

# Response to Call for Nurse-Led Research to Investigate Nationally the Impact of Annual Health Checks on Individuals with a Learning Disability

**Easy - Read** 

21<sup>st</sup> February 2025





### **Section A: Application Details**

A1. Details of the organisation and project team





Liverpool John Moores University has received awards for the Nursing courses.

We offer many Nursing programmes and have a strong research portfolio.

We want to improve health care delivery and make sure patients receive excellent, safe and equitable care.

Our team has lots of experience with research and caring for vulnerable patients.

The Team: Julie



Julie is an Adult nurse. She has worked as a lecturer for 20 years.

She leads on teaching nurses to get higher qualifications, called Doctorates.

She has a specialist interest in casestudy research, using focus groups and documentary analysis.

Julie has lots of experience in legal and ethical issues in Nursing. This includes talking about difficult decisions with frail and learning disability patients.











A2. Evidence of experience of carrying out evidence-based research around learning disability and related issues in nursing, including how people with learning disabilities have been engaged in this research



We have lots of experience working with vulnerable people, including people with learning disabilities.

The lived-experience of people with learning disabilities is very important to us, and will be at the centre of our research.

We have connections through the University with local services to speak with people with learning disabilities, and their families or carers.

We want to ask local people what they think of the Annual Health Checks.

What we find in the research we do leads to big changes on service design and delivery.

We want to make healthcare better for people with learning disabilities.

We believe this must be done by asking people with learning disabilities if it good or bad and what they want from the service.



#### A3. Evidence of producing influential reports at a policy or programme design level



Using research, our team has made lots of reports which have changed how services deliver care.

An example is showing evidence as to why more training is needed around selfharm.

The team also have lots of experience working with people and professionals from different backgrounds to talk about change ideas.

They will find out if the change idea will work for the different people involved, including the service-users or patients.





The team have lots of experience with different types of research.

Some research will look at thoughts and opinions of people. This is called Qualitative research.

Some research will look at numbers. This is called Quantitative research.

They collect different types of information to make good decisions about what needs to happen to make the service better,

They can then say how we will know if the service has improved.



A4. Evidence of our understanding the equality, diversity and inclusion issues relating to individuals with a learning disability across the four countries of the UK







We teach Learning Disability Awareness to our Student Nurses.

We use examples of poor care in our teaching, and this includes Mencap, Oliver McGowan and LeDeR findings.

We also talk about the unfair barriers to healthcare and what this can mean to a person with a learning disability.

We know there will difficulties that need to be looked at for Annual Health Checks.

We raise awareness that people with a learning disability have poorer health outcomes than the rest of the population, and this means they might die 23-27 years younger.

Our training also includes local people. They tell their stories about when they received healthcare and what they want the nurses to know.

Alison's last role was to help people be included in their care.

She would prepare them for tests, help them move from child to adult services, and help with Mental Capacity Assessments.



A5. How our research design will aim to include hard-to-reach groups and those who do not easily engage and become involved with research but who remain key stakeholders to this piece of work



We know how important it is for people with Learning Disabilities to have an Annual Health Check.

We have experience in working with hard-to-reach groups and people who are not always included in research.

We want to make sure their voices are heard.

We have a lot of experience working with people who have a disability, and people who have received unfair treatment or judgements.

We use different methods to help find the answers. This includes interviews on their own, or talking as a group.

We have lots of experience in using surveys to collect numbers and tools to measuring how good or bad the outcome is.

The team also use photos, drawings or toys to help with understanding or answering questions.



#### Section B. Project Details B1. Research design methods







Our Aim is to explore the differences in how well Annual Health Checks are completed across all of the UK.

We want to know if people with learning disabilities have had good or bad experiences with this.

#### What we want to do:

- Use people with learning disabilities to help design our research methods, collect information, and what we need to do with what we find out.
- We will use desk-based articles to look at the differences in how the Annual Health Checks are carried out
- We will ask Healthcare Professionals about their experiences in doing Annual Health checks
- We will ask people with Learning Disabilities about their experience of booking and having an Annual Health check appointment.
- We will use the opinions of people involved in the research to suggest improvements for future care.















B4. Dissemination, outcomes and evaluating impact					
<image/>	We will develop a range of findings that will be accessible to different people. This will include an easy-read version of the report We want to present key findings at the Learning Disability and/or Autism National Conference in Manchester We will ask in the future if there have been any changes from the findings.				
B5. Equality, diversity and inclusion					
	We have lots of experience working with people from different backgrounds, and we understand how important it is that people are heard and not judged in a safe space.				
B6. Environmental sustainability					
	<ul> <li>Our project will protect the environment by:</li> <li>using online meetings to avoid travelling (where possible)</li> <li>not printing and using electronic documents (where possible)</li> </ul>				



