene, sleep
Mental health requires socialisation with freedom from family supervision
Personal interaction with other people who care about their disabilities outside the immediate family. The subject needs to breathe and show their own character, which can be suppressed unintentionally by family hierarchy.
Providing care for all their needs, toileting, medication, washing and bathing. Most importantly to keep him engaged with his friends and the community, he thrives with company and without interaction his mental health suffers.
Regular check-ups with medical professionals
Regular exercise Balanced diet Good mental health
Regular exercise, fresh air, healthy meals and snacks and drinks. Regular health checks eg dentist or doctors if needed
Regular health checks. Regular prescribed medication. Regular well balanced meals. During Covid - social distancing, staff to wear PPE, visiting family members to observe social distancing and wear a mask
Repeated reinforcement of health and hygiene principles
Supportive carers, who demonstrate understanding of condition and are kind. Good healthy food.
Taking medication on time and having access to doctors when needed and having a health diet
that they have a holistic approach from staff when providing care and support and all aspects of daily living/ health are looked at and health professionals offer services that are offered to everyone else and treat the people with respect and dignity
To eat the right type of food, get out of the house for some fresh air and exercise. Socialising safely.
To ensure that the Care Provider has a correct Care Plan in place and follows it.
To support them and educate them about importance of their values
Try and make sure they eat well, not to go to places where they may come into close contact with unknown people
Warmth food hygiene

Q6: Please describe your experience (health check)

Yes, the professional was able to support the person in a way that took into consideration their needs
All directed to the client in a supportive and appropriate manner
Annual check-up at surgery
Attended meeting based at Telford hub
But needed to talk to me as far as making sure person understood what was going on
By phone with his specialist hospital consultant. It was positive and aimed to continue as we are doing based on blood tests & stool sample and weight & general information given by me (his mum). No changes
Consultant wrote to social services saying respite care was urgent
Dr {Name} see her every 6 months and supports her well
Dr, spoke directly to service user,
Everything went well except with the language barrier since {Name} cannot speak and understand certain things but I was able to communicate on his behalf
Good
Good experience although the doctor didn't really understand the person so I had to explain about the problem and pass on to the person
GP usually provides annual review, not done this year despite having been prompted by mental health team. I have telephoned gp surgery today to request again.
I go out in a wheel chair because I can not walk far and have to be supported when doing so. I can not use a frame etc I have severe kidney problem, dementia and can not read or write
I took {Name} for an annual health check and blood test. The GP was very open to {Name}'s special needs and appointment went very smoothly
{Name} has had an ECG at hospital and had health check at fuller house and everything was ok {Name} was nervous when he went but they were good with him
Just a routine hearing test at the hospital
Local doctors surgery. We were seen on time, so no unnecessary waiting. Spoke softly and calmly. Listened to me to understand his needs and what he would tolerate.
Not feeling comfortable with putting pressure in the eyes
The also explain about any changes in medication or treatments
The dentist and doctors have treated the person well - with respect and dignity. Took their time with them so they understood
The majority yes. On occasion, when faced with the difficulties involved with treating the mentally disabled, some professionals simply refuse to try as it becomes "too" difficult for them. The specialists in the medical field are truly wonderful in Telford, General Practitioners not so.
Very amicable

Learning Disability Engagement Survey findings

Whenever I have received health checks for whatever reason the support and understanding provided has been considerate and calming
Yes, her doctor and dentist always treat her well
No, the professional was not able to support the person in a way that took into consideration their needs
Doctors are not happy to help much and actually they realise they can not do anything because we are living in this difficult times with Covid. Why all surgeries are cancelled? It's very unfair a specially on elderly and vulnerable people
He is awaiting Trauma therapy. He stops eating through trauma. He had contact with a phycologist and put on the waiting list but as he needs face to face and they aren't doing face to face at the moment we are just left in the lurch and to struggle on.
I have had several upsetting and awful experiences at PRH (hospital) they have NEVER made reasonable adjustments for my sons additional needs, and most interaction with the hospital fall well below par! Because my son is non verbal the medical staff never seem to grasp that he needs an advocate at ALL times. On one occasion when my son was admitted to hospital I had to go home to collect some things and when I returned he was walking the hospital corridor with no shoes or socks, a hospital gown gaping open, being "escorted" by a SECURITY GUARD for example.
My son required teeth extraction. His fears and mental condition were told to the hospital in advance. No provision for his needs was made. I had to hold him down screaming before he could be operated on. No help was given by medical staff
Some doctors seem to rush the appointment instead of 20 mins I might get 5 mins if I am lucky
This was a very long time ago
Was not supportive of patient would not listen to parents advice on how to handle patient. Didn't speak to patient in terms they'd understand

Q8: Please describe your experience (GP or hospital)

Yes, the professional was able to support the person in a way that took into consideration their needs
All doctors inform me of all changes or concerns with health or medication
Answer as Q6, also very nervous
As above
As above
Couldn't have been better
Friendly took their time and listened
Good
Had a phone call with our GP. Again had a positive call he raised relevant concerns about my sons blood tests that related to my sons medication he was on the ball. he is new GP
Have a good relationship with doctor and nurse and other agencies
He was alright
Her GP is very aware of her needs and she has a thorough review every year
I was quite pleased, the GP spoke to them like anyone else except when they refused to speak and then the GP spoke to me
{Name} went to see GP because his iron levels were low the GP was good with {Name} he also been seeing a Dietician at a skin specialist and they understood his needs
Most medical professionals address my son with understanding.
On one occasion I was taken into hospital by ambulance without support from anyone, I was really anxious and nervous throughout my 6 hour stay in the A&E department. To get back to my home the nurse kindly rang my parents. the staff understood my concerns and frequently talked about my health problems.
{Name} attended hospital for dental work. He was very well looked after by the medical team. I was able to be with him and reassure him until he was taken to theatre
Stair rail and bed rail has been identified as a need. Additional appts for memory assessment and bloods arranged
The doctor was good in what he could do, and that's prescribe medication and he did make arrangements for him to see him face to face, but mental health is left for the carer/parents to push forward.
The professional was polite but didn't really understand the person as they were unable to communicate verbally with them
They do try Sometimes good, sometimes not so in the past
Well treated
Yes the doctors were professional in their manner and made them feel at ease. Not attended the hospital with this person
No, the professional was not able to support the person in a way that took into consideration their needs
As above
Busy waiting rooms and queueing system doesn't work for people with autism
GP not fully understanding severity of disability and comprehension of what person comprehends
He had a brain scan at New Cross Hospital. This was necessary but of no help for day to day support
I found the doctor examining {Name} to be rude. {Name} is very sensitive to touch - the doctor touched his belly, {Name} reacted with pain, the doctor looked at me and said 'that didn't hurt' I think often people can be dismissive
It's getting better to be fair, but my son is now 28 years old, so as you can imagine i have had lots of interaction with medical professionals, so I couldn't describe them all.

