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lassidd Abstract

Introduction

Having experienced several nationally reported clinical incidents East Kent Hospitals (EKH) developed data that indicated that people with Intellectual Disability (ID) were at greater risk of being admitted via A&E, and repeatedly admitting, compared to the general population.

Health Education England supported EKH to undertake workshops for doctors and other local non-ID specialist professionals on making adjustments for people with ID.

Methods

A team of three experts by experience – including people with ID and family carers- and three ID Nurses were employed to develop and co-facilitate a series of workshops.

Practice Development methods such as Fourth Generation Evaluation were employed and included in the learning outcomes and educational methods.

Results

Nine workshops were held over a two years; 120 participants attended, only 10% had a medical background.

A thematic analysis of participant's data indicated an emerging concept, *preparedness*. Participants wished to be better prepared to make adjustments before the patient's arrival.

Implications

This evaluation is prescient as UK parliament is due to consult on education for all healthcare professionals on ID in light of #Oliverscampaign.

It is recommended that responsibility for ID education resides with service providers, employing local experts, reflecting local data, and be experiential with a work-based project component.

Local informatics systems ought to flag and alert staff of people with learning disabilities using services.