

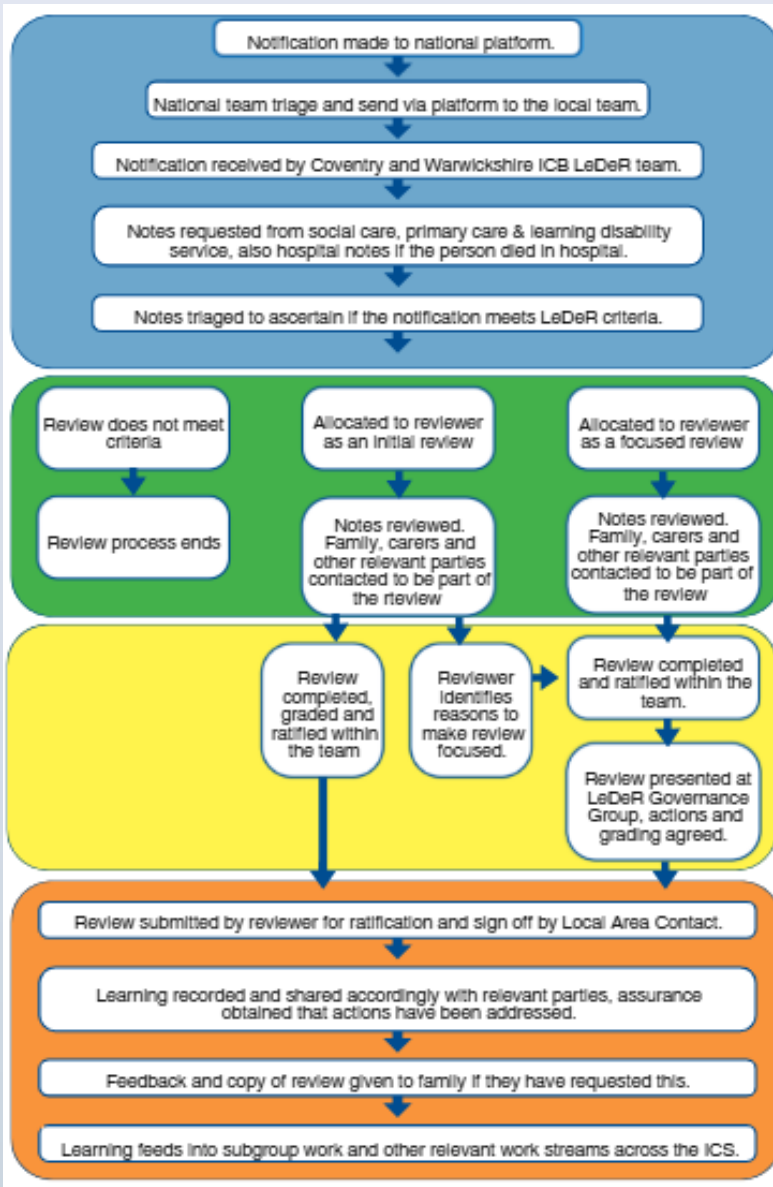


LeDeR (Learning from lives and deaths of people with a learning disability and autistic people) is a service improvement programme established in 2017 and funded by NHS England and NHS Improvement.

LeDeR works to improve care, reduce health inequalities and prevent early deaths for people with a learning disability and autistic people.

Anyone can make a referral to LeDeR if they are aware of a person who has died that is aged 18 and over, with a learning disability or autism. A referral can be made via the [national LeDeR website](#).

The LeDeR process



LeDeR Governance Group

We have a dedicated LeDeR Governance Group which takes place on a monthly basis. Our experts by experience along with senior health and social care representatives from across Coventry and Warwickshire attend the meeting, consider findings of reviews, and oversee an action plan linked to the learning.

Subgroup

Recognising the need for a dedicated space to address key themes from LeDeR reviews, we launched our LeDeR Subgroup in May 2023. Its purpose is to ensure that broader thematic findings and SMART actions from reviews are acknowledged across the integrated care system, acted upon, and lead to meaningful improvements in the health of individuals with a learning disability and autistic people.

