



Do you have a learning disability? We want to hear from you!



The Bamford Action Plan is a plan of the work the Government is doing to make life better for people with a learning disability and people with mental health needs in Northern Ireland.

Here is the website address for the Bamford Action Plan:
<https://www.dhsspsni.gov.uk/sites/default/files/publications/dhssps/bamford-action-plan-2012-15-easy-read.pdf>

Easy
Read

Do you have a learning disability? We want to hear from you!



The DHSSPS (Department of Health, Social Services and Public Safety) wants to hear from people who have a learning disability. We want to know what you say about things like:

- health

- school



- work

- training



We want you to tell us about **what has worked and what hasn't worked** with

- where you live and your house
- the support you get at home
- the treatment you got for your health, school, training, employment, day opportunities and day care in the last 4 years (since 2012).

We will use your stories to help us work out if the things we have done to make services better have changed the lives of people with a learning disability.

Do you have a learning disability? We want to hear from you!



You can print this form. You can fill it in and send to us by post. Or you can fill it in on this PDF and email to the mailbox below.

**Please send your completed forms by
14 MARCH 2016 to:**

Mental Health Unit, Room D1, Castle Buildings,
Stormont Estate,
Belfast, BT4 3SQ

Tel: 028 9052 2238

E-mail: Bamford@dhsspsni.gov.uk

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About you

Please tick the box that describes you:



Gender	Male	<input type="checkbox"/>
	Female	<input type="checkbox"/>
What age are you?	Under 18	<input type="checkbox"/>
	18-24	<input type="checkbox"/>
	25-44	<input type="checkbox"/>
	45-64	<input type="checkbox"/>
	Over 65	<input type="checkbox"/>
Your postcode - just the first part, for example BT14		
What HSC Trust are you in?	Belfast	<input type="checkbox"/>
	Northern	<input type="checkbox"/>
	South Eastern	<input type="checkbox"/>
	Southern	<input type="checkbox"/>
	Western	<input type="checkbox"/>

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Health and Social Care Services

Finding information

1. Can you easily find information about learning disability services?

Yes No

If you want to, please tell us more:



Physical health

2. Did you know that you can have a check up with your doctor every year to make sure you are in good health?

Yes No

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Physical health



3. Do you have a check up with your doctor every year?

Yes No

If you ticked no, please tell us why:



4. Have check-ups with your doctor made your health better?

Yes No

If you want to, please tell us more:

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Dental checks

5. Did you know you can have a dental check every year?

Yes No

6. Have you had a dental check in the last year?

Yes No

If you ticked no, please tell us why:

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Being in hospital

7. Have you been in hospital in the last 4 years?

Yes No

If you ticked yes, please tell us which part of the hospital you went to:

A&E

Inpatient

Outpatients

Other

If you ticked no, go to question 13

8. Do you think the doctors and nurses looked after you well in hospital?

Yes No

9. Did people show you where things were in hospital, like the toilets, shop, cafe, telephone?

Yes No

10. Did the doctors and nurses talk to you in a way you could understand?

Yes No

11. Did they listen to you?

Yes No

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12. Did they answer all of the questions you asked?

Yes No

If you want to, please tell us more:

Care of people with a learning disability in a criminal justice / police / prison setting



13. Have you ever been in trouble with the police?

Yes No

If you ticked no, go to question 16

14. If you have been in trouble with the police, did you get help to understand what would happen?

Yes No

If you want to, please tell us more:



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Care of people with a learning disability in a criminal justice / police / prison setting



15. If you have been in trouble with the police, did you get help with your behaviour?

Yes No

If you ticked yes, was the help:

Useful Not useful

If you want to, please tell us why:



Short breaks and respite

16. Do you go to respite?

Yes No

If you ticked yes, do you enjoy your time at respite?

Yes No

Please tell us more about why you like it or don't like it:



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17. Does anyone else support you who is not your parent or carer?

Yes No

If you ticked yes, please tell us more about what they do. Do they take you out? What kind of things do they do? (For example, shopping, cinema, other activities):

Services for people with a learning disability after you leave school (adults only)

18. Do you take part in any of the activities below, which are also known as day opportunities?

Yes No

Please tick all that you attend:

- Work
- Training
- Further education
- Volunteering
- Sports
- Arts / Drama
- Day Centre
- Other

Please tell us what this is:



Day Centre

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Services for people with a learning disability after you leave school (adults only)

19. Do you think day opportunities have got better or worse?

Better Worse

Better or worse in what way? If you want to, please tell us more:



Jobs and training (adults only)

20. Have you done any training or further education courses in the last 4 years?

Yes No

If you ticked yes, please tell us what course(s) you took:



Training Room

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21. Have you had a job in the last 4 years?

Yes No

If you ticked no, please go to question 25

22. Did you get help to get your job?

Yes No

If you ticked yes, please tell us what help you got:

23. If you have a job, do you get help in your job?

Yes No

If you ticked yes, please tell us what help you get:

Do you have a learning disability? We want to hear from you!

Jobs and training (adults only)



24. Do you have transport to help you get to a training course or to your job?

Yes No

If you ticked yes, please tell us what type of transport and support you get:

If you ticked no, please tell us what type of transport you need to help you to go to work:

If you want to, please tell us more about jobs and training:



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Benefits

25. Did you know that you can get help to make sure you are getting all the benefits you should be getting?

Yes No

26. Have you had help to make sure you get all the benefits you should be getting? (This can be done by Benefits Advisers by phone or in a meeting)

Yes No

If you ticked no, please tell us why you have not had help:

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Housing / resettlement (adults only)



27. Where do you live?

In the family home

In your own home (independently)

In a support living setting
(semi-independently)

In a residential unit

In a hospital

Other

Please tell us what this is:



28. Have you moved from living in a hospital
to a community setting in the last 4
years?

Yes No

If you ticked yes, please tell us how has your
life changed since you moved out of hospital?

My life is better now

My life is just the same

My life is worse now



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29. Do you get the help and support you need to live in the community?

Yes No

If you want to, please tell us more:



30. Do you have a choice about where you live and who you live with?

Yes No

If you ticked no, please tell us why you have no choice:

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Housing / resettlement (adults only)



31. Does your home meet your needs?

Yes No

If you want to, please tell us more:

Getting involved



32. Is it easy for you to get involved in things that help to change services that you use?

Yes No Not sure

If you want to, please tell us more:

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**Thank you for taking the time to
complete this form.**

**The answers you gave will
be kept secret.**

**If you wish to receive a copy of the
Bamford evaluation when it is finished,
please include your name, address and
email below.**

Find out more

Write to us at

DHSSPS

**Mental Health, Disability and
Older Peoples Directorate**

**Room D2.17
Castle Buildings
Stormont
Belfast
BT4 3SQ**

Phone us on

028 90522020

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