Learning Disability Engagement Survey findings

No is not quite the right answer , because there are some people who are either trained how to deal with Learning disabilities , eg specialised dentists , but general health practitioners in many disciplines need more training as some struggle to understand how to get the right answers from people who have difficulty describing their problems
staff nurse very good, did a scan, found her bladder was full Dr decided she was constipated, sister fitted a catheter, we were sent home with laxative she slept on the couch for two weeks until she slid onto the floor and I had to call an ambulance, then she was taken into Morris Care and she is still there
They seem to talk to me (mother) instead of the young person
{Name} has the mental capacity of a 5mth old baby & needs a family member with him 24/7 to be his voice & explain his needs & how to care for him. The current situation with Covid worries us as there is no way he could be cared for safely in hospital without a member of his family with him to be his voice.
Was years ago but was not easy
When needing dental surgery no help whatsoever was given by the anaesthetist to control my son. Before the day, all were involved of his mental condition, and we were told help to quieten and stabilise him would be available. It was not. The anaesthetist went as far as to say he would refuse to treat him if I couldn't hold him down physically, and administer gas myself.

I.ii. Having friends and relationships

Q10: Where do they see their family and friends – ‘other’

Arty Party on a Monday and some friends on virtual meetings
At college
Doesn't have friends, people tend to be well above or well below their intelligence level. Lives with family, sees extended family periodically
Greencare's farm two days a week only. This due to Covid shutdown (was four pre Covid)
in family's home, restaurants
{Name} see his friends at his support group
Outside care facility because of COVID 19 (no divided room available made available)
Sees me outdoors occasionally Has been taught to use the telephone by staff which has kept her in touch with me.
She volunteers at Belmont Hall twice a week, goes to gateway and a church group, when Covid is not around
Very occasionally I can collect him to stay with us for a night, but he is always keen to get home again.
We visit grandma in Scotland. Lockdown has affected visits
When out and about in the community

Q12: is there something that could support the person/people to see family and friends?

Because of covid-19 our family live in Yorkshire and its impossible to go and see them at this time
Covid fault We have to stay distance No places to go anymore
Video calls in place with parents and brother and children. {Name} copes well with seeing them via phone calls
With autism it is really hard for them to make/keep friendships. The only way is with centres able to have group meetings where they can mix with likeminded people. And in a routine of each week. Even if it was just talks on any subjects etc so if they don't want to talk then they still have something to keep them interested. At the moment there is absolutely nothing for autistic adults at the moment. His mental health is suffering. There is nothing to keep him stimulated.

Q13: What do you think the person/people you care for/work with would like to do with their friends and family in the future?

At the moment certain things are difficult to do with covid
Be able to meet them as now where best suited.
Cannot do much with anyone. The answer is same as Q6
Come and stay with us more often - this will be much easier when we move to the area (currently we live more than 100 miles away)
Continue to see them attend family functions ie wedding, funerals
Continue to visit, be involved in their lives
Continue using public transport, taxis and support from care support workers to enable me to access the community
When Covid-19 is over I look forward to going on holiday with my mom & data again, and seeing my friends in my flat and visiting them
Currently in hand
Engage in different locations outside of Telford, city break and holidays by the coast and abroad
Go on holidays Have family parties Access activities
Go out
Has no concept of thinking what would like to do, have to be asked by giving them lots of options
He cant go out without parental support he can only be in a responsible controlled environment

Learning Disability Engagement Survey findings

He used to love trips with the autism group to bowling, or group meetings, going for lunch at a cafe that has time slots that are stress free for autistic people like a coffee shop in Wellington.
I dont know. We're quite happy with how things are
{Name} would like to go out for dinner & to the pub with her family. {Name} would also like to go on holiday with her family
{Name} only see his friends at his support group he doesn't see anyone else apart from family and professionals
Just to support them
Keeping his company. Engage in relationship
live in supported living- may be with a friend? Visit parents and reciprocate. Have parents in a role suited to the age of individual- Have good friends to go out with spend time with doing stuff they like
Maintain all easier access to their bowling and meals out with friends
Maintain contact, receive ongoing support
meet at home. go out for meals to meet family members
Meet them out some place for food or a day out or a walk around park. Just to have some kind of contact. Familiar faces say hi. Needs some sort of contact meet up with peers.
More getting out and about
My son doesnt have friends so its just me and him
My son has to be enabled at all times by a carer/parent. He enjoys being physically active and thrives in company. He desperately wants to return to the Horsehay Skills Hub to work with Twigs, and see his friends which he hasn't seen since March. He also wants to return to Club 2000 which is a volunteer led social group.
My son loves to see his friends in the supervised environment of my options.
No capacity to answer
No different as to what what my daughter does every day
Not alot, prefers own space
Person seems happy with amount of contact as pre lockdown (days out/activities and holidays)
{Name} doesn't have 'friends' - he does see his family. Goes to his Dads regularly & sees his grandparents.
See her sister more often and start attending day centre again so she can see her friends
See them more often
See them often. Complete an activity with parents, example - going out for a meal
Some outdoor activities with friends
Spend more time with friends in a safe environment eg day centre
Stay in touch - always This has to be done for him, it is not always successful if he gets stressed
The same as everyone else! This is very vague and it really does depend on the person/people you care for/work with diagnosis.
{Name} live at home with his parent who are his only carers they are both in their 80s family call by as often as possible to help out. To not be separated from family as he stops eating when he is away from them. {Name} would be best in a bungalow with a carer who got to know him and parents could be involved every day
To be able to return to adult day service centres. She misses seeing staff and friends greatly
To join with them when possible, to celebrate special occasions ie Birthdays and to see newer younger members of the family, to joy a meal together or spend a day out.
To socialise, go the cinema, theatre, birthday teas christmas get together normal life
Visit mother. Meet friends at clubs provided in the community. Go to Day services, but she is precluded from this now and nothing has been offered to replace it.
We only have a few people who have contact with family, partly because the family member doesn't know what to say to the person or because they don't understand the person and visit out of duty rather than because they want to. Some of our people would like to see more of their family and see them in the community, but the family do not want this. We are trying to arrange to meet families in cafes rather than at home so that they can go once they have had their drink.
With a mental disability, it is extremely difficult for a subject to make friends within a normal peer group. They didn't/don't attend the same school, they can't be allowed out safely without help. Thus the groups like My Options are vital for the mental and physical conditions of the guys and gals who attend.
With family she goes away and out for days. With friends she only sees them at organised groups as unable to go out on her own
Would like to go more on holidays
Would like to have a bus pass which includes with the carer

I.iii. Having Choice

Q15: If yes, what do they make choices about?

