

Learning Disabilities

GP Practice Information Pack

Contents

1. Introduction

2. Learning Disability Health Check Scheme DES

3. How to prepare for Annual Health checks

3.1 The practice Learning Disability register

3.2 Making Reasonable Adjustments and the Accessible Information Standard

4. Performing the Annual Health Check

- Pre Health Check tasks
- Performing the Annual Health Check
- Annual Health Check template
- Health Action Plan

5. Claiming for the Learning Disability Health Check Scheme DES

Resources

Appendices

- Read codes
- Template
- Easy read invitation letter
- Practice Checklist

1. Introduction

This pack has been created as a guide and resource for GP practices to help support with carrying out Annual Health Checks for patients with Learning Disabilities.

All practices that are signed up to the Learning Disabilities Health Check Scheme DES are required to undertake training. NSFT Primary Care Learning Disability Liaison Nurses (hereafter known as LD nurses) will support practices with this training using this pack. The training should not be completed using this pack alone. It can however be used for refresher training once the practice has received training from an LD nurse.

Towards the end of this pack there is a checklist. At the end of the training, the LD nurse will go through this checklist with the practice clinical lead for learning disabilities to ensure all appropriate and relevant staff have been adequately trained. The LD nurse will also give some recommendations for practice development and to help improve the quality of annual health checks further. There are also actions for the practice throughout the pack which are highlighted in a blue box.

The contents of this pack have been endorsed by: NSFT, Ipswich and East Suffolk CCG and West Suffolk CCG.

2. Learning Disability Health Check Scheme DES

The Confidential Inquiry into premature deaths showed that people with learning disabilities (LD) have a lower life expectancy than the general population; 13 years lower for men, and 20 years lower for women. People with learning disabilities are three times more likely than the general population to have a death classified as potentially avoidable through the provision of good quality healthcare. Improving health outcomes for people with learning disabilities is therefore vital.

Compared to the general population, people with learning disabilities and/or severe mental illnesses are less likely to have their health needs identified, or to receive appropriate treatment for them

The nationally enhanced service for the LD Physical Health Check Scheme has been running for over three years outlining the requirement to identify all people with learning disabilities on an LD register. Since 2014/15 there has been a requirement for all signed-up GP practices to identify and maintain an LD health check register of all patients aged 14 and over with learning disabilities and offer them an Annual Health Check (with an ensuing health action plan).

All practices must undertake training for staff which must meet the following requirements:

- Includes the lead GP and lead Practice Nurse
- Includes either the Practice Manager or Senior Receptionist (or similar)
- Must consist of a multi-professional educational session approved by the Commissioner
- Must include instruction on overcoming any attitudinal barriers of the staff with a view to improving their communication with patients with learning disabilities.
- Training should be updated as the practice requires.

Practice Actions:

- **Read the Learning Disability Health Check Scheme DES and ensure everyone is aware of the requirements []**



LD Health Checks
SLA 17_18 FINAL.pdf

- **Nominate a clinician to lead on LD []**

3. How to prepare for Annual Health Checks

In order to undertake annual health checks, GP practices need to undertake a number of tasks. Completing these will ensure the right people are being invited to a health check and in the most appropriate manner.

For a full comprehensive guide to preparing for annual health checks see the RCGP online guide toolkit 'How to Organise the Annual Health Check': <http://www.rcgp.org.uk/clinical-and-research/toolkits/health-check-toolkit.aspx>

3.1 The Practice Learning Disability Register

Practices should already be maintaining a QOF Learning Disabilities register. For the purposes of the DES, only those aged 14 years and over need to receive an annual health check.

