Improving access to primary care for people with learning disabilities

Easy read survey
Improving access to primary care for people with learning disabilities

People with learning disabilities often have more complex health problems and may not always get equal access to healthcare, sometimes because of communication difficulties.

We want your views of our services so that we can improve the service we provide for people with learning disabilities.

Please fill in the following survey to help us improve access to healthcare for people with learning disabilities.
1. Do you find reading and writing hard?
   - Yes
   - No
   - Sometimes

2. Which school did you attend?
   
   [Blank text box]

3. Was this a special educational needs school?
   - Yes
   - No
   - Don’t know
4. Did you go to a special education department?
   - [ ] Yes
   - [ ] No
   - [ ] Don’t know

5. Did you have a support worker in the classroom?
   - [ ] Yes
   - [ ] No
   - [ ] Don’t know

6. What support did you get at school?

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7. When you go to your GP do the staff treat you kindly and listen to you?

☐ Yes
☐ No

8. When going to the GP do you...

☐ Go by yourself
☐ Go with your carer
☐ Both

9. Does the GP speak to you or your carer?

☐ You
☐ Carer
10. **When you go to your GP does he / she ask you how you are feeling?**

☐ Yes

☐ No

11. **Does your GP listen properly to what you are telling him / her, about how you are feeling?**

☐ Yes

☐ No

12. **What makes you think the doctor is not listening properly?**

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13. Do staff at the surgery help you with letters and appointments?

- [ ] Yes
- [ ] No
- [ ] Sometimes

14. How do medical staff make you feel?

- [ ]

15. Do medical people make you feel good about yourself?

- [ ] Yes
- [ ] No
16. Do staff help you make appointments at a time that is helpful to you?

☐ Yes
☐ No
☐ Sometimes

17. How can the staff at your surgery make it easier for you to attend?

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18. How can we improve the service from GP surgeries for you and other people with a learning disability?

Thank you for taking the time to fill in this survey.
Equality Monitoring Form

My postcode is:  

My GP surgery is:  

What gender are you?

- Female
- Male
- Prefer not to say

Transgender - is your gender identity different to the sex you were assumed to be at birth?

- Yes
- No
- Prefer not to say
**Pregnancy and maternity**

- [ ] I am pregnant
- [ ] I have given birth within the last 26 weeks
- [ ] Not applicable
- [ ] Prefer not to say

**What is your age?**

- [ ] Under 16
- [ ] 16 - 25
- [ ] 26 - 35
- [ ] 36 - 45
- [ ] 46 - 55
- [ ] 56 - 65
- [ ] 66 - 75
- [ ] 76 - 85
- [ ] 86 +
- [ ] Prefer not to say

**What is your sexual orientation?**

- [ ] Bisexual (both sexes)
- [ ] Heterosexual (opposite sex)
- [ ] Lesbian / gay woman (same sex)
- [ ] Gay man (same sex)
- [ ] Gay man (same sex)
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Do you consider yourself to have any religion?

- Buddhism
- Christianity
- Hinduism
- Islam
- Judaism
- Sikhism
- No Religion
- Prefer not to say

Other (please say):

What is your ethnic background?

Asian, or Asian British

- Chinese
- Indian
- Pakistani
- Other

Black, or Black British

- African
- Caribbean
- Other
Mixed / multiple Ethnic groups

- Asian and White
- Black African and White
- Black Caribbean and White
- Other

White

- British
- Irish
- Gypsy / Traveller
- Other

Other

- Arab
- Other

If any other ethnic background, please state here:

Prefer not to say
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Do you consider yourself to have a disability? Please tick all that apply.

- Long standing illness or health condition (eg cancer, diabetes)
- Learning disability / difficulty
- Mental Health condition
- Physical or mobility
- Hearing
- Visual
- Prefer not to say

Other (please state here):

Do you look after, or give any help or support to a family member, friend or neighbour because of long term physical disability, mental ill-health or problems related to old age?

- Yes
- No
- Prefer not to say