All choices are made in consultation with partner and carer
As a small family of 3 we actively encourage our son to take part in our plans and we partake in chosen activities together. He is involved with choosing clothing, food and leisure activities.

Learning Disability Engagement Survey findings

Every aspect in his life, barriers to making those decisions is communication barriers. Information received (letters, written correspondence) not in British Sign Language. Has difficulty reading English not first language
Everything, food, which programs to watch, what to wear, how to spend their day, what to eat, when to go out... everything
Food, clothes, tv programmes, entertainment, holidays
Food, what to wear, when to have a bath, when to go to sleep, whether to go out at all!
Getting up in the mornings going to bed at night, clothes she picks to wear. Chooses food, chooses where she wants to go as given all the choices.
Going to the shops does not like walking in the park. The doctors she would rather not go, its a ordeal she does not understand most medical speak. She is taken to the dentist and opticians
Going to the shops, bowling, cinema
Going walking or shopping
He is asked but often can't respond. So wherever we go we ask him to choose direction, which way? Where he can see where he is there and then
If asked, i'e shown pictures, photos to make a choice where or what. Yes or no
{Name} makes choices about what food she wants to eat, what clothes she wears, what activities she takes part in. {Name} choose when she showers, when she goes to bed & wakes up
{Name} has his ideas of what he likes to do and we support them / carers support him. e.g. going to the gym, volunteering with litter picks (Attingham park, hoo farm) dog walks, visiting family/friends
Normal daily living
{Name} makes his own choice on the food he buys fresh food is a problem because of the time involved in preparation. Therefore is it mostly meals for the microwave. He does choose what clothes he wears. He chooses where he wants to go but it depends on the care support worker allocated
She can go out to local shops and the local park. She is taken to Drs as would not cope on her own
Since the pandemic he chooses his activities more, before the schedule was organised for them, ie: swimming Monday, bowling Tuesday etc, where as now its more tailored to his favourite things.
Sometimes - can be particular about some things but needs assistance to go out so can only suggests preferences and relies on parents to be able to go where she wants.
They do make their own choice but have to have help and guidance due to e.g. I wouldn't go to the park today as it is raining you could go another day
This is yes & no. They don't make their own appointments & don't go to the appointments alone, by choice. Can go to the shops or park alone but usually choose not to
Very difficult sometimes to make choices and if not handed well can cause anxiety
What they want to eat Where they want to go
What they would like to do e.g. go to the cinema, shops, out for a meal. Needs some prompting sometimes
Where to go out. How to spend the day.
Where to go, what to do, what to eat etc, every aspect of their care I would say
which meal to have. Which drinks to have. Which DVD to watch. Which tv channel to watch

Q17: Is there something that could support the person/people to make their own choices?

Be supported to be confident, believe in self -has had a lot of years being told they can't and won't be able to .. Build on life plan-experience lots of positive role models - peer support groups empowered by communities and social care profession
Having the support by having more one to one sessions and being prompted and encouraged
One on one support

Q18: If you they could make more choices, what would these choices be about?

Activities, going out in the community and trying new things
Being able to view Retirement living accommodation to plan their future needs.
Being more adventurous
Better communication methods BSL/Deaf support would support making own choices
Can make limited choices, usually needs help with this
Cannot say.
Difficult to say, often says words or phrases that she does not mean, have to second guess meaning. Inappropriate choice eg wanting to watch tv at bedtime
Educating
Friends. Social life, day and evening contact fun games meet up with peers. As its ben over 7 months since normal life stopped its not good
Going on holiday. It need a bit bit of support to plan e.g finance place to go
Going out and food choices
Going to the day centre. interacting with friends

Learning Disability Engagement Survey findings

He chooses to spend his time at home, no longer keen to go out anywhere. He has as much choice at the moment as he needs. If someone new were to move into his house (currently there is room for this) he would need to be involved in approving this, to avoid problems with behaviour later.
He makes some choices but most of them comes from family since he cannot really decide for himself in most things
I always give {Name} options whenever I can - ie what he would like to eat, wear, play with in the garden. Im not sure what else he would like to make decisions about (that would be safe)
It would help if all support workers were motivated to take me on more walks which would help my mental health issues
{Name} would like to be able to go out more after the covid-19 virus is over
{Name} doesn't really make choices I normally have to make choices for him
Just wanting to do what we all want- its not usually 'out there' same choices that you or I like making
Maybe having a voice to choice what activities could be done at day centres or support group
More activities
More community opportunities
Most things he has to be encouraged with as with autism they suffer with extreme high anxiety so it means having to nudge him in the right direction but when he gets to somewhere he enjoys it and his anxiety levels then drop slightly.
n/a no mental capacity
No
No idea, has downs syndrome and little understanding about making choices
No more choices
Not capable without help. skills and attention span lacking
{Name} is given choices by showing him the items he has to choose between
relates to eating/food not really sure what else
Service user makes all choices
She would be director general of the CBI manage a restaurant or record shop or a cinema. What a silly question.
the young person looks on support to make some choices
Their choice would be perfect health any not to rely on any one
{Name} has the mental capacity of a 5mth old
To have and eat without limit until they became ill perhaps i.e. not rational decisions in my opinion
Too many choices tend to confuse and he shuts off or screams. A choice of two options tends to work best
Who works with him.
Wouldn't be able to make a choice

I.iv. Getting out and about

Q20: If yes, what do they do? (getting out and about)

