SCIE RESEARCH BRIEFING

ACCESS TO PRIMARY CARE SERVICES FOR PEOPLE WITH LEARNING DISABILITIES

Definition of a briefing: A SCIE research briefing is a summary of information on a particular topic to update practice at the health and social care interface. It is a concise document summarising the knowledge base in a particular area to act as a 'launch pad' or signpost to more in-depth material. It is produced through a clear methodology involving identification of a focused question, comprehensive searching of multiple sources and filtering of materials for quality.

| What is the issue? | Defining 'learning disability' is a complex and contentious issue. Recent policy defines learning disability as "a significantly reduced ability to understand new or complex information, to learn new skills with a reduced ability to cope independently which started before adulthood, with a lasting effect on development" (1). However, this may not resonate with learning disabled people's self-definition or that of their families. People with learning disabilities (PLD) experience higher rates of ill health (2, 3, 4) and have more complex health needs (5, 6, 7) than the general population, including epilepsy, dental problems (8), mental health and behavioural disorders and nutritional disorders (9). In addition to these difficulties, PLD have problems in accessing primary health care (10). Access is made more difficult because of communication difficulties and barriers in encounters between health professionals and PLD and practical issues such as long waiting times (11) and lack of consultation time (12). This can result in a failure to access primary health services such as men's and women's health screening, cervical screening (13, 14), genetic screening, dental checks and treatment (15, 16) and health promotion (17, 18). Basic health problems may be unidentified (5) or regarded merely as part of the learning disability rather than a medical problem (19). |
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| Why is it important? | It is vital to tackle discrimination and inequality of access for people with learning disabilities so that this population has comparable access to health initiatives and services (including GPs, dentists, opticians and chiropodists) used by non-disabled people (1). Experts suggest that health and social care professionals need to be aware of social inequalities, risk, potential for abuse, vulnerability and the unique challenges experienced by PLD through the course of life, and harness the expertise of carers and support networks to increase access to services (1). Practitioners |

| What are the ethical considerations? | should work in partnership with PLD and their carers to translate the strategic statements in the Department of Health documents " <i>Valuing People</i> " (<u>1</u>) and the " <i>NHS Plan</i> " (<u>20</u>) into reliable, predictable and practical services, support and information. PLD still living in long-term care have particular difficulties in accessing primary health services such as immunisation (9). The ability of a PLD to give informed consent to services or treatment depends on them being given full (<u>21</u>) and relevant (<u>22</u>) information. This may not be easy in some decisions, such as whether to take HRT (<u>23</u>), contraception (<u>3</u>) or have screening (24, 25) or genetic testing (<u>26</u>). Guidance on consent has been provided by the Department of Health at <u>http://www.dh.gov.uk/assetRoot/04/01/90/61/04019061.pdf</u> and by the Lord Chancellor's Department at <u>http://www.lcd.gov.uk/family/mi/mibooklets/guide2.pdf</u> It is important that health professionals speak directly to the PLD in language they |
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| | understand rather than by default or through a carer. The use of advocates, such as specialist nurses (27) and specialist GPs may be beneficial ($\underline{7}, \underline{28}, 29$). Communication difficulties can be alleviated by the use of training programmes for health professionals and appropriate use of communication aids (30). |
| What are the views of users and user groups? | A number of studies have sought the views of PLD on women's knowledge of health issues (31), accessing health services with decision-making and consent (32), how they were dealt with by the primary care team (2), health screening and the attitudes of GPs (33) and access, health needs and how these were met and quality of care (5). However, there can be ethical problems in eliciting the views of PLD particularly when communication takes place via carers (5). Carers and families present a vital link between PLD and healthcare facilities (5), give support and information (23) and have the expertise about the person concerned. However, some PLD report feeling that opportunities for independence can be limited (2). Carers may miss health problems (34) or not recognise the importance of screening (9). Common responses from PLD were that health professionals were helpful (5) and users had liked seeing them (33), but concerns were expressed about waiting times (5), anxiety whilst waiting (2, 33), the attitudes of health professionals (2, 5, 32), transport and surgery access problems (2, 5, 33), a lack of understandable information (2) and addressing carers instead of users (5, 32). Consultation with a user group in Sheffield found that users also wanted to be given more time during consultations, have the opportunity to ask questions and take information about the consultation home with them, available in different formats (written, visual, taped). Users also found the service provided by NHS Direct helpful. |
| What do I need to do? | Read the following Department of Health documents: "Once a Day: one or more people with learning disabilities are likely to be in contact with your primary healthcare team. How can you help them?" at http://www.dh.gov.uk/assetRoot/04/04/27/79/04042779.pdf "The Healthy Way: How to Stay Healthy – a guide for people with learning disabilities." This booklet details the responses of 500 PLD on healthcare issues. Details available at: http://craw104.archive.org/ukgov/20040216083935/ http://www.doh.gov.uk/learningdisabilities/publications.htm Read: |

