

**Written evidence submitted by Mr Neil Carpenter (Volunteer Advocate at Cornwall Advocacy)  
(CVD0014)**

I work in Cornwall as a volunteer advocate for people with a learning disability and would like to comment on one part of your inquiry's terms of reference: 'the mental health of disabled people, including the effects of isolation'.

Many of the people I work with have struggled to understand what has been happening during the pandemic and what government guidance has meant. These difficulties have been worsened by a loss of or disruption to the routines which provide structure, support and friendships in their lives. To give one example from the height of the crisis, because of staff going into isolation the manager of one organisation in Cornwall providing support to people in their homes was only able to offer a daily 20 minute phone call to people who normally would have been receiving regular visits at home from support workers. This increased isolation of course intensified the anxiety caused by the pandemic for many people with a learning disability.

One extreme example of anxiety taking hold is of a man – Jonathan, not his real name - previously happily living in residential care and attending a day centre 2 days a week. The day centre for obvious reasons had to close temporarily (of which more later) and Jonathan, through watching the news of care homes on television, became convinced that he would die if he stayed in residential care. He began to refuse to take his medication, became aggressive, was sectioned and as staff were no longer able to manage him, he was moved to an acute psychiatric admissions unit. That move was short-lived and he has since moved again to a secure residential setting in Devon many miles from those who know him.

The day centre currently has very little information on that residential setting as the acute psychiatric unit did not know whether it was appropriate to pass it on. If that remains the case before Jonathan is signed off at the unit, the day centre may lose track of him, making advocacy for him infinitely more difficult. If his location is established, with social services being so stretched and residential places in Cornwall appropriate for Jonathan being so scarce, there is an obvious concern that he will not meet the thresholds for intervention by social services to secure a placement back in the county.

As a result, his move to another county, away from friends and familiar support, may become permanent and the steep decline in his life that has happened over a few months in 2020 will become even steeper.

One key component of his decline is the temporary closure of his day centre. Such centres have consistently been overlooked in this crisis. Your own terms of reference refer to 'social care for disabled people in their homes and in residential care settings' and later to 'education' but there is no mention of day centres. These centres are essential in providing structure, support and friendships for people with a learning disability and, to state the obvious, greatly reduce the isolation of people who are otherwise sealed away in care homes or with their families.

Yet, as I write, the day centre which Jonathan attended – and this must be typical of many across the country – is in limbo. It is planning for the future as best it can but without clear guidance from

above - central government, local government and those commissioning the day centre's services - it cannot convert its planning into a schedule for re-opening.

Such day centres should not continue to be overlooked. If nothing is done, the isolation of people with a learning disability in this pandemic will intensify.

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