



Position Statement

Mitigating inequalities in the implementation and roll out COVID-19 vaccinations

Scottish Commission for People with Learning Disabilities

February 2021



SCLD issued a statement outlining the human rights case for prioritising people with learning/intellectual disabilities within the roll out of the Covid-19 vaccinations in December 2020. This paper noted that people with learning/intellectual disabilities die on average 20 years earlier than the general population and that respiratory disorders are the leading cause of death. This further statement outlines our concerns regarding possible inequalities in the ongoing and future roll-out of the vaccination programme.

It is important to note that JCVI recommendations were informed by an [Annex paper](#) on 'COVID-19 vaccine and health inequalities: considerations for prioritisation and implementation.' This health inequalities paper notes that local implementation should seek to "reduce inequalities in the implementation of the COVID-19 immunisation programme."

However, following dialogue with people with learning/intellectual disabilities and their supporters, we have become aware of the following issues.

People with learning/intellectual disabilities who live in care homes have not been prioritised for vaccinations if those care homes are not specifically for older adults.

As well as this, in the current JCVI priority list, people with learning/intellectual disabilities are included either in Priority Group 4 (adults with Down's Syndrome) or in Priority Group 6 (severe and profound learning disability). It is our understanding that letters issued to individuals within these two priority groups are being generated by identifying individuals from GP records. However, we have significant concerns that data held within GP records are not as accurate and up to date as they should be for this purpose.

Furthermore, as we understand it, GP records do not straightforwardly reflect the JCVI description of "severe and profound learning disability". This means that people with learning/intellectual disabilities

may be overlooked for a vaccination they have been prioritised for because their health conditions have not been accurately recorded.

We are also aware of multiple accounts of people with learning/intellectual disabilities and their carers who have not been able to discuss these issues with their GP Practice. We appreciate that these discussions reflect the extraordinary demands being placed upon staff members working within Primary Care settings however, we have concerns that there is a possible lack of understanding of the important role GP records have in the wider vaccination roll-out. This situation is also specifically at odds with the JCVI paper on inequalities that identifies “easy GP registration to get on the eligible list” as a specific mitigating factor.

All of these concerns are set in a broader context of existing health inequalities for people with learning/intellectual disabilities which could potentially hinder take up of the vaccinations when they are offered. For example, some individuals with learning/intellectual disabilities could have significant communication needs to fully understand what is being offered to them, whilst others will be extremely anxious about receiving their vaccine. SCLD believes that having the vaccination in a familiar community setting with a known supporter present could help to alleviate some of these fears and concerns.

Recognising these challenges, SCLD believes that some urgent actions should be taken to mitigate the potential inequalities faced by people with learning/intellectual disabilities:

- All individuals with a learning/intellectual disability should be included, at minimum, in Priority Group 6 of the Phase 1 roll out. This would ensure as many priority individuals as identified by the JCVI as possible are included, whilst minimising reliance on GP record systems. This should also minimise any additional workload on already stretched GPs trying to identify/confirm the severity of a person’s learning disability.

- People with learning/intellectual disabilities and their supporters should be given clear, accessible instructions on how to ensure the records/additional data sources that are being used for the vaccination roll-out are accurate and up to date.
- People with learning/intellectual disabilities should be given clear, accessible information on what to do if they believe they have not received a letter inviting them for a vaccination when they should have.
- Staff working in primary care settings should be supported in understanding the exceptional needs of people with learning/intellectual disabilities and the importance that GP records have in identifying individuals in the vaccination roll out.
- Information being given on the NHS Patient Portal and on the National Helpline must be accessible to people with learning/intellectual disabilities.
- People with learning/intellectual disabilities should be able to have their vaccination in their GP practice, their home or in another community setting. They should be able to have a supporter present who should be offered a vaccination at the same appointment.

SCLD recognises the quite extraordinary challenge being undertaken during the COVID 19 vaccination roll out. However, it is essential that the needs of people with learning/intellectual disabilities are met.

Furthermore, we believe these considerations are entirely in keeping with recommendations of the JCVI paper on health inequalities.

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