

# Persona 2 - Adults with Learning Disabilities

USER STORY	USER NEEDS
<ul> <li>Healthy living is important even for us living with long term conditions.</li> <li>Remember about sheltered housing as they are not just for older people.</li> <li>Not sure where to sit or not sit in the health centre.</li> <li>Our independence is taken away as before used to be able to see Dr by myself" My mum had to help me.</li> </ul>	<ul> <li>To have regular health tests done and to have feedback on results.</li> <li>Need better signage in health centres.</li> <li>Healthy living is important even for us living with long term conditions.</li> <li>Patients to be seen as people in social context (holistic).</li> <li>Reliance on support/care staff and/or family/loved ones.</li> </ul>

KEY INSIGHTS

"Got some easy read sent from the LD nurse."

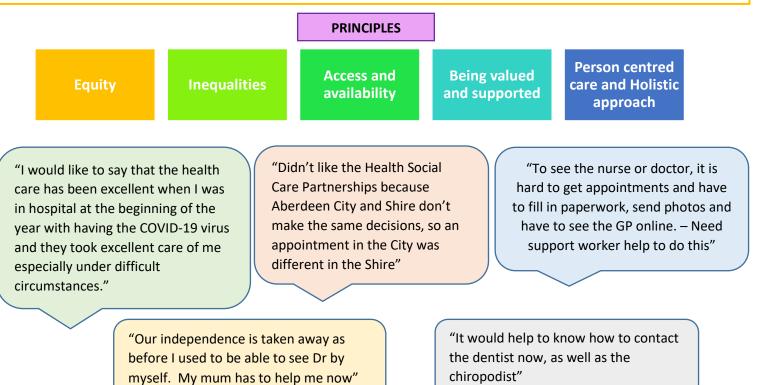
Adults with

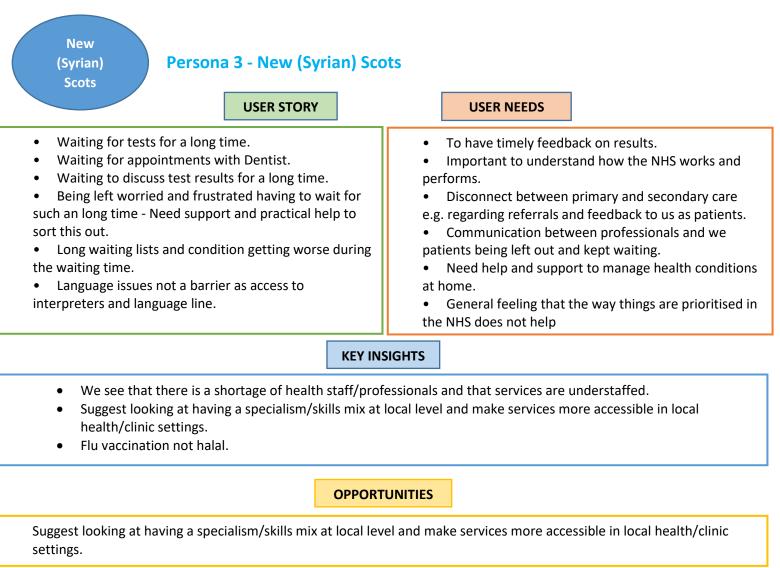
Learning

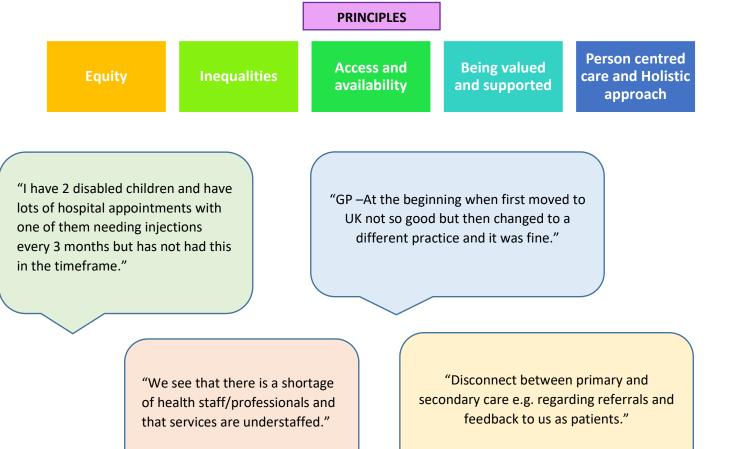
- "When I got bloods taken the lady at the Health Centre explained things well. I got the time and space to process things."
- "Community Learning nurses and support workers...help us to speak using Near Me Video appointments with LD Psychiatrist as they can't visit us just now
- "Getting information on social media community Facebook pages e.g. Mearns Healthy Living for everyone
- Give key messages from health professionals now, especially dental services and AHPs
- Having easy read versions of information about eg NHS Inform
- Link with Public Health Teams and local activities
- Value the role of staff in caring for patients
- Use various means of communication

#### **OPPORTUNITIES**

- Provide key messages from health professionals now, especially dental services and AHPs.
- Have easy read versions of information.
- Address cross boundary issues with HSCPs.
- Use digital communication/technology as well as traditional forms e.g. newsletters.
- Build on and share positive experiences.







### Persona 4 - Carers

USER STORY

• Lack of communication with Carers.