Like our Governance Group, the subgroup includes representation from across health and social care, as well as invaluable input from our experts by experience.

Focus group

Our focus groups, facilitated by the charity Grapevine, run alongside the themes being addressed in the LeDeR Subgroup. Each group is tailored to the specific topic, incorporating activities and tasks that help us understand the true thoughts and experiences of our experts by experience. This ensures that their voices remain at the heart of everything we do.

Meet Our Clinical Leads



John Fullbrook

John recently retired after 29 years as a GP at Clarendon Lodge Medical Practice in Leamington Spa. His particular interest in this work is inspired by his experience both as a GP and a parent to a child with severe learning disability.

John also loves cooking, reading, music, playing and watching lots of sports.



Ayesha Mahmud

Ayesha is a Coventry-based salaried GP with a keen interest in improving care for people with a learning disability and autistic people. Her role with the ICB has given her the opportunity to focus on this area, and she is also part of the Learning Disability Friendly Badge project team.

Outside of work, Ayesha enjoys travelling with her family, eating out, and is still working on getting the hang of golf.

John and Ayesha have become integral members of both our Governance Group and Subgroup. Their clinical expertise has significantly informed our work and deepened our understanding, especially within the Primary Care setting. They have also been essential resources for our reviewing team whenever expert insights are needed.



LeDeR Update

Notifications

19 notifications were made to the Coventry and Warwickshire LeDeR team.

Of these, 17 were in scope and 2 were not in scope due to not having a confirmed diagnosis of a learning disability or autism

Analysis of the –notifications that were in scope

Autism Only	Gender	Age	Place	Ethnicity
We received 1 notification for a person with an autism only diagnosis.	Male = 13 Female = 4	Age of death ranged from 18 to 81. With the median age of death being 62 for males and 66.5 for females.	Coventry = 8 Rugby = 0 South Warwickshire =0 Warwickshire North =9	16 = White British 1 = Asian British

Completed Reviews

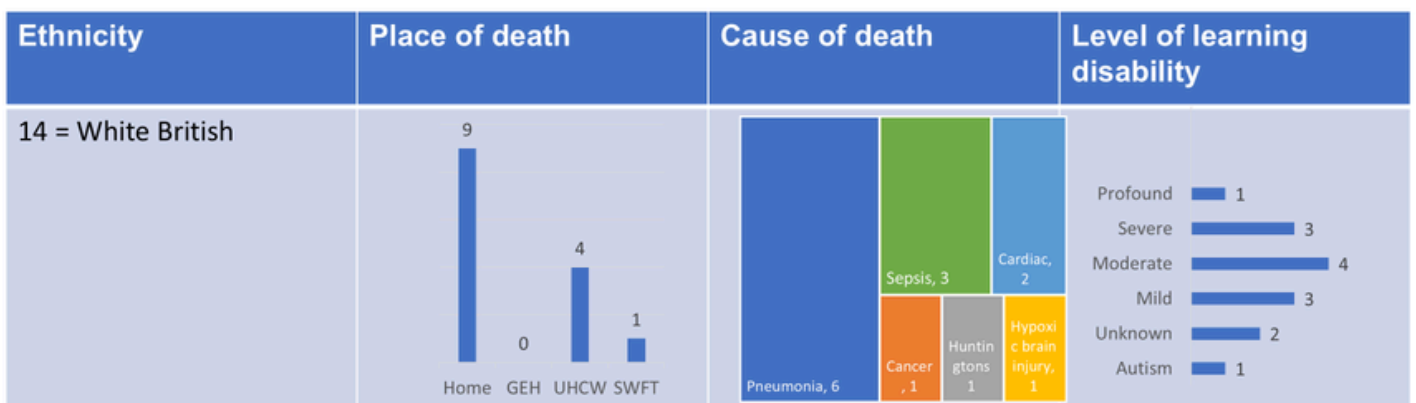
14 reviews were completed by the Coventry and Warwickshire LeDeR team