B7. Risks	
	We have lots of experience in doing research on a big scale across large areas. We know of some possible risks, and we are able to put safety measures in place to prevent these. These are in Appendix 2 on page 17
Project Costs and Resources	
50 C C C C C C C C C C C C C C C C C C C	Our spending is broken down by the activities of the research. This provides information on how much time is spent on an activity. <b>These are in Appendix 3 on page 18</b>



### Appendix 1 - Timescales and Key Performance Indicators

Project GANTT

	2025			2026								
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Inception and Project Management Activities												
Ethics (LIMU & NHS)/design of research materials												
Evaluation / steering group meetings												
Lived Experience Research Meetings												
Desk Based Activities												
Literature review: Health Checks and LD												
Desk Based Review of Health Checks												
Survey: Nurse and other HP experiences			_									
Survey design												
Survey dissemination												
Analysis												
Qualitative Insight Research with HPs												
Recruitment												
Interviews and focus groups												
Transcription and analysis												
Qualitative Insight Research with people with LD						_						
Recruitment												
Interviews and focus groups (and other)												
Transcription and analysis												
Participatory workshop												_
Organisation and delivery												
Workshop to develop recommendations												
Analysis and Reporting												
Triangulation of analysis												
Report writing												
Dissemination												



### Key Performance Indicators

Key Performance Indicators	Date			
<ul> <li>NHS and LJMU Ethical Approval obtained         <ul> <li>LJMU meeting date submission deadline</li> <li>NHS Ethics response within 60 days of submission</li> </ul> </li> </ul>	<ul> <li>23<sup>rd</sup> April 2025</li> <li>Approvals obtained by August 2025</li> </ul>			
• Lived Experience Researchers recruited (may change throughout the project)	Initial meeting to be held May 2025			
Research steering group to be established	• April 2025			
• Survey to be distributed to key gatekeepers, for online snowballing	August-September 2025			
• 10 x Healthcare Professionals to be recruited to interviews/focus groups	December 2025			
• 10 x people with learning disabilities to be recruited to interviews/focus groups	December 2025			
Invitations to be distributed for online participatory workshop	December 2025			
• Lived experience analysis meetings to be held to interpret findings (preliminary and final)	<ul><li>November 2025</li><li>February 2026</li></ul>			
Participatory workshop to be held and recommendations developed	February 2026			



## Appendix 2 - Risks

Risk	Risk level	Example actions to mitigate risk				
Unable to recruit Healthcare Professionals to participate in surveys/insight work.	Medium	<ol> <li>All relevant partners provided with a summary of the research, using existing contacts with organisations to support us in our recruitment.</li> </ol>				
		<ol> <li>Steering group informed of research progress and barriers to research delivery – providing support as required.</li> </ol>				
Unable to recruit people to take part in our Lived Experience Research Group	Medium	<ol> <li>Engage with all organisations with whom we have existing relationships to support with our recruitment.</li> </ol>				
		2. Ensure we provide appropriate remuneration for the research members.				
Unable to recruit people with learning disabilities to our research	Medium	<ol> <li>All relevant partners provided with a summary of the research, using existing contacts with organisations to support us in our recruitment.</li> </ol>				
		<ol> <li>Steering group informed of research progress and barriers to research delivery – providing support as required.</li> </ol>				
Change in research team due to sickness, unexpected leave or change in employment	Low	<ol> <li>NAP/LJMU have robust internal project management processes to identify potential risks to externally funded projects.</li> </ol>				
		<ol> <li>NAP have a wide research and evaluation team, and collaborate with wider LJMU staff who work on similar subjects, provide a pool of resources as when required.</li> </ol>				



## Appendix 3 – Project Costs and Resources

Item	Cost £	Explanatory Note	Funded By
Project	£2244.53	Total of 8 days	RCN Foundation
inception/management		costed across the	
activities		research team.	
Desk Based Activities	£3086.229	Total of 11 days	RCN Foundation
		costed across the	
		research team.	
Survey: Nurse and other	£3927.928	Total of 14 days	RCN Foundation
Healthcare Professional		costed across the	
experiences		research team.	
Qualitative Insight	£4068.211	Total of 14.5 days	RCN Foundation
Research with		costed across the	
Healthcare Professionals		research team.	
Qualitative Insight	£4068.211	Total of 14.5 days	RCN Foundation
Research with people		costed across the	
with learning disabilities		research team.	
Participatory workshop	£2945.946	Total of 10.5 days	RCN Foundation
		costed across the	
		research team.	
Analysis and Reporting	£7014.156	Total of 25 days	RCN Foundation
		costed across the	
		research team.	
Lived Experience	£1500	£75 per half day x 4	RCN Foundation
Research Group		meetings per year =	
Payment		£300	
		4 lived experience	
		researchers per	
		meeting = £1200	
Voucher payment for	£200	£20 voucher as	RCN Foundation
participation in		thank you for time	
interviews (people with		(total x 10	
learning disabilities)		participants = £200)	
Travel to face-to-face	£300		RCN Foundation
interviews	Tatal agat:	Total researcher	
	Total cost:	Total researcher	
	29,355.21	days on the project:	
		97.5	