| | "Learning Disability Today: Key issues for providers, managers, practitioners and users" (Chapter 12 – Accessing health care: Being seen to be healthy!). See CareData abstract at: http://195.195.162.66/dbtw-wpd/exec/dbtwpcgi.exe Be aware of the health needs of PLD and the issues of choice and control (consent). Use this knowledge to contribute towards increasing access to healthcare and health promotion in your work. See: http://crawl04.archive.org/ukgov/20040216083935/ http://crawl04.archive.org/ukgov/20040216083935/ Be aware of Health Action Plans and the role of the health facilitator. See sections 6.12 to 6.18 of "Valuing People" at http://www.archive.official-documents.co.uk/document/cm50/5086/5086.pdf |
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| What are the implications? | Research in this area focuses on the involvement of specialist health care staff, particularly the community learning disability nurse (2, 9, 22, 30, 34), multidisciplinary working (11, 13, 22, 35), the need for regular screening programmes/health checks (9, 13, 29) and medication reviews (36) that are acted upon, and more support/recognition for the carers' of PLD (11, 12). There is also a need for more and better information (12, 22), better appointment systems to reduce waiting times and communication skills development (32) across all staff in primary care. Professionals, such as GPs and practice nurses need specialist skills training (particularly communication) in this field (15, 18). "Valuing People" (1) details specific targets and deadlines in relation to PLD to increase health care access and reduce inequalities. Further research is needed to identify the long-term clinical effectiveness of health checks for PLD (19) and the experiences of PLD themselves in accessing primary health services (37) such as walk-in centres and NHS Direct. |
| Who can I contact? | Valuing People Support Team within the Department of Health at http://www.dh.gov.uk/PolicyAndGuidance/HealthAndSocialCareTopics/LearningDisabilities/ValuingPeopleSupportTeam/fs/en Learning Disability Task Force within the Department of Health at http://crawl04.archive.org/ukgov/20040216041858/ http://www.doh.gov.uk/learningdisabilities/taskforce.htm National Forum for people with learning disabilities at http://www.valuingpeople.org.uk/ The Home Farm Trust at http://www.hft.org.uk/ The Foundation for People with Learning Disabilities at http://www.learningdisabilities.org.uk/ |
| Where can I find examples of innovative practice? | Strathmartine Hospital in Dundee where a team of community-based nurses covers all aspects of healthcare for PLDs. The Wednesday Clinic in Dundee provides an access point to health services for women with learning disabilities. In the North West, five regional networks have been established to share information and best practice, develop care pathways, solve problems and encourage the involvement of service users and carers. St Georges' Hospital Medical School employs a number of PLD as training advisors and to teach medical students about treating PLD. See: http://www.sghms.ac.uk/depts/psychdis/advocacy/introduction.htm Learning Disabilities Health Promotion Working Group of Glasgow held a "Healthy Day". See: |

| | http://www.glasgow.gov.uk/healthycities/impaired/events/ld_event_yl.htm Learning Disabilities Health and Social Care Partnership of Devon County Council provide a website for PLD giving comprehensive details of services. See: http://www.devon.gov.uk/socserve/csd/learndis.shtml Barnet PCT and the Institute for Applied Health and Social Policy held an event on 25th March 2003 called 'Learning from People - Getting It Right'. The day brought together people to share good practice in supporting people with learning disabilities who access and use hospital services. See: http://crawl04.archive.org/ukgov/20040216090407/ http://www.doh.gov.uk/vpst/health.htm#events NHS Cancer Screening Programme has produced leaflets and picture books specifically for people with learning disabilities. See: http://www.cancerscreening.nhs.uk/breastscreen/news/006.html |
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| Resource sites | See the Valuing People Support Team website for resources linked to "Valuing People" at http://www.valuingpeople.gov.uk/papers.htm The Learning Disabilities pages in the Department of Health website has a list of other sites of interest at http://www.dh.gov.uk/PolicyAndGuidance/HealthAndSocialCareTopics/ LearningDisabilities/LearningDisabilityPublications/fs/ en?CONTENT_ID=4001805&chk=xpYmSv See the Appendix to "Once a Day" for details of publications and useful names and addresses at http://www.dh.gov.uk/assetRoot/04/04/27/79/04042779.pdf MENCAP Understanding Learning Disability at http://www.mencap.org.uk/ See the National electronic Library for Learning Disabilities (NeLLD), part of the National electronic Library for Health, at http://www.minervation.com/ld/ Search CareData freely available via the Electronic Library for Social Care Connects: the Mental Health and Learning Disabilities portal at http://www.connects.org.uk/index.cfm?js=1&dom=1 |
| Comments | Please address all comments, suggestions or ideas for improvement to the ScHARR Library at <u>scharrlib@shef.ac.uk</u> |
| Acknowledgements | Thank you to experts and service users for their contributions to this briefing. |

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Research involved the following consultative strategies: a forum of 60 people, a questionnaire to carers which had 104 responses, service users' focus groups involving 31 PLD, interviews with 53 PLD following a health check and a carers' focus group of 7 people. The aim was to identify the experiences, expectations and opinions of PLD using primary health care services.

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