Cinema, horse riding, walks, picnic, shows
College, walks, swimming, gym
Don't know how to answer this until the 2nd sept 2020 she could stand and walk but unfortunately can do neither now
Drive out in the car during Covid. Theatre visits, cinema, shopping, walks in the park
Due to Covid - no day services - attend virtual sessions, out and about in bubbles. Go out for meals, shopping, with carers and friends meet up with boyfriend
Due to Covid very little however previously visit family and friends.
go for walks, shopping, cafes, cinema, garden centres, church,
Go out with parents
Go shopping for food & essentials, clothes, day services
Go shopping or go for a walk
Go shopping, Out for Meals. is it's to Cinema, all this only possible with support from Carer
Go to the shops, to tea rooms, for walks, for days out into the country or other places of interest with parents and carers. Once a month they get the chance to meet other adults with learning disabilities and do crafts, have activities and trips out.
Goes to Arty Party, Boccia, Club 2000, tennis and skills hub. Only Arty Party now due to Covid. I take him shopping, walking, out for meals, national trust
Gym, shopping, litter picking, library, walks
{Name} goes to the shops, the cinema, the theatre, the pub, {Name} also goes to visit her mothers grave
Just in her local area on her own. Has to have support if going any further as she panics if on her own as communication is a problem and strangers.
Meals, bowling when possible, cinema etc
My son attends an organised group on Mondays and Tuesdays at the Albrighton Moat Project, on Wednesdays he attends the life skills course at Mark Taylor Support, on Thursday he goes out to work at Tickwood Farm with a support worker from My Options and on Fridays he has a support worker for 8 hours.

Learning Disability Engagement Survey findings

Not as often as before Covid. walks shopping, driving in car with support staff
Occasionally to shops (with assistance)
Only if taken out and about Can never go alone
Outing to see friends in the neighbourhood Bowling Shopping Out for walks
Park, shopping centres, walks in the woods, seaside, farms, museums. Air shows, train journeys, watching planes at airports
Shopping
Shopping and walks in the local community
Shopping To the bank Cinema Out for the meal
Shopping Walking Seeing family
Shopping, visit community facilities, museum etc
shops, bowling, cinema
Spend time with his PA within the community. Go for walks
Swimming, day centre, coffee shop, sensory room. Only with full support of carer
Taken out by parents for walks in his wheelchair now gets 4hrs a day mon-wed at day services
They go swimming, horse riding, out on the tandem, walking & to life skills with Mark Taylor Support
Various community based activities, trains, cosford, bowling.
Visit family & friends. Goes shopping and goes walking/swimming and goes to the gym. Goes to the cinema
volunteer work at Telford steam railway, visits to the countryside walking etc
walk short distance or ride wheel chair or visit hospital ect
Walking - various locations where safe, quiet and only
walking long distances, part running
walks for fresh air in wheelchair. visit for food outlets and others like iceskating and shopping
walks, go to shops and zoos, garden centre, day trips to seaside

Q22: If no, who supports them (do they go out by themselves)

2 staff during daytime 24 support
Always an experienced carer or family member
As above, he relies on transport and personal support for all areas of his daily life.
Care and support workers, parents, Dr {Name} consultant clinical psychologist who supports {Name} with psychological difficulties of long understanding diagnosis of anxiety and depression to enhance contact with the outside world
Care Provider
carer
carer or sister
Dad. Support from hared lives
{Name} {Name}'s PA, myself, {Name}'s brother or his dad
Deaf support staff Family Friends
Either a parent/step parent or PA
Friends/family
I do
I take her with me to go outside her local area. But I try to take her out regularly
Mostly myself and my husband
mother
Mother or grandmother
Mother or sister and father until the lockdown
mum and dad
Myself (father) and PAs at 2 x 1 when outside in the environment
Myself or carers (EmpoweringU)
Myself parent/carers mom Support workers
No one other than her parents
PA and family
PA and family. He can only walk around in the neighbourhood
parent
parent and/or carer
Parents and other parents of adults with LD.
Parents, family & staff at day centre
Partner or carer
PAs or My options staff
staff
staff and family

Learning Disability Engagement Survey findings

staff members & {Name}'s family
Staff, 1-1 24/7
Support staff
The family
Various workers from My Options

Q24: what could support the person/people to get out about

A person to go with her.
A personal assistant
Full support to get out and have fun with friends
Going to a club with other like minded people routinely each week. A social group where there would be usually the same set of people to meet and talk too. Perhaps learning some skills too. Something to look forward to doing.
Someone to watch him at every stage for his safety outside the home
Stop covid restrictions
Supervisor
training/support- in building confidence -plan safe ways to achieve things- practice with support- take risks -in safe ways - direct payments -flexible to life situations. set goals and times to achieve not just get support for ever and not move on

Q24: What would they like to do?

All the Day services activities that she is now excluded from. Swimming, Bowling Walking, arts and crafts, exercise groups. preparing food, sailing with Sailability, computers, reading and writing classes.
Go to pub, cinema, shops
Have fun
{Name} suffers with severe anxieties, learning disability and autism so going out can be a problem PA could take him out for an hour that could help him
Meet people and walk in the countryside
Social groups again i cannot stress how important this is. Work shops too where he would learn new skills.
Sports, music, walking

I.v. Having a Job

Q29: What are they doing?

Catering assistant with support
Voluntary work in {Name} shop twice a week in an afternoon. Not possible at the moment due to Covid

Q31: What could support the person to have a job?

*Education, Math & English * Deaf communication support * Education New skills
A routine of simple tasks with guidance that allows for slow changes in any routine and constant close supervision
He would love to work, however he cannot read or write, and is not fully toilet trained, so would need a support worker to help him with everything.
He would need help with job application and any other things related to a job
I don't know - they get very irritated by other people
I feel he would enjoy a job but he'd struggle to do the task to an expected standard
it needed to be on the agenda years ago- more self employed opportunities using individuals skills and talents
More opportunities in volunteering would be good - as it feels like a job and creates a sense of worth, I'm hoping {Name} could work more with animals in the future as this is something he would love to do
Someone to get her up in the morning, get her breakfast, get her ready and deliver her to wherever. I have no idea what she could do as a job with very bad speech, hearing and agility but she says she wants a job
Supported internship opportunities Menu of supported voluntary work

Q32: Do you feel they could have a job in the future?