6 were initial and 8 were focused

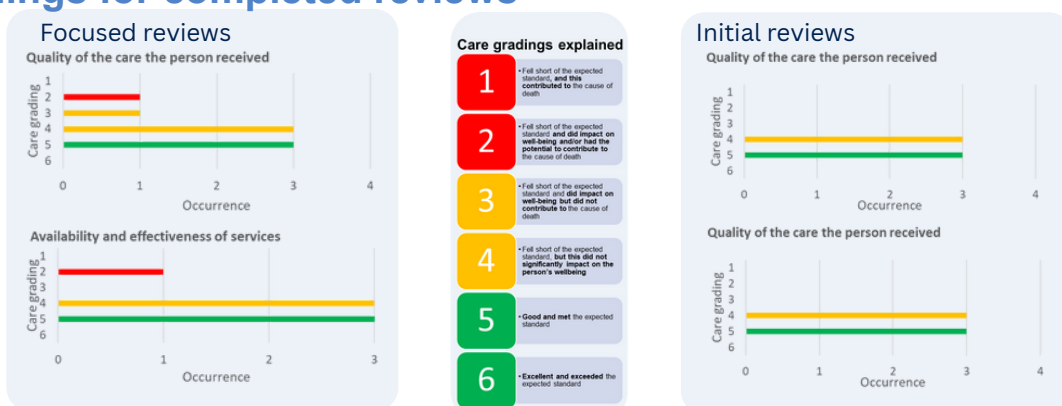
The infographic below shows the reasons why the 8 reviews were completed at a focused level



Analysis of the – completed reviews



Care gradings for completed reviews



Spotlight on West Midlands Ambulance Service Bariatric Provision



Transporting bariatric patients presents unique logistical and medical challenges, requiring specialised equipment, vehicles, and trained personnel. The West Midlands Ambulance Service (WMAS), together with the Hazardous Area Response Team (HART), has developed a comprehensive approach to ensure these patients receive safe, dignified, and efficient transport to hospital facilities.

Capacity and Equipment

All ambulances in the WMAS fleet are equipped to carry a maximum weight of 473 kg (74 stone 6lbs) on loaded bariatric stretchers. Currently, 15 bariatric Double Crewed Ambulances (DCAs) operate throughout the region, outfitted with advanced moving and handling equipment alongside dedicated bariatric stretchers. For more complex bariatric cases, HART provides a specialized Bariatric Support Vehicle (EP7117) around the clock. This vehicle is operated by HART paramedics and is deployed as a secondary response to bariatric incidents, offering enhanced equipment not found on standard DCAs. Items such as Powertraxxx, ramps, hoists, evacuation mattresses, Mangarcushions, and bariatric patslides are among the tools that support patient movement



The EP7100 Bariatric Transport Vehicle



The EP7100, a large vehicle capable of transporting hospital beds and the innovative EpiShuttle patient isolation system, is a crucial asset in the WMAS bariatric transport arsenal. While originally considered a rare resource, demand for the EP7100 has increased, with HART responding to 30 incidents and conveying 15 patients to date.

Importantly, the EP7100 has been tested and approved by the Driver and Vehicle Licensing Agency (DVLA) as a patient-carrying vehicle. It operates under a Memorandum of Understanding (MOU) signed with West Midlands Police and shared with neighboring forces to coordinate escort and traffic management during transport.

West Midlands Ambulance Service Bariatric Provision



Unique Challenges and Legal Responsibilities

No national capability currently exists in the UK for transporting bariatric or EpiShuttle patients who cannot fit into standard ambulances. Given this gap, WMAS must fulfil its legal duty of care by using the EP7100, ensuring that all other alternatives have been explored before its deployment.

Emergency responses involving the EP7100 require a full HART deployment with command oversight, local traffic police escort, and speed restrictions to maintain safety—typically traveling under 20 mph. Due to the complexity of these calls, planning and response times can range from 4 to 12 hours from initial notification to hospital arrival.



Collaboration for Better Patient Outcomes

To further improve bariatric patient transport, WMAS is calling on all health partners to proactively share details of known complex patients. By reviewing, flagging, and assessing these patients ahead of time—and by collaborating with patients and Fire & Rescue Services—resources can be mobilized more effectively at the point of call.

This proactive approach aims to enhance the patient experience, ensuring comfort, dignity, and safety throughout the transport process.

Identifying Complex Patients: The Role of the Complex Patient Registration Form

To support the effective management and transport of bariatric patients—and others who present unique challenges—WMAS has developed the Complex Patient Registration Form. This form is a vital tool for alerting ambulance services in advance about patients who may require additional planning or specialised resources.

The form isn't limited to bariatric patients alone. It also covers individuals who may pose difficulties during transport due to various factors related to their living environment or personal presentation. For example:

- Home Environment Challenges: Limited space caused by hoarding, narrow hallways, steep or multiple flights of stairs, multi-story buildings without lifts, or uneven terrain around the home.
- Patient Presentation: Situations involving challenging behavior, the need for security or escorts, or other special considerations.

By proactively sharing this information prior to an emergency situation, WMAS are able to conduct risk assessments and create a plan for if an emergency call is made. This allows timely and appropriate resources—such as bariatric vehicles, HART teams, or additional support personnel to be deployed if an emergency occurs.

This approach not only helps ensure the safety and dignity of patients during transport but also supports staff in delivering the best possible care under sometimes difficult conditions.

**NHS**

West Midlands
Ambulance Service
NHS Foundation Trust

COMPLEX PATIENT

REGISTRATION FORM

Please email a copy of the completed form to ComplexPatientRiskAssessmentsMailbox@wmas.nhs.uk

Patients Name		Patients DOB	
Patients Address (Permanent)		Patients Address (Temporary)	
Access Details (Key safe, door codes)		Patients NHS Number	
Next Of Kin / Carers details		Patients Telephone Number	
Patients Weight (Kg)		Patient Height (CM)	

Can the patient mobilise independently?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If No – How?				
Is the patient bed bound and or located on the 1 st floor or above?						
Where in the property is the patient located?						
Are there any environmental challenges	Hoarder	Narrow Corridors	Sloped Driveway	Broken Slabs	Structural Concerns	Access / Egress Concerns
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other						
Does the patient have any medical conditions that WMAS need to be aware of?						
Other Comments						

Healthcare Provider Completing Referral Form

Name	
Role	
Provider	
Date of Assessment	

Internal Only

Reviewed by Complex Patient Working Group	
Reviewed by CAD Admin	
Flag Valid for	

Other news and information



Referring to LeDeR

Anyone who is aware of a death of a person with a learning disability or autism can make a referral to the LeDeR programme through the national portal [here](#).

- Please try to include key details such as ethnicity, place of death, and next of kin. This helps us ensure each LeDeR review is as thorough and effective as possible.
- Don't worry if you're unsure whether the person had a formal diagnosis — we encourage you to refer. We will determine if they meet the LeDeR criteria during our review process.

Learning Disability Friendly Badge



The fifth panel evaluation meeting for this GP practice accreditation scheme took place on 25th July, seeing four more practices receive the Learning Disability Friendly Badge.

To learn more about the scheme and view the 25 accredited practices, please follow the link [here](#).

Useful online links



[NHS England](#) - Learning disability and autism pages

[Coventry & Warwickshire ICB](#) - Learning Disability & Autism webpages

[LeDeR Coventry an Warwickshire ICB](#) Coventry an Warwickshire ICB - For more information about local work and resource packs

[Coventry & Warwickshire Partnership NHS Trust](#) - Learning Disability and Autism Services

[What are Reasonable Adjustments and why are they important?](#)

Contact us - cwicb.ledercwicb@nhs.net

