

## Health and Wellbeing of People with Learning Disabilities

### Annual Health Checks

Information has been gathered from NHS England, CCG, and Public Health England on the Annual Healthcheck process. The source of each section of information is highlighted in **bold**.

#### What service should be provided and who commissions the service?

1. **NHS England** commissions a Learning Disability Health Check Scheme as part of a Directed Enhanced Service (DES). The service is offered to GP Practices on an annual basis as directed by the Secretary of State, however there is not a requirement for a practice to participate in the scheme.
2. The enhanced service is designed to encourage practices to identify all patients aged 14 and over with learning disabilities, maintain a learning disabilities 'health check' register and offer them an annual health check, which will include producing a health action plan.
3. **CCG:** People are identified as requiring a health check from lists which are held on G.P registers, these lists are checked and verified by health facilitators who are aligned to practices.
4. Health Facilitators are learning disability nurses who are employed by Tees Esk and Wear Valley Mental Health and Learning Disability Trust and are based within the community. As well as validating registers within practices they also support the enhanced service by offering and providing learning disability awareness training. On completion of a health check people should have a health action plan developed, the facilitator can assist in the development of this.
5. Health facilitators also support people with learning disabilities to access general practice and health checks by working with them to desensitise using techniques to alleviate fears around medical procedures or investigations. They also provide access to different resources such as easy read leaflets, DVDs and health promotion materials. They can also provide support/advice to general practice around issues such as capacity and best interest, as well as identifying reasonable adjustments to improve compliance.

#### Are local lists (of people with LD who should receive health check) robust and how do we know?

6. **NHS England:** As part of the scheme, participating Practices are required to establish and maintain a learning disabilities 'health check register' of patients aged 14 and over with learning disabilities. This register should be based on the practice's Quality Outcomes Framework (QOF) learning disabilities register and any patients identified who are not already on the QOF LD register and are known to social services.
7. The practice should also continue to liaise with their local authority (LA) (or LAs where a practice has patients resident in more than one LA) to share and collate information. This is to ensure the register includes appropriate patients who are known to social services but who may not be included on the QOF LD register.

## What is the take up rate for Stockton Borough and local Practices?

8. Information from the Learning Disability Profile produced by **Public Health England** shows the comparison with north east regional local authorities for 2013-14:

Indicator	Period	England	North East region	County Durham	Darlington	Gateshead	Hartlepool	Middlesbrough	Newcastle upon Tyne	North Tyneside	Northumberland	Redcar and Cleveland	South Tyneside	Stockton-on-Tees	Sunderland
Proportion (%) of eligible adults with a learning disability having a GP health check	2013/14	44.2	56.6	51.8	50.6	56.7	42.9	60.4	59.4	69.0	76.1	61.4	45.7	39.6	46.4

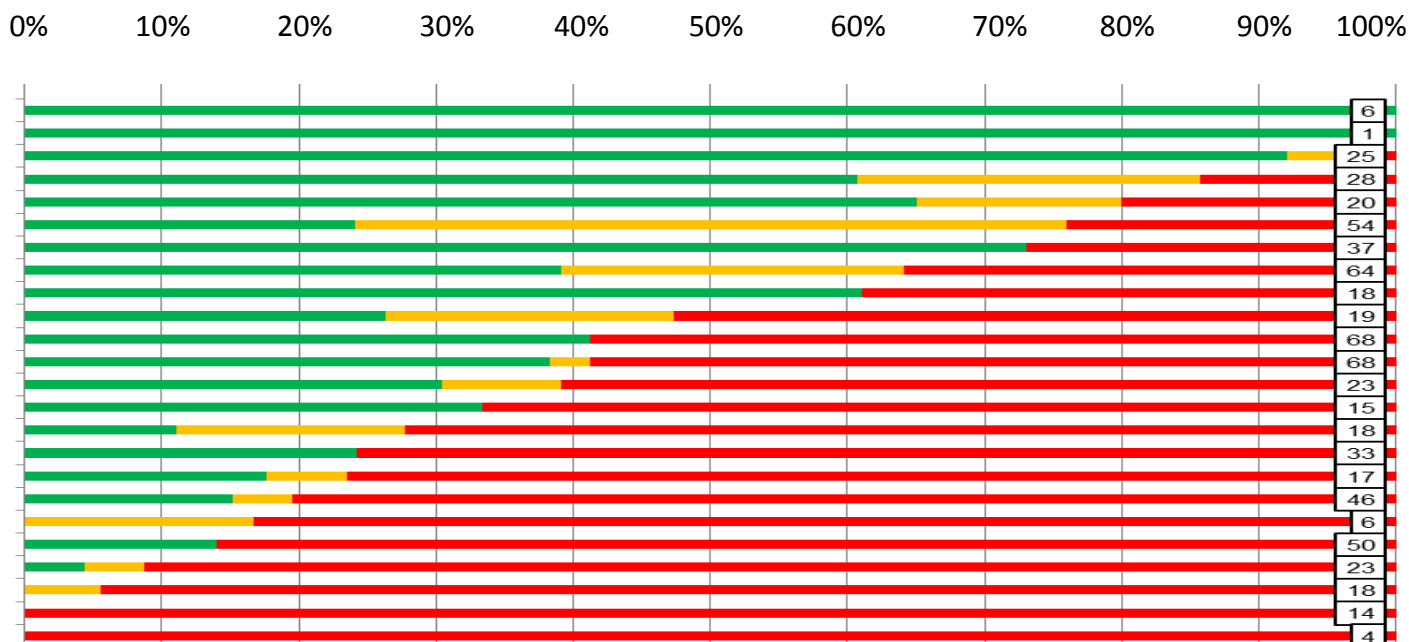
9. Latest information from the **CCG** on the number of people having a check is as follows:

