



## **Vaccines for people with learning disabilities**

### **Position statement/expert advice from the Learning Disability Professional Senate**

People with learning disabilities continue to die younger than the rest of the population, typically dying between the ages of 55 and 64. This means that in an age based system of vaccine planning, where vaccinating the over 80's has been a key priority, people with learning disabilities are clearly disadvantaged. As attempts to target the next groups for priority vaccines are made, the Learning Disability Senate would like to highlight the key issues for people with learning disabilities and support a more needs led and inclusive approach to vaccine planning.

The Office for National Statistics (ONS) has recently highlighted in their analysis of deaths from Covid 19 that people with learning disabilities were 3.7 times more likely to die and the latest Public Health England report found this to be 3.6 times higher. In identifying people with learning disabilities, the ONS did not separate out by definition (mild/moderate/severe/profound) people who died, recognising the vulnerability of all people with learning disabilities to this disease.

People with learning disabilities have clearly been identified as being at greater risk of dying than the general population from Covid 19 regardless of the level of learning disability they have. The JCVI has identified that people with a severe/profound learning disability should be invited for vaccination in priority group 6. Identifying people with learning disabilities in this way is going to be very difficult. Primary care coding is not consistent and is insensitive to the level of learning disability a person has. There is a great likelihood that many people with learning disabilities will be missed due to the challenge of knowing the level of learning disability they have.

The Learning Disability Professional Senate believe that inviting all people with a learning disability for the vaccine would mean that there is no further delay in targeting individuals who are more likely to die from Covid 19. Broadening the description of the existing JCVI advice will be of benefit in reducing the confusion and prioritising the vulnerable, it is likely that this may result in some inclusion of individuals outside of the defined severe/profound learning disability group. Making the decision to be more inclusive would be a very positive and potentially life-saving step towards recognising the vulnerability and disproportionate inequality people with learning disabilities continue to face in health care.

We welcome the inclusion of the main carer of people with learning disabilities, whose welfare would be at risk if the carer contracted Covid -19 in category 6 and see this as an important acknowledgement of the needs of this vulnerable group.

It is important to recognise the legal responsibility for all organisations to make reasonable adjustments under the Equality Act (2010), and that may mean for some people with a learning disability it could be appropriate to have their vaccine at home (similar to the housebound group). This could mean a smoother, more calm and positive experience for people with their familiar surroundings and supports around them.

People with learning disabilities have highlighted their own anxiety and fear throughout the Covid 19 pandemic and response, often reporting feeling disregarded and disadvantaged, evidence tells us that health inequalities have been further exacerbated through new ways of working and poor communication. Prioritising people with learning disabilities for the vaccine now would evidence that there is a recognition of the challenges for people with learning disabilities and a desire to impact on them.

**Professor Ashok Roy and Dr Karen Dodd**  
**Co-Chairs – Learning Disability Professional Senate**