Suffolk Joint Learning Disability Strategy Refresh 2021

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Forward From Georgia Chimbani, Director of Adult and Community Services

The refresh of this strategy maintains our commitments to work together, with partners across Suffolk, to work in new and different ways to ensure that people with learning disabilities live good lives as part of their community with the right support.

The recent and ongoing pressures caused by the Coronavirus pandemic, have highlighted again that it is often the most vulnerable in society who are likely to suffer most from these kinds of large impact events. It is also true, however, that the pandemic has brought forward opportunities within communities themselves for new ways of working, the use of new and emerging technology and heightened the awareness of the good that communities can do for each other. This Strategy sets out how we will look to continue this shift and make the most of the benefits of engaged and supportive communities.

The refresh of this strategy has maintained the same approach taken when it was first published in 2015, engaging closely with people and families and those who support them. A clear message from the co-production events is that people believe the original vision of this strategy, that with good effective support people want to live ordinary lives within their local communities, is still correct and right for them. We also heard new themes emerging around:

1. Using new technology and digital solutions to enhance accessibility.
2. More opportunities for effective co-production.
3. Improving and increasing information and communication.
4. Providing good advocacy and support.

In response to these themes and to continue our work together on addressing them, there will be four focus groups that will operate under the Learning Disabilities Partnership Board, these are My Home, My Health, My Voice and My Life.

This refresh comes at a unique moment for us all. Whilst the pandemic has taken so much from us, it has also given us all the chance to re-examine our own use of technology, look again at our daily routines, re-imagine our hopes and look again at our roles at home, at work and in our wider community. This opportunity should be open to everyone. This refreshed Strategy will continue to look to support people with learning disabilities succeed when making their own choices in a new post pandemic world, both as individuals and as a central and valued part of the communities in which they live.

Georgia Chimbani (Director for Adult and Community Services)

Introduction and Background to the Learning Disability Strategy Refresh

October 2018
Strategy Refresh at Landmark House to look at what was working and what wasn't working

October 2019
Session on Strategy Refresh at the Learning Disability Partnership Board

September 2020
First Strategy Refresh co-production event held on Zoom

November 2020
Second Strategy Refresh co-production event held on Zoom

Suffolk Adult and Community Services worked with people from across Suffolk to co-produce the Suffolk Joint Learning Disability Strategy Refresh for 2021.

The co-production events were facilitated by Ace Anglia who worked in co-production with the wider Suffolk Learning Disability Partnership consisting of family members, self-advocates, provider representatives, Adult Social Care and Health colleagues.

As this was a refresh and not a rewrite we asked, "What should stay the same?" and "What needs to change?" It was agreed that we have a solid foundation to start from and that many parts of the previous strategy are still relevant.

Two events were held in physical settings and due to the COVID Pandemic the next three events were hosted online. Approximately 300 people attended the events, we also invited people to share or comment via email, telephone, or social media.

Listening with integrity and working to reflect the voices of many, requires a delicate balance between what people want and need and the challenges faced in the current environment. The Strategy Refresh does not shy away from this challenge.

Thank you to every one of the people who contributed to creating the Strategy Refresh.

Together you have created a vision for the future.

Now, working together we must all face the challenges and deliver the vision.

The Vision and Test

It was agreed by all that the vision and test still apply, and they are a useful tool for facilitating conversations and supporting or enabling change.

What people said.

"Vision is good – although some people felt that it's not been recognised."

"Policy meetings and behaviour were much better behaved because they were being driven by the strategy."

"The Vision connects people."

"The vision provides a strong strategic discipline."

The Vision

People with learning disabilities live good lives as part of their community, with the right support, at the right time, from the right people.

The Test

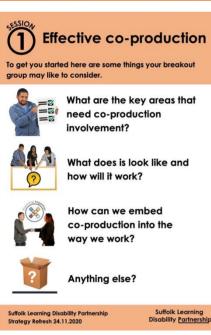**Does this decision take us closer to or further away from our vision?**

What we talked about at
The Strategy Refresh co-production events

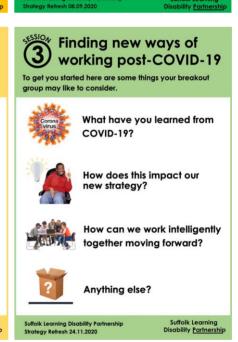## Each session looked at 2 different areas from the previous strategy.