At present he has been going through a lot of trauma and high anxiety. He is not fit to work at present but he hopes to work in the future.
At the moment {Name} isn't ready for a job he's still learning he's goes to a support group on a thurs and friday learning life skills maybe in the future he can do voluntary work it depend if {Name} can cope
Due to the level of {Name} learning difficulties, {Name} will be unable to have a job
I don't know what the future is going to be
Never been capable of job / disables and Downes syndrome
No
No

Learning Disability Engagement Survey findings

No
No !
No No mental capacity Profoundly disabled
No they are elderly 90+
No would never be able to work
No, as she has epilepsy and mental health problems and does not cope with new places and people well
No, his capacity is that of a 5mth old baby
No. Maybe volunteering but it would be very limited for {Name}
No. It would be wonderful but a dream he is not capable
No. progressive physical and mental disability, 'learning difficulties' part of neurological disease
Not possible to say at present. {Name} would be unable to work. {Name} has limited capacity and unable to make decisions
The person may be able to carry out light duties via an outsource scheme, such as filling envelopes at home perhaps. I do not believe the person would be able to maintain a regular job without support or for longer than a few hours
Totally incapable mentally
With the complexity of {Name}'s medical conditions it is very unlikely he would be able to do any meaningful work. Klinefelter syndrome has resulted in complex and varied symptoms of physical psychological issues which have him frightened to leave his home and meet people to live a fulfilling and stimulating life
Yes

I.vi. Having the right support

Q34: Who provides support

3 x PAs employed by myself
Aunty
Carer
Dad/family
{Name}, {Name}'s PA
Family
Family
Family members
Family members
Family, friends
family, local voluntary group
Her sister
His Dad Grandparents
Home Farm Trust Ironbridge
{Name} receives support from a psychiatrist
Mark Taylor support group
My options
Nvtrx care
Parents
respite with grandmother 2 days hft
Sister
Sisters
Swanton care Sister

Q34: What do they support with

All aspects of daily life
All life skills whilst visiting
As per PA/carers duties plus short term visits i.e two hours for a meal activity
By being there when we need her
Cooking

Learning Disability Engagement Survey findings

Cooking a meal, checking she has showered and changed clothes, the pace is clean for 1 hour a weekday and longer at weekends so her mental health does not suffer
Cooking, cleaning, making appts, medication, laundry etc
Everything
getting out and about within the local community
going out, social group activities/club
{Name}'s psychiatrist supports {Name} with her mental health and medication
letting my daughter visit her home and staying for evening meal, sometimes the cinema
Life skills
Looking after him when I have appointments etc
Need support 24/7 Safety and food Care All personal care needed
personal care and wellbeing everyday life situations and activities
Personal hygiene Food Clothing
Personal hygiene, dressing, shopping, mental stimulation. all needs supported
Residential care
respite everything hft - social activities
Virtual cooking lessons and computer sessions
walks
Whenever problems arise we are {Name}'s sounding board we try to explain in simple language how to help him understand problems. We represent his views and concerns to station mews management

I.vii. Respite

Q37: What type of respite would you like to see in the future?

activities focused respite short breaks is a safe, well staffed care home
Activities focussed Keeping fit
Activity focussed, fully supported with young people happy safe environment with needs met
Cannot have respite now as she is in care home and not in good health. See previous health issues
Consistent reliable stable caring. All respite cancelled since March
have a proper holiday or weekend away - individuals living at home - can stay at home and parents go away
Looking for more in-house respite support
My daughter has respite but unfortunately due to Covid cant go at the present but does go out 6 days a week so when Covid finishes she will go back to respite
No respite care for two years. family home only he would not like an institution. 7 phone calls over the last year, no support worker in place.
Not needed now. In fulltime care.
residential staying overnight with grandmother
Residential, possibly activities
Respite entitlement agreed prior to lockdown but not yet safe to access respite
Several weeks of residential respite, spread across the year
Try and get the care packages sorted before trying to run before you can walk! Every respite facility my son has accessed over the years has promised us many things but never delivered im sorry to say, as this puts even more pressure on me as his mother and full time carer the rest of the time. I can never relax when he is at these places which entirely defeats the object of respite.
We would welcome the reopening of the day centres, which would encourage learning skills whilst being with friends. We would also welcome the reopening of the I Can 2 project which encourages physical fitness and developing personal skills.

I.viii. Covid 19

Q39: Please tell us why (experience of Covid Lockdown)

Negative experience of lockdown
Adult social services do not care about their clients. They are always off work and almost never reply to emails or calls
Anxious and anxiety a lot
Because she cannot see a GP, she is in care at the moment. She would not lie down for an MRI scan so RSH could not do the scan because she was so distressed I don't know if she will get another one. I'm scared for her she should have been sedated but was not
Because she does not go out, like prison in there own house Sad because not seeing family No social life