Month of extraction: April 2015 Reporting period: 01/04/2014 - 31/03/2015	Stockton
Number of patients identified within the practice as being on the Learning Disabilities register	706
Of those, number of patients with recorded:	
Learning disability diagnosis	474
No diagnosis, but 'On Learning Disability register' recorded	232
Learning Disability severity	266
Number of patient identified within the practice as being on the Learning Disabilities register and >= 14 years old	675
Of those, number of patients with recorded:	
DES examination in the year 2014/15	235
Action plan reviewed / completed 2014/15	162
No DES examination or Action plan completed/reviewed 14-15, with any other LD assessment 2014/15	34

10. Within Stockton-On-Tees 33% of those people on the Learning Disability register have had a health check, the national target is 80%, although still below national average there has been an improvement from 13%.
11. Below is a graph which shows the variation in the number of health checks each practice carried out during the 2014/15 financial year. Each row represents a different practice, the number in the box within each row highlights the number of people recorded as having a learning disability within that practice. The green line highlights the percentage of people of the register who have received a health check, the orange refers to

other assessments carried out in practice not necessarily linked to a learning disability and the red is the percentage who have not received a health check during 2014/15.

Assessments recorded in April 2014 – March 2015 (for patients aged 14 and over), per Stockton Practice



Key:

**GREEN** - DES examination 2014/15; **ORANGE** – Other LD assessment and/or action plan 2014/15;

**RED** – No assessment 14/15

**Who monitors take up and what accountability arrangements are in place?**

12. **NHS England** as commissioner of the service is responsible for post payment verification. This may include auditing claims of practices to ensure that the number of health checks given does not exceed the number of patients on the agreed learning disabilities register. It may also include assessing the number of patients who have received health checks over the year, as well as the number of those who have received a health check but declined a health action plan, and the number of patients who have received a health check and are eligible for a health action plan but have not been offered one.
13. The **CCG**, although not responsible for commissioning health checks, has identified increasing the uptake as a priority.
14. The Clinical Commissioning Group focused upon improving the uptake of health checks at a clinical reference group, which is attended by general practice staff. The event provided an opportunity to ask practices about some of the barriers to completing more health checks, the main issue identified was in relation to the form which needs to be completed. The Clinical Commissioning Group has since worked with the Information team who develop the templates and changed it, which is being piloted in a number of practices to assess if it provides practices with greater flexibility to carry out more checks. The Clinical Commissioning Group will evaluate the potential positive and negative impacts of this change and implement widely if appropriate,

they are also exploring other approaches/initiatives which may have a positive effect on the numbers receiving health checks.

### What is the effectiveness of the check-ups and what help and follow up is available?

15. **NHS England** does not have access to individual patient data and therefore unable to respond to the effectiveness of the check-up. Practices however should use a suitably accredited protocol such as the Cardiff Health Check which should include as a minimum:

- A collaborative review, with the patient and carer (where applicable) of physical and mental health with referral through the usual practice routes if health problems are identified, including:
  - Health promotion
  - Chronic illness and systems enquiry
  - Physical examination
  - Epilepsy
  - Dysphagia
  - Behaviour and mental health
  - Specific syndrome check
- A check on the accuracy and appropriateness of prescribed medications
- A review of co-ordination arrangements with secondary care,
- A review of transition arrangements where appropriate,
- A discussion of likely reasonable adjustments should secondary care be needed,
- A review of communication needs, including how the person might communicate pain or distress,
- A review of family carer needs, and
- Support for the patient to manage their own health and make decisions about their health and healthcare, including through providing information in a format

16. Where problems or concerns are identified with patients, practices will be expected to address them as appropriate through the usual practice routes or via specialist referral if required.

### Other Health Initiatives for this Population Group

17. Additional information from the **CCG** is as follows:

18. In addition to health checks, promotion occurs within the learning disability population to encourage the uptake of the flu vaccine, screening and prevention programmes such as bowel, breast, cervical and lung checks all of which are recorded on general practice systems. The uptake of cervical screening is particularly low which is an area which is being reviewed at a regional level, any lessons will be applied locally.

19. There has also been a regional piece of work which has reviewed a number of deaths of people with a learning disability to identify any lessons to be learnt which can be applied in the hospital setting, and is currently being rolled out to the community setting.

### Support for people with a Learning Disability in Hospital

20. Within North Tees and Hartlepool NHS Foundation Trust there is a Learning Disability Specialist Nurse who can offer extra support for people in hospital with a learning disability. The nurse also supports a person before going into hospital by providing a tour of the hospital and services before having to access them. People can access a before surgery appointment to discuss any worries they may have before you come into

hospital for your surgery. They can also provide easy read material making any hospital tests or treatment needed easier to understand.

[Nb. the Committee will be receiving information on care within acute and community settings at a future meeting.]