Session 1: The Vision

"People with learning disabilities live good lives as part of their community, with the right support, at the right time, from the right people"

To get you started here are some things your breakout group may like to consider.

2020 — The relevance of the vision now

What worked and what didn't work

What needs to be included in the strategy?

The strategy audience

Anything else?

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Strategy Refresh 08.09.2020

Suffolk Learning Disability Partnership

Session 2: Your Voice

To get you started here are some things your breakout group may like to consider.

Sharing your voice

Equal opportunity to contribute

Co-production

Resources

Supporting individuals to take part

Funding for strategy co-production

How to achieve

Anything else?

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Session 3: The Future

This session is for reflecting and learning from this year and how the strategy can support change in people's lives going forward.

To get you started here are some things your breakout group may like to consider.

Lessons from Covid-19

Digital poverty

Adapting the strategy to change or crisis

Anything that could be added or supported

Responsibility and accountability to implement the strategy

Anything else?

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Strategy Refresh 08.09.2020

Suffolk Learning Disability Partnership

SESSION 1 — Effective co-production

To get you started here are some things your breakout group may like to consider.

What are the key areas that need co-production involvement?

What does is look like and how will it work?

How can we embed co-production into the way we work?

Anything else?

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Strategy Refresh 24.11.2020

Suffolk Learning Disability Partnership

SESSION 2 — What would you like to see the strategy doing?

To get you started here are some things your breakout group may like to consider.

What is the activity?

Who leads activity?

How do we encourage more organisations to become involved?

Anything else?

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Strategy Refresh 24.11.2020

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SESSION 3 — Finding new ways of working post-COVID-19

To get you started here are some things your breakout group may like to consider.

What have you learned from COVID-19?

How does this impact our new strategy?

How can we work intelligently together moving forward?

Anything else?

Suffolk Learning Disability Partnership
Strategy Refresh 24.11.2020

Suffolk Learning Disability Partnership

Key areas of the Strategy Refresh

Vision and test still relevant (Should we rebrand? More visible and usable)	**Reviews**
Strapline still relevant	**Manageable project work for social care and health**
Co-production	**Employment opportunities/ support**
Strategy governance/ accountability (who/how?)	**Workforce/ training/ support/ skill**
Communication	**Learning Disability Partnership Board role?**
Technology/ digital offer	**Wider partnership opportunities**
Housing	**Marketing opportunities** (social media – websites)
Celebrate success	**Work together**
Advocacy	**Good support**
Being safe	**Young People**
Families need to be more included	

What drives our strategy?

People with learning disabilities and/or autism and their families have a lot of rights in law or government policy:

Human Rights law

The Equalities Act

The NHS Constitution

The Mental Health Act

The Care Act

The Mental Capacity Act

The UN Convention on the Rights of Persons with Disabilities

Accessible Information Standard

The Children and Families Act 2014'

Governance, Aims and Responsibility

What people said at the strategy refresh co-production events.

"Making sure the strategy is clear. People should be able to sign up because it's clear."

"How do we ensure that the strategy is embedded into service specs and contracts?"

"I'd like to see the partnership doing an outcome group, but there is also a campaigning element needed and together we could have a collective voice."

"We need a feedback mechanism; how can we understand if the vision is working."

"There was a problem with communication. There isn't a way of ensuring people are adhering to the strategy."

"Where is the accountability?"

"The strategy underserved people with profound disabilities."

"Meetings were managed by the simplicity of the vision. Policy meetings and behaviour were much better behaved because they were being driven by the strategy."

"We need new people involved."

"We need practical actions and next Steps."

"We need to start doing it and not just writing things down."

"We need to use the test more."

"We need to record what's working and what's not working."

"There's not enough services to support people at the right time. We need more of variety of services."

"The strategy needs refreshing every three years."

"What is our accountability?"

Governance

The Suffolk Health and Wellbeing Board was established in accordance with the Health and Social Care Act 2012.

The Board has a duty to "encourage integrated working" between health, care, police and other public services in order to improve wellbeing outcomes for Suffolk.

The first Joint Health and Wellbeing Strategy was approved in 2013. It was refreshed in 2016 and again in 2019.

The Vision for the Board is:

People in Suffolk live healthier, happier lives. We also want to narrow the difference in healthy life expectancy between those living in our most deprived communities and those who are more affluent through greater improvements in more disadvantaged communities'.

