**Training**

1. Provide and monitor the delivery of training for clinical and non-clinical healthcare staff about learning disabilities and autism. The Oliver McGowan Mandatory Training on Learning Disability and Autism should be prioritised as a baseline for all service providers. However, additional training such as guidance on Picture Exchange Communication System (PECS) or Makaton should also be considered if requested by staff or indicated in service user feedback.

**We understand OMG training is being rolled out to NHS providers across SEL. We have requested further information from the ICB and will promote.**

2. Training should take an intersectional approach, acknowledging the overlap between learning disabilities, autism, physical and mental disabilities, as well as health inequalities between people with learning disabilities from ethnic minority backgrounds and those from white ethnic backgrounds.

**The PCN s will support and promote the roll out of available training – this will be through our social prescribers (working in practices) and via member meetings and our bulletin.**

3. Appoint an LDA Champion in each service who has completed or will receive additional training on learning disabilities and autism. The Champion should identify barriers and best practice within their service and represent learning disabilities and autism in patient experience and public participation groups. This could involve establishing a network of Champions across services to promote information-sharing.

**Two Social Prescriber champions are part of the Disability Network that is facilitated by Community Southwark, so this connects to practices and to the services available from the VCSE.**

**Sharing Information**

4. Facilitate or join events about learning disabilities and autism to promote information-sharing across services and sectors, including social care and the voluntary and community sector (VCS). Similar “information day” events should be held for the public in accessible spaces.

**PCN s are connected to, and active members of the LD network. Our PCN teams engage in outreach in the community with partners and will support joint events.**

5. Specialist learning disability and autism services should liaise with mainstream services to share learnings and help implement adjustments. This could be through direct training or learning resources.

**N/A**

6. Implement a centralised system across services to record gaps in provision. For example, if a patient cannot access home visits at their GP, the case could be flagged for the primary care network to refer that patient to another GP within the network.

**The PCN s operate centralised call and recall and also support practices, for example by delivering vaccinations for housebound patients.**

7. Promote and encourage carers to access carer’s support and request a Carer’s Assessment under the Care Act 2014.

**Our social prescribers and clinical staff support carers (for example when conducting health checks and signpost to support**

8. Southwark Council should expand the Local Offer and Southwark Information and Advice Support Team (SIAS) to include services for adults over 25 with learning disabilities and autistic adults.

**N/A**

**Communications**

9. Carry out a self-audit of service information and contact details to ensure they are up to date and accessible to service users both on and offline, in accordance with the five mandatory actions set out in the Accessible Information Standard 2016.

**Our social prescribing team regularly review and update information**

10. Offer multiple methods of communication for patients to contact services e.g. email/website and telephone. Services should avoid using withheld telephone number systems to contact patients.

**Patients are able to access primary care services using a variety of channels. Telephone numbers are not withheld. The PCNs are supporting practices to improve patient access.**

11. Provide information about health promotion initiatives, adjustments, and support such as companion services that are available to service users and carers both online and in hard copies such as leaflets. Liaise with VCS groups to ensure that these resources reach service users and carers, and that resources about VCS support are available at healthcare sites.

**Social Prescriber Champion is now the LD Care co-ordinator in a project supporting practices with the annual health check reviews - looking to extend to outreach and support further.**

12. Establish a standard easy read format to ensure consistency in the appearance of information across documents and services.

**The PCNs have developed an easy-to-read social prescribing leaflet.**

**Operational Issues**

13. Configure services to recognise the overlap between learning disabilities and autism, as well as learning disabilities and physical disabilities. This could involve a duty for providers to collaborate on an individual’s care and share interventions across services.

**N/A (commissioner focus)**

14. Register with NHS England for connection to the DAPB4019: Reasonable Adjustments Digital Flag asset to ensure that reasonable adjustments are known across services in line with the Equality Act 2010.

**PCN s will promote to practices.**

15. Improve staff continuity and handovers to streamline referrals. Staff should be encouraged to read case notes ahead of appointments to ensure that adjustments are made.

**Team members receive structured supervision and training development. In addition, regular audits are conducted to support quality improvement – including the quality and utilisation of case notes.**

16. Conduct an NHS Equality Delivery System (EDS2) review of areas that are utilised by patients, where service users, carers, and VCS groups can review and recommend improvements.

**The PCN s would be pleased to contribute to this – which is required at a system level.**

17. Provide suitable patient environments that are accessible to people with physical disabilities and reduce the impact of sensory sensitivities, e.g. a quiet waiting area. Home visits and visits to day centres should be facilitated where possible to reduce disruption to routine.

**The PCN s represent practices at the local estates forum which includes the prioritisation of estate improvement to improve the patient environment.**

18. Health and adult social care services should collect feedback from service users and carers to evaluate quality against the Accessible Information Standard 2016. This could involve facilitating focus groups, which would serve a double function of preventing social isolation and potentially encouraging more people to access support before crisis point.

**N/A – Council focus**

19. Conduct an equality impact assessment (EIA) to identify disparities and mitigate discrimination for service users, particularly adults with learning disabilities and autistic adults who are from ethnic minority backgrounds. Develop an EIA action plan to improve equality of access while ensuring compliance with duties under the Equality Act 2010

**The PCN s would be pleased to contribute to this – which is required at a system level.**