Learning Disability Engagement Survey findings

Before lockdown {Name} was going to his group and learning and also saw a psychologist when we went in to lockdown its knock him back that why it sometime negative
Can't do some of the things I like doing
Changes were too frequent for service user to follow
Covid blocked my daily routine isolated no contact left in house jail
Covid lockdown has meant that {Name} has lost his club 2000 and his gardening club at Overley Hall School
Day centre no longer available due to Covid. Now having to give 24/7 care. No respite. Mentally and physically exhausting. Lonely and isolated. Lack of support from services
disabled person has total reliability on parents and covid has stopped them having a little bit of independence away from home and parents
During good weather I have been able to take my boy walking to meet dogs and animals in the countryside. The negative aspect is he is virtually imprisoned within his very narrow family group unless he can visit his friends in things such as My Options
I had to have {Name} home from March to July as her care could not be guaranteed. Also lost all her voluntary work so on own all day, back home now from Monday to Friday as nothing to do comes to me at weekends
It is what it is. Although i had to get everything sorted for my son on my own as i always do, because he wasn't deemed "disabled enough" to be put on the shielding list, so we didn't get any extra support, no medication delivery, no food priority service, social services were so far behind that it took so long to even offer ANY support and it wasn't till i was in the verge of a complete mental breakdown that they offered any help at all.
It was 100% at first but now lots are complacent and do take care. If you study what goes on in shops, cafes even care homes. The staff make mistakes
Living alone with only support staff checking on client. Very difficult in the early lockdown count not go out much, detrimental to mental health
My son loved to meet him friends and staff at my options. He is lost without them
My sons, and my, mental health has been badly affected. We were in lock down since March and have only been able to return to my work and his, new, activities in the past couple of weeks. The online services offered by My Options were not suitable for my son and despite promises to arrange for phone calls and walking groups none of these materialised. Following his review with a new, very understanding and helpful, social worker he has got a completely new routine which he is struggling to accept and embrace. He continues to miss his friends and asks about them repeatedly. His medication has been changed due to the changes in his moods over the lock down and we are constantly trying to keep him engaged and well. Through lock down he has lost so many of his learned social skills, he has reverted to watching childlike videos and his social abilities have suffered without engagement with his friends in his previous daily routine.
No daycare so no let up to caring unsafe return. usual things she enjoys closed or unsafe
No proper support or help available very stressing for mother
Not being able to get out for 11 weeks has made the dementia worse
not being able to go out in the community and to shops struggled to get shopping as no deliveries available struggled to get PPE at the beginning of the lockdown
Nowhere to access activities. Cant wear a mask, stuck in home
{Name} was very worried scared and confused about the restrictions placed upon him. It left him isolated, anxious and depressed that he could not meet up with mom& dad. He was in a 'bad state' and if Dr {Name} and her team had not stepped in by speaking to him by telephone over the lockdown period every day we hate to think what the outcome would have been
Services abandoned. Ten week nothing no day service or support
She has had to deal with such a lot during covid she had her father die, had a new niece born and wasn't able to see friends or family and other things, its been pretty hard
Stress, mental health
There is a little support but mainly phone call support. There is nowhere for him to go to. Me, the carer has no break. Mental health is awful at the moment and as no face to face valuable mental health help, left in limbo with trauma (ptsd)
We cannot do many activities as we use to do and mostly inside doing things more than being out and about
Worry about where it is going to end
Neither negative nor positive experience
gave us a chance to do lots of walking running also nothing else to do
Have just accepted it
My visits to him were curtailed for several months during lockdown, but I kept in touch by writing to him. I can now visit again, although he tends to prefer only very short visits.
On one hand it has restricted severely the ability to go out to places of interest and to have treats out at tea rooms / coffee shops / pubs etc and general live a more sociable life , and also there is much greater difficulty accessing medical services but on the other hand adapting to covid has meant thinking about making the most of each day and having a good basic routine also helps the days pass whilst still allowing for activities in or close to the home , including daily exercise which is observed more religiously then before , which has all been good . From a personal point of view removing lots of car travel and meetings means more time can be spent on hobbies as well.
{Name} is unable to understand what is happening during the covid emergency
Rules changing all the time by the Government but we are ok at present
The government does not seem very clear as to the exact rules it seems to me. The rates of recover for people tested positive are not apparent, only death rates

Learning Disability Engagement Survey findings

The quiet environment was helpful for a person with hyper-sensitivity to sound / autism
Very difficult at the beginning. I have 2 customers at home and its been difficult spending too much time together causing issues. Not knowing or how to plan e.g. next month or even next year
Positive experience of lockdown
Been able to spend more time together as a family
Good communication from T&W in relation to this subject
Had to stay in for 12 weeks due to medical problems, put a strain on family
Have seen a lot of neighbourliness - also see a focus on services - building based ones closed - people do find other ways- shows how limiting a day service can be and why parents like them for the security of a break - cared for in a safe place - shows that we are focussed on people having a service not a life - good to see this is being recognised and ideas starting to do things differently -no going back to how it was before is sometimes a good thing!
It wasn't very different to our lives in general. The only difference was they couldn't go to the day centre or for a wander around the town centre.
My son is in a small Care Home in {Name}. He lives with six other residents of a similar Peer Group, There are three homes in the Complex making a total of 26 Residents, throughout this time they have all been kept safe and well, they go out for rides in a car or a walk around the village, but they do not go into shops and remain in their Support Bubble.
{Name}'s college closed so he was at home full time. He thoroughly enjoyed - luckily the weather was kind to us!
We followed a routine that has kept us positive - dog walking, exercise on YouTube - Zumba, yoga, walking etc gardening
We have coped. Despite being shouted at for holding hands or not wearing masks Luckily my son does not understand the pandemic

Q41: Please tell us what you are worried about

Because I cannot see my daughter or get a diagnosis as to what ails her
Because no freedom at all wearing PPE every time
because people are not as careful as they were at the beginning and have become complacent
Catching covid19 on top of other health issues
Catching it. Would not like my person to catch it. The fact that she is just watching TV most of the time. She needs something to look forward to. No staff available to take her for a walk most of the time. She was so looking forward to returning to Day Services and has now lost all her activities and all her friends that she has had all her life. Loved the Day Services and hardly missed a day in 30 years.
Going on a long time worried about the future
how it is going to affect us all
I am 78 so am in a vulnerable age group, I live in a retirement living complex where some residents will not wear face masks or social distance, we at present have one case of Covid in this Complex, Care Staff are self-isolating because they have been in contact with this person. My husband passed away nine months ago, yes I am a little worried.
I am concerned due to the information supplied by NHS which states there is an increased risk to those with learning disabilities. I also have caring responsibilities for 3 elderly parents.
I get fed up staying in all the time
I might get covid, the young person might get covid and what will happen if I get covid to my son, there is only myself and him
I worry as to what will happen if and when this is over, as I don't know how much will start up again for {Name}. She had a full life before
I, like most people, think that we will need to learn to live with the virus whilst needing to protect vulnerable adult like {Name}
If both parents succumb who will care for him and his brother who also needs care
If my son had to access medical care who would understand his needs? How would a hospital cope? Would they listen to me?
In case any of us gets it and suffers complications / hospital admission
Inconsistency of message, individuals not taking it seriously, it is a virus that is unseen.
It is clear that any even half effective vaccine will not be ready to use nationwide until late summer next year. For many families things will get worse and worse and money will be a big problem. The country is also borrowing massive amounts to pay for this and the economy is going to struggle until we get back to somewhere near normality. People will get fed up of following rules and it will just linger on for a long long time. The main worry is that medical services will continue to be under pressure. We do not want to ever be accepting a society which loves their lives at home and dependent on a computer, or which divides young and old people, richer and poorer people in the way this threatens to do.
its nasty and has potential to kill people I love
Lots of things and keeping distance so I don't get covid and pass it on
Mostly about the risk of catching or passing on the virus, and the effects it can have, particularly on those with health already compromised by age or underlying conditions.
My son had severe asthma and gets pneumonia almost every winter and now im afraid there are no flu vaccines left! He is also exempt from wearing a face mask and i am terrified that some idiot who REFUSES to wear a mask is putting him even more in danger.
No one to care for my son if something happens to his mom and I