Carers

• Carers with power of attorney and not being involved in any consultations, there has been no communication, no-one will answer the phone.

• A lot of jargon used when being given important information verbally when already stressed and then expected to remember it.

• Carers not being a party to information due to confidentiality issues even though they are the main carer.

• Carers not regarded as a vital element in the delivery of care.

• Many feel these are not new problems, similar was happening 20 odd years ago but not a lot has changed.

• Carers feel that they are like a second NHS providing care and support, especially since the pandemic, and yet are not recognised as such.

- Unpaid carers have difficulty speaking to
- professionals about the person they are caring for.

### USER NEEDS

- Need for honesty and transparency.
- Empower carers to be part of the solution.
- Clearer routes to getting support if you are a carer.Ensure that carers are involved in

discussions/decisions for the person that requires care.

• Need to include unpaid carers in the planning of care and support of their loved ones.

- Advocacy service for carers.
- Coping strategies for carers to support them to carry out their role for as long as possible.

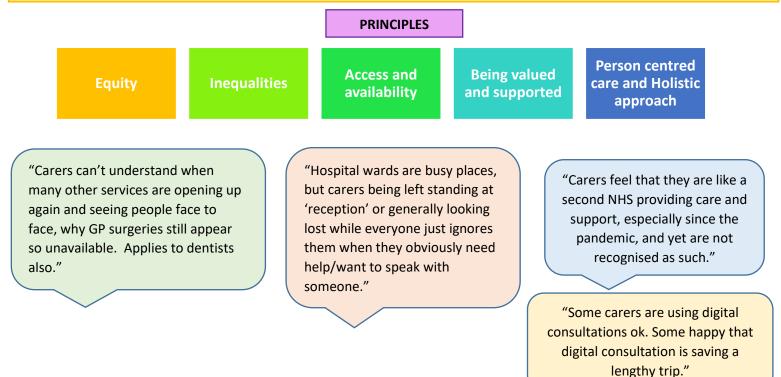
## **KEY INSIGHTS**

• It's still the case that without alternative care arrangements, the only fall-back is the unpaid carer, and many health/social care professionals are inadvertently relying on this.

• Understanding there needs to be formal processes in place for confidentiality but a checklist of all they need to do would be helpful.

### **OPPORTUNITIES**

- Some carers are using digital consultations ok. Some happy that digital consultation is saving a lengthy trip.
- Increase awareness around unpaid carers. Medical students should have training early on to raise awareness.



#### Minority Ethnic Communitie

## Persona 5 - Minority Ethnic Communities

#### USER STORY

- Should feel safe and secure when using health services, but in primary care/General Practice getting a standard and quality of service is difficult across practices.
- Having to go to different specialist and screening services for different parts of the body – not being seen as a whole person (eg cervical and breast screening.
- Not being able to see GP for more than a year affecting mental health and experiencing increased depression. Hard to access any kind of support or help.
- Feeling that being left for small issues to become big issues before anything can be done.
- Lack of face to face appointments making communication more difficult.
- Lack of follow up after treatment/discharge.

#### USER NEEDS

- People feel they are being discriminated and penalised for not being able to read/write and speak English - creates multiple barriers to using e-consult (language, digital technology and inconsistent availability of language line during appointments.
- Appropriate means of communication (e.g., written for those who have better written than spoken English and other ways for those with hearing and sight impairments.
- Clear information and communication about what services are available and how to get them.
- Mental health is commonly considered taboo among Polish and African communities, and this should be considered by health staff to diagnose and support people accordingly.
- Need to be able to assess the mental health of a patient as part of general overall health and not wait for it to become a crisis.

#### **KEY INSIGHTS**

- Solution would be to look at things from a preventative point of view to avoid illnesses becoming so severe.
- Encourage people to be able to use simple technology at home, such as blood pressure monitors and potential of current wearables, such as fit bits etc., to encourage lifestyle change.
- GPs appointments single issue only rather than for those with complex, multiple conditions advice, help, support and treatment becomes fragmented. need to have a whole person approach.
- Having a physical health/illness condition impacts on mental health and this can escalate to mental health problems.
- More information should be translated, particularly where there are high numbers of other nationalities. It was felt that this would have helped in uptake of the Covid-19 vaccine as more people would have understood appointment letters or the benefits of getting the vaccine.
- Support needs to be as person-centred as possible for it to truly help.
- People from ethnic communities who don't speak English feeling socially isolated. Is there scope for employing specific health care staff from different nationalities to support around health in communities?

## **OPPORTUNITIES**

- Unconscious bias and cultural sensitivity training for health and social care staff would enhance their skills and awareness when dealing with people who have protected characteristics, particularly when these are intersected.
- Story telling of good experiences can help in promoting key messages
- Building a better knowledge and understanding of specific factors such as the underpinning role of culture within groups and communities.



"A lot of bureaucracy - had to get blood pressure taken for contraceptive treatment but had to wait for a month for BP to be taken."

"In relation to technology and health, it's important to remember that health shouldn't be 'selfservice' it is still about humanity and care, it's not like going to the shopping mall." "Language support needs to be more readily available and promoted more to enable people to get help with communicating with health and social care services and staff. Think too about sensory impaired people."

> "Accessing the Sexual Health Service at the Health Village – while the service is good, you are mostly looked at as body parts rather than a person."