The bodies represented on the Suffolk Health and Wellbeing Board include:

1. Suffolk County Council.
2. Local clinical commissioning groups (CCGs).
3. NHS England.
4. Healthwatch Suffolk.
5. The police.
6. The voluntary sector.
7. District and borough councils.

The work of the Health and Well Being Board has oversight of a number of workstreams including The Learning Disabilities and Autism Programme Board.

The Suffolk Learning Disabilities Partnership Board and the developing Suffolk Boards including the development of the All-Age Autism Strategy have a number of work areas that feed into the the Learning Disabilities and Autism Programme Board. The programme board has senior responsible officers represented by both social care and health and likewise reports into relevant the corporate oversight boards.

LD & Autism Service Transformation Programme Governance

The current update of the Suffolk Learning Disabilities Needs Assessment Report will feed into the on going work of the Learning Disabilities Partnership Board.

Guiding Principles and Values

1. People are safe.https://suffolksp.org.uk/assets/Suffolk-Safeguarding-Partnership-arrangements-June-2019_.docx

2. People are free to live good ordinary lives whilst having the right support to be safe and well.

3. Support workers are important and feel valued.

4. Co-production is at the very core. We are committed to making sure it is understood by everyone.

5. Good quality information is available to those who want it.

6. We champion and model the changes needed to make the vision a reality.

7. We drive innovation.

8. We work creatively, and we learn together.

9. We have compassion and respect for each other as we work towards the vision.

10. We understand the importance of relationships.

11. People's stories are important and a key tool in helping us all understand and find solutions.

Strategy Aims

1. To listen to people and families and to think about and act upon what is important to them.

2. Enable the vision and use the test to improve understanding.

3. To drive the principles of the Joint Suffolk Learning Disability Strategy

4. To have an oversight of the strategy and recommendations and co-produce ways to make them happen.

5. To oversee the use of money that is used to support the Partnership.

6. Support co-production meetings and activity.

7. To promote and develop training opportunities that are led by people with lived experience within workforce development.

8. Form links with education.

9. Look for research opportunities.

10. To form links with and feed into the relevant current and emerging boards in Suffolk and make sure there is a two-way conversation and engagement.

11. Coordinate and oversee project development.

12. Share good practice and stories.

13. Provide good quality information and advice.

14. Maintain, facilitate, and improve the Suffolk Ordinary Lives website.

15. Develop a Communications and Marketing Plan for the Suffolk Learning Disability Partnership Board

16. Facilitate and host the Learning Disability Partnership Board meetings and co-production events.

17. Measure how the strategy is having an impact.

"The strategy is everyone's responsibility".

"We all have a responsibility for the implementation of the strategy."

The wider partnership

It was agreed that we all have a role to play in the implementation of the Suffolk Learning Disability Strategy, these are some of the organisations or individuals who form the wider Learning Disability Partnership in Suffolk.

People or user led organisations

Self- advocacy groups

People with Learning Disabilities and or Autism

Families and Carers - Individuals and organisations

Suffolk County Council

NHS Ipswich & East Suffolk CCG (IESCCG)

West Suffolk CCG (WSCCG)

NHS Norfolk and Waveney CCG

Norfolk and Suffolk NHS Foundation Trust (NSFT)

East Suffolk and North Essex NHS Foundation Trust (ESNEFT)

West Suffolk Hospital

James Paget Hospital

Provider Organisations

Health and Wellbeing Board

University of Suffolk (UOS)

Support workers

People and organisations who are passionate about improving lives of People with Learning Disabilities.

Housing Providers

Healthwatch Suffolk

LeDeR

 Suffolk Police

Schools and colleges

Children and Young People services

Formal / statutory advocacy organisations

Learning Disability Liaison Nurses

Community interest organisations

Voluntary sector organisations

Anyone who has an interest in improving the lives of people with learning disabilities is welcome to work with us.

The key themes from the Strategy refresh events

Effective co-production

Technology and accessibility

Information and communication

Advocacy and good support

The 4 areas provide a solid foundation for our strategy should be embedded in all the work we do.

Effective co-production

What people told us.

"More than a golden thread co-production should drive and lead."

"No co-production is a risk and is possibly based on assumptions".

"Co-production should be a requirement in any service commissioned by Suffolk County Council."

"We need the mechanisms for co-production, we need the resource to co-produce. We need people and we need funding."

"Organisations need to have the capacity to support co-production."

"Co-production is people, carers and professionals working together as equal partners to: design, develop, commission, deliver and Strategic Intentions."

