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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.