Learning Disability Engagement Survey findings

No vaccination
Nobody ask normal people what they want
not being able to support
People not obeying the current regulations, ie rule of six face coverings etc
Protecting vulnerable people in the household
{Name} contracting it and not understanding why
Scaremongering by media impacts negatively on service user
Spread of infection, being infected, mental wellbeing
That this will go on for a very long time and having no help or support to get my son to having 'a life'
the disabled persons ability to cope with covid as wouldn't be able to explain how the feel and would panic if couldn't breath properly
The feeling of isolation being on your own for long periods of time waiting in a shopping queue surrounded by unhappy people some shouting at others also shops were closed public transport with few passengers and everyone in the community looking sad
The future. What would happen if one of us got covid. Not given support information re: emergencies
Very isolated, no or very small Deaf community in Telford, no video BSL contact with any support services
Very worried about covid because daughter already has disease and complex disability, if she contracted covid she may not recover
We don't know when this is going to end
We might go into lockdown again and I found it hard last time and {Name} is very worried about Covid
With no family to look after my son other than his Mom and I, if one of us catches severely it, the boy will have no one to look after him
Working in more than one service, runs the risk of bringing COVID into either service, or more importantly to my home & family

Q43: Please tell us why (Experience of Covid restrictions on services and activities)

Negative experience
Because we are not all computer savvy
Being severely autistic my son has no clue what has been going on, he doesn't understand the virus... do any of us??? So i have had to take all the worry on myself which makes me anxious and affects our home environment. Also his routine has been completely trashed and he has no idea why, everything he knew is gone, everything that made his life that little bit more manageable or enjoyable has gone.
Cant understand why she cannot attend day centres and clubs she is a member of
Families couldn't visit people unable to use technology much people have not been able to go out and about people have had to stay in and some have had to isolate due to health conditions
From enjoying 'freedom' from home three days a week, he now gets two short afternoon sessions to gain a little freedom. This sessions are truly appreciated, but leave little time for his Mom and I to attend to family chores difficult with my son around who is 24/7 dependant
He has too many anxiety issues to do any online meetings/socials. So he has totally nothing at all. 24/7 and no other contact.....
Isolation, separated, blocked, stopped. Very hard to get used to staying at home 24/7 not understanding as to why very difficult for young person
{Name} is worried about Covid he's very anxious when he goes out he thinks he's going to catch it
{Name} cant access online as she can't read or write. The only way she has understood anything is when I have been with her and explained
Lack of activities. Changes in routine
My daughter has a low mental capacity so needs more outside the home stimulation and a variety of activities to prevent boredom and minimise challenging behaviour
My son attended Horsehay Skills Hub 2 days a week and Southwood one day a week. He misses his friends, he misses the staff and he misses the routine of attending familiar buildings. Because of the closures of these facilities my sons weekly routine has been changed, he is still finding it difficult to adapt despite our support and the support of the mental health team with medication. He took part in the online group meetings however found them very frustrating as he could only see a couple of his friends, and found it confusing that he could hear people but not see them. He took part in online group activities which he found slightly better as they were smaller groups however he could only access them with my support, therefore these provided no respite for either of us.
No longer has social interaction with friends. Has less mental and physical stimulation while at home due to less facilities and equipment available
No practical help or support offered actions not words apply
Not being able to see the people she's built up a rapport with
Nothing has been offered to her. She would need help especially to do on line activities
nothing was offered remotely, only received zoom calls a month ago to ask how we have been coping
Only offered walks in local area. Already doing more than this anyway and if carer is supporting several people possibility of disease transmission
Poor communication methods (no BSL video) no one from services checking on any progress of client, just left in isolation

Learning Disability Engagement Survey findings

Reduced access to friends
{Name} could not leave his room only for essential shopping once per week. Exercise outside was limited and the community room was closed to the residents. Coffee shops, libraries were closed
Simply less services available and more isolation forced on people
{Name} was sometimes going for a meal but cannot go now as it is not open
stuck at home with parents - no proper community connections prior to covid - so now even harder to break free into community life
The young person doesn't use day services he had a PA until sept but didn't work out, so its just my son and myself
Unable to live normal life
Virtual events are not suitable for people with autism
Wishes the covid go away and to start life back
Neither negative nor positive experience
{Name}'s activities have reduced and he is limited on what he can do. Activities in the house have increased {Name} takes part in these. {Name} loves his walking
Don't have to get up early to go - they don't like getting up. A bit bored, but this passed the longer lockdown went on. Promised activity pack that never turned up. Slightly irritated by phone calls every week, appreciated the gesture but it was unnecessary - for us at least
Have not required the services
He decided some time ago that he preferred to stay at home and not go out at all - or only when it's essential, for instance to do banking, or see a GP, so the lockdown and other restrictions appear not to have affected him too much. He does not like to see people wearing masks, however, and would probably refuse to use one himself.
{Name} does not access services or activities
is unable to understand what is happening during the covid emergency
{Name} has been happy so we have not had to use this service
The person has accepted any restrictions like mask or distance very well
The rules are sometimes vague in the interpretation and not enough done to see a relative inside a safe room. What happens in winter - vulnerable people can't come outside and staff can't tell relatives to stay away either.
This is because we don't know what is going to happen today or tomorrow
Positive experience
It does not appear to have caused a problem, but my son is Residential in Shropshire so has, as far as I am aware at present any contact with anybody from Telford and Wrekin although he is a past Telford and Wrekin Resident and funded by you.
It has worked, our little bubble. Thank you T&W. Our carers have been marvellous
{Name} has been able to get out with his carers but it is a more streamlined week as many things he enjoyed still can't be accessed easily
My daughter has been able to go out with support, so she is still continuing with activities
Online meetings has continued to keep her busy and give her a reason to still get out of bed and have a routine
Telephone consultations were easy to support service user
Try to keep clients safe visiting has been allowed in the garden

Q44: How do you think things can be done differently?

about the person and what life they want - listen and act early preventative approach up front - in all areas of persons life-set on a path that is grounded in healthy choices, positive mental approach to life and expectations can do attitude, support only where needed and only paid support to fill any gaps once everything else has been looked at
Access to information by phone has needed improvement, long wait times.
Better communication for people with disabilities and mental health problems. An easy read illustrated document and published for all agencies. The wellbeing call set out in {Name}'s care support plan should be implemented now. This would be a positive help to him
Difficult. We would hope for at least one fully supervised day for respite and to attend to essential jobs.
Do not proceed with restrictions
Don't think there is much that can be done at the moment
Don't just hang people out to dry whilst ticking your boxes
Don't put us in lockdown
Give practical help and a support worker
Go back to how things were: ie day centres being open again
His care team seem to have managed things very well, under the circumstances.

Learning Disability Engagement Survey findings

I believe efforts should be being made to reopen the day centres -smaller groups, attending in a rota, outside activities, mask/PPE wearing. Twigs could be operational with different transport arrangements and small groups. The more medically vulnerable customers could continue to access online resources if appropriate. At present we are expecting my son, who is autistic and craves routine, to do different activities every day in different venues. I felt that the weekly phone calls made throughout the lock down were simply ticking boxes, not actually to listen to the concerns we had. Promises were made for staff phone calls and walks with friends to be organised, thankfully I did not tell my son about these as none of them happened. I think communication has been poor, it would be sensible to have had a designated contact person, time and day not randomly timed calls. As a carer I feel that, except for the social worker, my opinion is not considered to be important. The Carer's Centre has telephoned me once, in April, and I have had no contact from them since despite being a registered carer.
I don't get paid to come up with ideas. But just some consideration for home carers! We were not recognised for priority shopping, NHS workers flashed a badge... what did we get? Apart from challenging by supermarket staff every time we tried to enter at times which were designated for elderly or key workers!
I don't think much can be done now until all this is over
I really do not know. All I know is I have a son who at present hasno mental health help and no life!
Its an unknown quantity, the pandemic. I think T&W have handled it well so far
More contact in appropriate BSL language from service to check on progress or if help is needed or services available
More support for the families that have to work when they have to look after someone at home
Much more contact with {Name} from people in authority to check she is coping and ok
Not a lot can be done to keep everyone safe and to meet everyone's specific needs
Not really sure. More supportive phone calls - just to see if everything's okay or if there are any updates etc
Open up activities to small groups eg disables sport activities
Perhaps some outdoor activities could be arranged
Please if lockdown happens again give them access to priority shopping
Provide secure meeting environment inside a building
Publish sage recommendations as they occur. Ask politicians why they do not follow the science?
Start treating ALD people as schools etc open ip day centres
Supply person to take her out to any activities available
The truth about the severity and likelihood of a person dying from flu verses covid 19
To find vaccine so that life starts again
Updating news for guidelines
waiting to be assessed
when Covid is over, everything get back to normal
Would have been nice if the activity pack showed up
Would have been nice to have been given access to resources to help with activities etc

Q45: If the Covid restrictions remain in place and the person you care for/support is not able to go back to the services they attended before, would they be happy to carry on with the activities they are doing now, or would they like to do something else?

Any contact with friends and Staff very much appreciated. Without it, the whole families mental state will suffer
Any work placement except charity shops
Back to the services they attended and to continue with the art session they are doing now
Continue to do the same
Either would be fine for {Name}
Eventually they'd like to do something, but not sure what
Few services available to start with but would like more video contact in BSL from services and Deaf community
Happy to carry on with activities but it depends on how the covid is affecting the area
Happy to continue with the support she gets now with shared lives
Has no choice
He wants a life. There is nothing at home for him to do. He does not have anyone to see. He is living a lonely existence. Things HAVE to change.
He would be very happy to carry on as now, I think.
I think he is happy with the way things are although he misses the Exercise Class, Art and Crafts and Bingo that he used to attend.
I think he would like to go back to the hub at southwood one day
{Name} is able to do things he enjoys with the 1:1 support of a carer, hopefully in the future he can try new things / more volunteering opportunities
Most people who have a learning disability like routine in their life, it is very difficult for them to understand change or the need for it therefore it is important for management and staff to understand this and carry on recognised activities and introduce new ones slowly and with thought.
My son is trying really hard to enjoy his new weekly routine but is missing his friends from the day centres. He enjoys seeing many people and is upset about not being able to see them either at day centres or social clubs.

Learning Disability Engagement Survey findings

No activities currently away from family. Still view it unsafe - second wave. Better for daughter to be safe and not accessing care away care away from family
Not once has social services rung me mother to see how I am coping
Parents need as much support as possible
Person being cared for has accepted new routine and would be happy to carry out these while restrictions are in place
Same as for any of us- have to have some realism- but no it would be awful to continue as it is for many I imagine- need a new 'outdoor' approach now- ie set up some voluntary work in local community to do in small groups of friends and support if needed- ie conservation, start allotments, walking groups, - also need digital skills and access to online - set up chat groups - action and discussion groups about local services feedback to the council etc.
She has not got any activities except TV.
She is not doing anything at moment and had support before as she was doing voluntary work
Some of the activities but new ideas would be needed
Something else we as carers need help and respite from our children. the 3 days a week she accessed day services was great for both of us
Something else. I am so close to just removing him from all services, but i know this is not healthy or realistic but i am anxious every time he goes out without me because i can't control who he comes into contact with!
Strangely they have been able to adapt very well in a way you would not expect for someone within the autistic spectrum and could carry on for a long time doing the same now it has become a routine. This is not to say it is entirely good for them. Being sociable and meeting other people is the whole basis of our society and in the long term it is imperative the aim is to get back to this was of living.
The guys from my options do a great job. A full day of activities would allow us to get work/life done
they appear happy to carry on with activities they are doing now and when covid is over they will try other activities
They could do with more activities to take up more of the day
They need to be able to access activities - as schools are open so should activities for vulnerable adults too.
They would like to do something different
They would like to do something more than they have now. Its not good massive impact totally
They would prefer to go to the Day Centre but there are no suitable options available due to specific needs. We have no choice but to carry on as we are.
This does not apply because of living in a care home and health issues
What activities, due to my medical treatment have had nothing from Telford & Wrekin Social services other than offer to take her for walks in the health review
What choice does she have
Would continue with what there doing now as there is nothing else they can do under these restrictions unless otherwise
Yes {Name} is very happy to go to Mark Taylor Support Group
Yes to carry on
Yes, happy to continue with activities that are in place now. they appear to work for {Name}
Yes, they would be fine