Background information

The co-production of public services has been defined in a variety of ways, for example co-production means developing public services in an equal and reciprocal relationship between professionals, people using services, their families, and their neighbours (New Economics Foundation). Co-production as a method or approach is a very different way of working and can be challenging to implement. However, it can make the system more efficient, more effective, and more responsive to community needs. In line with national Guidance and legislation the Suffolk Clinical Commissioning Groups and Local Authority have committed to co-production as a powerful and successful way of redesigning, developing, and commissioning support and services for all.

Aims

1. Co-production is **USED** and **KNOWN** by everyone.
2. Everything that involves people with a learning disability **MUST** be co-produced from start to finish.
3. Co-production becomes the **ONLY** way of working on policy and programmes throughout social care and health.
4. Co-production **MUST** be used when changes are made and involves everyone affected.

5. Co-production is a cultural shift **NOT** simply an add on or an activity.
6. Listen to all people's voices, including hard to reach people with profound and complex learning disabilities.
7. Accountability is spread between all stakeholders, removing the blame culture.
8. Co-production enhances equality by hearing and valuing everyone's voice. Not just people and families, but also directors, commissioners, practitioners, GPs, and everyone relevant to a conversation. Representatives are used where necessary.
9. Co-production helps and prevents problems and issues arising around policy and day to day activities, such as health equality.   It is very often a key to long term efficiency and prevention of wasted resources.

Please see Appendix for more information about the Accessible Information Standard.

Technology and Accessibility

What people told us.

"The pandemic has highlighted digital inequality for many people."

"Support access to technology for people with learning disabilities and their families."

"Co-produce and provide training for people to use technology."

"Co-produce accessible information about digital service's".

"Co-produce new digital service development."

"We need more digital expertise in the staff team."

"Teach people how to use technology and how to use it themselves."

"Using Alcove and similar systems, do we need to use specialist equipment?"

"Digital poverty is real. How have people been supported not to be vulnerable online, how has this changed in resect months?"

"How can we keep up with rapid changes?"

"Staff need a digital way to do their basic training."

Aims

1. Co-produce a technology plan for people with learning disabilities and families.
2. Co-produce training and support resources for people, families and support staff.
3. Support people and families to access equipment.
4. Co-produce new digital services.
5. Support people to continue to use and develop the skills that they learned in the COVID Pandemic, ensuring that they have equal access and opportunity to live in a digital world.
6. Co-produce opportunities and information that support people and families to develop their IT skills.

Aims

Information and communication

People told us.

"Why after 5 years do people still do not know about this law (Accessible Information Standard)?"

"Why are people not getting information in a way they understand?"

"When its good it makes life better."

"It's important that people know their rights."

"More information for people offline"

"Commission services that meet and implement the 5 steps of the Accessible Information Standard (AIS)."

"It's good to educate people at an earlier age. Educate people to Accessible Information Standard (AIS)".

"Where services are not included in the Accessible Information Standard reference the equality act in contracts."

"Better use of websites and social media to share information and share good practice."

"Develop an information resource for Suffolk that supports people families social care and health to meet the Accessible Information Standard (AIS)."

"Co-produce health and social care services that include options for people that do not use digital technology."

Background Information (Source Care Quality Commission)

All providers of NHS care or other publicly funded adult social care must meet the Accessible Information Standard (AIS).

Accessible Information Standard (AIS) applies to people who use a service and have information or communication needs because of a:

- Disability.
- Impairment.
- Sensory loss.

It covers the needs of people who are deaf/Deaf, blind, or deafblind, or who have a learning disability. This includes interpretation or translation for people whose first language is British Sign Language. It does not cover these needs for other languages.

It can also be used to support people who have aphasia, autism or a mental health condition which affects their ability to communicate.

When appropriate, Accessible Information Standard (AIS) also applies to their carers and parents.

You must meet the Accessible Information Standard (AIS) for anyone who is publicly funded and who uses your services. This applies to all:

adult social care services, hospitals, GP practices, dentists; other services unless no one using the service is publicly funded. Websites are not covered by Accessible Information Standard (AIS). Services which do not need to follow Accessible Information Standard (AIS) must still make reasonable adjustments under the **Equality Act 2010** may wish to use a similar approach when identifying and meeting people's information needs.