- The Learning Disability register should be reviewed and maintained regularly; the RCGP suggests annually.
- Ensure that patients have or are assigned an appropriate read code. A list of LD read codes is given in appendix one.
- Try to improve prevalence on the register by ensuring all those with a learning disability in the practice population have the preferred code 918e or XaKYb = 'on learning disability register' to be placed on the register. Search the practice system to find those syndromes that will have a learning disability and those that may have, in order to find people in whom this code should be added.
- Liaise with the Local Authority to establish which of their registered patients are known to the Local Authority primarily because of their learning disability. Ensure that patients on the Local Authority register are included on the practice's learning disability register. Email ACSFOIs@suffolk.gcsx.gov.uk for your practice register.
- If you are unsure about whether it is appropriate for a patient to be on the register contact your LD nurse to discuss and review.

Practice Actions:

- **Schedule time to review your LD register on an annual basis []**
- **Nominate a clinical lead and administrator to lead on this piece of work []**
- **Contact the Local Authority each year for an up to date register []**

3.2 Making Reasonable Adjustments and the Accessible Information Standard

One of the key ways of ensuring patients with learning disabilities attend their health appointments, including their annual health check, is to use reasonable adjustments. Reasonable adjustments are the things that you organise or adapt to reflect the needs of those with a learning and or/physical disability.

Reasonable Adjustments

The Royal College of Nursing* provides a good overview of Reasonable Adjustments:

Under the Equality Act 2010, health services must consider the needs of people with disabilities in the way they organise their buildings, policies and services. These are called 'reasonable adjustments' and reflect that fact that some people with disabilities may have particular needs that standard services do not adequately meet. This could relate to, for instance, people with learning and/or physical disabilities, those with dementia and people living with mental health problems.

Reasonable adjustments can be made in many areas of health services. Services can ensure, for example, that:

- buildings, including toilets, are accessible to people with physical disabilities
- signposting is clear and easy to follow
- information and advice is offered in formats and languages that people can understand
- extra time is offered to people who have particular communication needs or difficulty understanding what is being said
- alternatives to hospital or clinic attendance are considered for those who have problems in getting to appointments
- families and friends of people with disabilities are actively involved, if the person wishes them to be.

As individuals, we can be sensitive to people's needs, recognising if a person has a communication problem (such as deafness) that requires a tailored approach, or a physical problem that makes accessing and negotiating the building difficult, or is particularly anxious about engaging with health professionals and needs a bit more time and reassurance. This applies not only to the people in our care, but also perhaps to some of the people we work with.

In short, adopting a person-centred approach to all the people we care for and work with, and being prepared to be flexible in our responses to meet their needs, is probably the best guarantee of ensuring reasonable adjustments are made to improve people's experiences of services.

*This excerpt was taken from: <http://rcnhca.org.uk/equality-diversity-and-rights/anti-discriminatory-practice/reasonable-adjustments-for-people-with-disabilities/>

From 1st August 2016 onwards, all organisations that provide NHS care or adult social care are legally required to follow the Accessible Information Standard.

The Standard aims to make sure that people who have a disability, impairment or sensory loss are provided with information that they can easily read and understand and with support so they can communicate effectively with health and social care services. Practices should use a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication needs of people with a disability or sensory loss.

You can read more information about the standard here:

<https://www.england.nhs.uk/ourwork/accessibleinfo/>

Accessible Information Standard

The Accessible Information Standard says that any organisation that gives NHS care or adult social care has to:

- Ask people if they have any communication needs or need to be given information in a certain way
- Make sure everyone's needs are recorded in the same way and that they are easy to understand
- Make it easy to see when a person has information or communication needs can be met. This is so anyone who looks at their file can find this out
- Share the information with other providers of NHS care and adult social care. This should only happen if they are allowed to see it
- Make sure that people get information in a way they can access and understand. They should also get support with communication if they need it

Patients should also:

- Be able to contact organisations and be contacted by organisations in accessible ways. Examples of this are by email, text message or Text Relay
- Get information in a way that they can read or understand, examples of this are Braille, easy read and large print
- Get communication support from a professional if they need it, such as a British Sign Language interpreter
- Get communication support from health and care staff if they need it. An example of this would be if a person needed to lip-read or use a hearing aid