Aims

1. Support people, families and staff working in health and social care to have access to current information provided in different ways so that it is accessible to all.
2. Promote the importance and value of lived experience, storytelling and videos in shaping and developing services.
3. Continue to build on the rich body of work produced in the Covid Pandemic and then share information and good practice from self- advocacy organisations nationally.
4. Share information from other local authorities and NHS England.
5. Co-produce a Suffolk Learning Disability Partnership communications plan to ensure that our work is shared locally regionally and nationally.
6. Promote the Accessible Information Standard (AIS).

Please see Appendix for more information about the Accessible Information Standard (AIS).

Advocacy, Self-advocacy and Good Support

What people told us.

"There are lots of different ways of gathering voices."

"I feel it is important that young people have a voice, and we are heard."

"We need lots of different ways of gathering voices. Digital can help people have a voice. Teach people how to use technology and how to use it themselves."

"Quality and the training of support workers. Do support workers know where to go for support?"

"Digital can help people have a voice."

"We need to be working with people with complex needs and thinking of how we include them."

"Do we understand the legislation that affects people lives? For example, The Mental Capacity Act."

"We need to be celebrating circles of support."

"From an advocacy point of view, the person sometimes wants family involved- families are sometimes appropriate and should be involved. The role of an advocate sometimes gets confused."

"Do we have the resources to make the new ways of supporting people work? Are we recruiting the right people to support people well?"

"It's good to educate people at an early age. Educate people to know their rights." Staff changes. How the messages are translated when there are staff changes."

"Evidence co-production when commissioning new services."

Aims

1. Drive and support the co-production of statutory and professional advocacy services in Suffolk.
2. Drive, support and develop self- advocacy in Suffolk.
3. Create Information about how to access statutory or informal advocacy services in Suffolk, this should be co-produced and accessible.
4. Drive, support and develop people led organisations in Suffolk.
5. Drive, support and develop family carer organisations in Suffolk.
6. Co-produce a platform for support workers to be valued and have a voice.
7. Include support workers in co-production, service development and training.
8. Co-produce and deliver training for support staff and provider organisations.
9. Develop further opportunities for Peer Education in Suffolk.
10. Include people with lived experience in the delivery and co-production of training and recruitment of support workers.

Key Priorities and Recommendations

What would you like to see the Suffolk Joint Learning Disability Strategy doing?

People told us.

"The partnership and the strategy need to be project-based. What can we start doing with the resource we all have?"

"Let's turn it into projects. We need to make it clear what we're trying to achieve."

"There are pockets of money around to do meaningful projects. We can do a lot with a little bit of money."

"A strategy around being creative - hard to have person-centred approach in supported living with carers coming in and out."

"Focus on employment."

"Housing should be major activity."

"Co-produced a mechanism in parallel with complaints to help support people with LD and Autism."

"Too many workstreams in the old strategy and that it became difficult or that they didn't have the capacity to drive these large pieces of work forward."

"Lots of areas crossover in a good ordinary life."

"Appointments with GP's, hospital admissions. We need to look at how people continue to get good healthcare."

"Housing is still a BIG ISSUE."

"Issues with housing are still happening. People are waiting a long time. It's a very slow process."

"I feel it is really important that young people have a voice and are heard."

How The Suffolk Learning Disability Partnership will operate and develop

People told us "Let's turn it into projects. We need to make it clear what we're trying to achieve."

My Home ... My Health ... My voice ... My life ...

Strategy Focus Groups

Aims

Invite self-advocates, families and carers, provider organisations, board members, key organisations, and wider partnership to an online meeting for **each** strategy focus group to co-produce the following:

1. Develop strategy focus groups under the 4 above headings.

2. Co-produce terms of reference that set out how each group will operate.

3. Co-produce how the groups communicate with one another and with organisations, groups and individuals (better use of technology).

4. Produce quarterly reports to the Suffolk Learning Disability Partnership Board.

5. Showcase and celebrate best practice from each focus group.

6. Identify areas for co-production projects.

7. Identify resources already available or explore funding opportunities for pieces of work if needed.

8. Develop and share a plan for 2021-2022 with the Suffolk Learning Disability Partnership Board.

9. Develop Links with the key groups already influencing/delivering against each focus area, to avoid duplication.

Like the way in which the Health & Wellbeing Strategy operates, each of the focus groups will collate plans and present to the Learning Disabilities Partnership Board. The Board can support the existing work underway and identify gaps in the current approach and what additional action it would like to see over the coming year(s) in relation to those gaps, taking the available resources into account. Wherever possible we will look to build upon existing work, to take advantage of knowledge and expertise, and reduce the risk of duplication. The work of the strategy and the groups will be shared via the Suffolk Ordinary lives website.

The Suffolk Learning Disability Partnership Board

1. Meetings will be held 4 x per year which will be online events via Eventbrite until it is safe to meet otherwise.
2. Extraordinary meetings will be held if required.
3. Board members are invited to contribute to the meeting agendas.
4. There will be a public gallery at each Partnership Board meeting.
5. Provide minutes, documents, events and meetings dates in a variety of formats to view on Partnership Board page on the Suffolk Ordinary Lives website.
6. Arrange a programme for a year in advance so that each of the "focus groups" can report activity, good practice or ask for additional support.
7. The meetings will be 3 hours long and include a comfort break.
8. Use more technology and social media to share information.
9. Co-produce and publish an annual review/ report to check progress and suggest changes.
10. Commitment to sharing information across the system and with the public.
11. Annual celebration event.
12. Links will be made with existing and emerging boards in Suffolk.
13. Suffolk Learning Disability Partnership Board and associated co-production meetings will be facilitated by Ace Anglia.

The Suffolk Ordinary Lives Website and social media development areas

The Suffolk Ordinary Lives Website is facilitated by Ace Anglia.

All activity is co-produced at the Suffolk Ordinary Lives Website Working Group. This group is made up of self -advocates, Board members, family carers and the designers that work developing the content for the website. The working group will oversee the development of new pages to showcase the Suffolk Joint Learning Disability Strategy to include:

The story of the strategy refresh and how we got here.

1. A page for each Strategy Focus Group.
2. The 4 focus groups will be clearly displayed on the website so people can use a drop-down menu to gain access to the information, stories, projects, and co-production opportunities that sit within these headings. Completed projects, 'Doing Reviews Differently' and 'Work Ready' will also sit here as well.
3. Share the powerful stories of people with lived experience. The resources are valuable for the whole community.
4. Produce Easy-read, Plain English and Talking Text versions of the strategy documents.
5. Share and celebrate success on social media and Suffolk Learning Disability Partnership newsletters and WhatsApp group and other social media Platforms.

Appendix

Co-Production

Definition of co-production for the Suffolk Learning Disability Strategy

Co-production is people, carers and professionals working together as equal partners to: design, develop, commission, deliver and review services, information, and advice. This will often be facilitated by voluntary and community sector organisations who will link commissioners with people.

Co-production Principles: Co-production is central to achieving the objectives of personalising services and increasing choice and control for users and carers.

1. Co-production puts the focus on getting results (outcomes) rather than just thinking about services and how we do things.
2. This means that people and organisations work together on the issues that are important to people.
3. There is a difference in what is important to people and what may be important for people.
4. People are involved throughout the process – from beginning to end.
5. People feel safe to speak up and are listened to.
6. It is clear how decisions are made.
7. People's skills and experiences are used in the process of change.
8. Meetings, materials, and venues are accessible, easily understood and are appropriate for people's needs and abilities.
9. Progress is evaluated through looking at the actual changes in people's lives.
10. Different people who are interested in the work (stakeholders) are actively involved, not just one set of voices or experiences. These interested people (stakeholders) work together as equal partners on a shared goal, task, or vision, including a shared understanding of what success looks like.

Information and communication

Five steps of the Accessible Information Standard

1. Identify

How does the service assess for disability related information or communication needs? How does the service find out if people have any of these needs? How does the service plan how it will meet those needs?

2. Record

How does the service record those identified needs clearly? What systems are in place as part of the assessment and care planning process?

3. Flag

How does the service highlight or flag people's information and communication needs in their records? This could be in paper or electronic records. The chosen method must make it possible for all staff to quickly and easily be aware of (and work to meet) those needs.

4. Share

Services sometimes need to share details of people's information and communication needs with other health and social care services. This means that other services can also respond to the person's information and communication needs.

How does the service do this (when they have consent to do so)?

5. Meet

How does the service make sure it meets people's needs? How does the service make sure that people receive information which they can access and understand? How does the service arrange communication support if people need it?

For example, patients and people using a service should: be able to contact (and be contacted by) services in accessible ways, such as via email, text message or Text Relay.

Receive information and correspondence in formats they can read and understand. This could be, for example, in audio, braille, easy read or large print.

Receive information and correspondence in formats they can read and understand. This could be, for example, in audio, braille, easy read or large print.