The NHS England implementation guidance (<https://www.england.nhs.uk/wp-content/uploads/2015/07/access-info-implmntn-guid.pdf>) gives an overview of how the standard should be implemented in practice. However there are 5 basic steps to implementation:

1. **Ask:** identify/find out if an individual has any communication/information needs relating to a disability or sensory loss and if so what they are.
2. **Record:** record those needs in a clear, unambiguous and standardised way in electronic and/or paper based record/administrative system/documents.
3. **Alert/flag/highlight:** ensure that recorded needs are 'highly visible' whenever the individual's record is accessed, and prompt for action.
4. **Share:** include information about individuals' information/communication needs as part of existing data sharing processes (and in line with existing information governance frameworks).
5. **Act:** take steps to ensure that individuals receive information which they can access and understand, and receive communication support if they need it.

Practices should be able to make use of their clinical system's flagging systems (point 3). If a practice is unsure where to find this information, please contact IT on

it.training@suffolk.nhs.uk

Practice Actions

- Read the NHS England implementation guidance for the Accessible Information Standard []
- Ensure that all staff who interact with patients are aware of the standard []

You can access e-learning on the Accessible Information Standard here: <http://www.e-lfh.org.uk/programmes/accessible-information-standard/> or you can contact ACE Anglia for support in your practice by emailing max@aceanglia.com

- When conducting the annual review of the practice LD register, make a note of any reasonable adjustments that may need to be made to ensure they can come to their annual health check []
- Check that any communication needs, as per the Accessible Information Standard, have been recorded and are acted upon as and when necessary []

5. Claiming for the Learning Disability Health Check Scheme DES

Practices are signed up to a 'direct enhanced service' (DES) which is a service which requires an enhanced level of provision above what is required under core contracts.

The Learning Disabilities Health Check Scheme commenced in 2009 with the aim to encourage the delivery of an annual health check for patients with a learning disability in general practice. This was in recognition that many patients living with a learning disability experience more health problems and have a lower life expectancy.

The service specification seeks to:

- Identify all registered patients, aged 14 years and over, with a learning disability
- Reduce health inequalities for registered patients with a learning disability, aged 14 and over

NHS England, who commissions the DES, pay practices quarterly based on the data which practices submit on CQRS. There are steps that practices will need to take to ensure that they have claimed correctly and so therefore get paid the right amount at the right time:

1. Ensure patient records are accurately Read-coded on your clinical system to indicate that a check has been carried out
2. Manually enter the LD Health Check Register size for the quarter on the CQRS claim – do this even if no checks have been completed
3. Remember to 'declare' the 'achievement' on CQRS

****** CQRS automatically extracts the numbers of health checks completed within the quarter, hence why they MUST be read coded correctly. Practices must manually enter the LD health check register size each quarter******

If the practice does not follow the steps above then the claim will not be processed correctly. Each quarter the CCG receives the latest health check figures for practices. If a discrepancy is spotted then the Practice Manager will be contacted to amend. The only way to rectify incorrect claims is to contact NHS England directly: England.mee-desactivity@nhs.net

Please be aware practices are likely to be asked to provide evidence when disputing a claim, such as a screen shot from the clinical system.

You can find more information about how to claim in a communication which was written by NHS England and issued in October 2016 (please take this into consideration when it states which codes to use):



LD Communication to
practices Oct 2016.doc

Practice Actions

- **Ensure the relevant members of staff know which codes to use on the completion of an annual health check []**
- **Read the NHS England communication which goes into relevant detail about how to claim []**
- **Embed a process each quarter which ensures all the steps to a correct claim have been implemented []**

Resources

E-learning for Healthcare (e-lfh) has an e-learning module for Health Checks. You will need to register with the site and then navigate to the course by going to the e-GP sessions: <http://www.e-lfh.org.uk/programmes/general-practitioners/>

'e-GP 3.11 - Care of People with Intellectual Disability > 3.11_09 Health Checks for Adults with Learning Disabilities'

The RCGP has created a really useful step by step guide for GP Practices undertaking annual health checks for patients with Learning Disabilities: <http://www.rcgp.org.uk/learningdisabilities/>

The RCGP has also created a tool for safeguarding adults at risk of harm: <http://www.rcgp.org.uk/clinical-and-research/toolkits/safeguarding-adults-at-risk-of-harm-toolkit.aspx>

Easy Health has a huge library of easy read documentation for a wide variety of purposes: [http://easyhealth.org.uk/listing/health-checks-and-assessments-\(leaflets\)](http://easyhealth.org.uk/listing/health-checks-and-assessments-(leaflets))

Ace is an independent and self-advocacy project for people with learning disabilities, based in Suffolk. <http://www.aceanglia.com/>

NHS England has information about the Accessible Information Standard (a legal requirement for practices to follow): <https://www.england.nhs.uk/ourwork/accessibleinfo/>

Useful Contacts

NSFT Primary Care Learning Disability Liaison Nurses: Many practices work with a named nurse who they see regularly. You can also email the nurses on: liaison.nursesld@nsft.nhs.uk

NHS England (queries around the DES and claiming): England.mee-desactivity@nhs.net Be sure to include the practice D/Y8 code in the email subject.

CCG: Emily Rawlinson is point of contact for general practice queries
Emily.rawlinson@ipswichandeastsuffolkccg.nhs.uk

Appendix One – Read Codes

The codes and accompanying notes below are from the DES paperwork. If you have any queries relating to the below or anything else relating to the DES please contact NHS England: England.mee-desactivity@nhs.net

Payment Read Codes

Learning Disabilities Health Check Read Codes – Health Check	Read v2	Read CVT3
Learning disability health check examination	69DB	XaPx2

These read codes must be recorded in the patient’s medical record on the completion of a compliant check to activate the automatic extraction for payment. Read codes added retrospectively will not be picked up if the quarterly extraction has passed and will therefore not be paid.

Management Counts

Learning Disabilities Health Check Read Codes – Health check	Read v2	Read CVT3
Learning disabilities annual health assessment declined	9HB6	XaQnv
Learning disabilities health action plan completed	9HB4	XaJsd
Learning disabilities health action plan reviewed	9HB2	XaJWA
Learning disabilities health action plan declined	9HB0	XaJW9

Due to the importance of this service the Commissioner may make reasonable requests in view of the Provider’s activity relating to this service to support predicted patient uptake and service delivery.

Diagnostic Codes

	Read v2	Read CTV3
Mental Retardation	E3...%	E3...%
[X] Mental retardation	Eu7..%	Included in E3...%
[X] Developmental disorder of scholastic skills, unspecified	Eu81z	Eu81z
[X] Mild learning disability	Eu816	XaREt
[X] Moderate learning disability	Eu814	XaQZ3
[X] Severe learning disability	Eu815	XaQZ4
[X] profound learning disability	Eu817	XaREu
On learning disability register	918e.	XaKYb
Specific learning disability	Eu818	Included in E3...%

You will find patients may still have these outdated (in terms of terminology) codes attached to them. If you find any patients with these codes, please replace with a more appropriate code, such as mild or moderate learning disability etc. The LD nurses can help support you with this if you are unsure.

Practice Learning Disability Training Checklist

Practice:

Date of completed training:

Name of NSFT Primary Care Learning Disability
Liaison Nurse:

Practice has a clinical lead for learning disabilities []

Practice understands the DES and their obligations to meet the requirements []

Practice knows how to review and validate their LD health check register []

Practice is aware of any reasonable adjustments that need to be made for their patients
and are implementing them []

The recommended annual health check tool is being used []

The practice is using the correct read codes []

The practice is aware of how to claim for the LD DES []

The practice knows where to access support and advice around learning disabilities []

The following staff have been trained by the NSFT Primary Care Learning Disability
Liaison nurse:

GP [list names, indicate which is LD lead]

Nurse [list names, indicate if there is an LD lead]

Any admin/receptionists [list names]

Practice Manager [name]

What recommendations have been made to the practice: