



# The Learning Disability Diamond Acute Care Pathways





## Communication

**Play the Communication: speaking to people with a learning disability Mencap film.** <https://youtu.be/IyV1v-nib38>

All people can communicate and may use a variety of different means; many people with a learning disability have communication support needs, with half having significant difficulties. There is a wide range of communication difficulties but the barriers to successful communication are often due to the environment and other people.

Many people with profound and multiple learning disabilities can communicate but may have extremely limited communication which may be restricted to behaviours such as eye gaze and changes to facial expression.

All people with a learning disability communicate in a number of ways, both verbal and non-verbal.

Behaviour, including behaviours that challenge is often a means of communicating.

The environment and how the person is feeling play a pivotal role in enhancing or limiting effective communication.

It is the responsibility of hospital staff to understand, recognise, and take steps to address, the challenges of communication.

Clear and accessible information reduces barriers to accessing safe, effective and person-centred healthcare.

Effective communication may be facilitated by the involvement of family/carers.

Good listening skills and non-verbal communication are often the most important channels for communicating with people with a learning disability.

## Mental Capacity Act & Best Interest

**Play the following film**  
<https://youtu.be/tsthYJV0yig>

The 'Mental Capacity Act' is an important law for people with a learning disability. It protects rights to help people to make their own choices.

Where they are not able to make their own decision, the Mental Capacity Act says a decision must be made that is in their 'best interests'.

The Mental Capacity Act 2005 is a law that protects vulnerable people over the age of 16 around decision-making. It says that: *Every adult, whatever their disability, has the right to make their own decisions wherever possible.*

People should always support a person to make their own decisions if they can. This might mean giving them information in a format that they can understand (for example this might be easy read information for a person with a learning disability) or explaining something in a different way.

But if a decision is too big or complicated for a person to make, even with appropriate information and support, then people supporting them must make a 'best interests' decision for them.

### The Mental Capacity Act: 5 main principles

1. Always assume the person is able to make the decision until you have proof they are not.
2. Try everything possible to support the person make the decision themselves.
3. Do not assume the person does not have capacity to make a decision just because they make a decision that you think is unwise or wrong.
4. If you make a decision for someone who cannot make it themselves, the decision must always be in their best interests & well documented.
5. Any decisions, treatment or care for someone who lacks capacity must always follow the path that is the least restrictive of their basic rights and freedoms.

It's also important to remember that a person may have capacity for some decisions but not others, or they may not have capacity right now but may regain it in the future with support. This means all capacity decisions should be regularly reviewed to make sure they still reflect the person's ability to make decisions.



## Reasonable Adjustments

### Play the Treat Me Well Reasonable Adjustment film

<https://youtu.be/DMV06K1oanA>

Under the Equality Act 2010, all disabled people have the right to reasonable adjustments when using public services, including healthcare. These adjustments remove barriers that disabled people would otherwise face in accessing these services. Making reasonable adjustments means ensuring disabled people have equal access to good quality healthcare.

Reasonable adjustments can be simple changes made by one healthcare professional, or they can be more complex and need multiple teams to work together. Making reasonable adjustments can mean removing barriers that people with a learning disability face, or providing something extra for someone with a learning disability to enable them to access the healthcare they need.

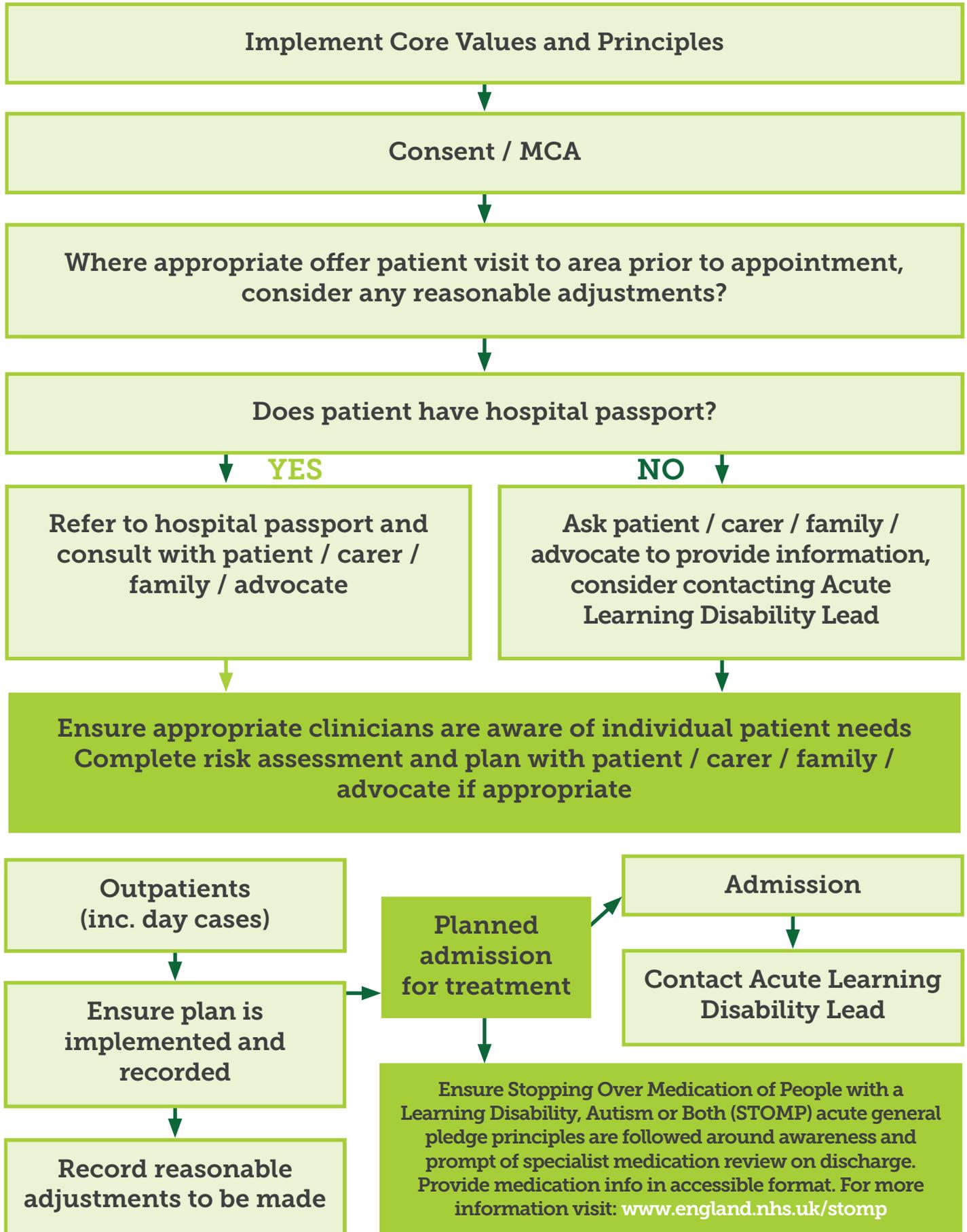
### Here are the Mencap 'Treat Me Well' top 10 reasonable adjustments:

1. Speak clearly and use simple words It is really important not to make assumptions that someone has understood information they have been given.
2. Take your time. People with a learning disability may need a bit longer than other patients to be able to understand information they are given and to make themselves understood. Just ten extra minutes can make a big difference to many people.
3. Work with supporters. This could be a support worker or family member. Supporters can be really important, particularly for people with profound and multiple learning disability, but remember to talk to the person directly and support them to make decisions - supporters are there to help you do this!
4. Be flexible with appointment times. Many people with a learning disability will find it easier coming to hospital when it is quieter, so an appointment at the very beginning or very end of the day might make their appointment go more smoothly. They may also need an appointment at a time when their supporter is able to accompany them.
5. Make sure people can get into and around the hospital. This includes ensuring there are no physical barriers for people using wheelchairs or with mobility issues, but also making sure signs in the hospital are as easy to understand as possible.
6. Provide a quiet place to wait. Hospitals are often busy, noisy places and this can be overwhelming for many people with a learning disability. Having a quiet place to wait can prevent people getting anxious and having to leave the hospital. Many people also find waiting a long time very difficult.
7. Listen to your learning disability liaison nurse. Most hospitals have learning disability liaison nurses who know lots about reasonable adjustments and can help you to support your patient. Ask your learning disability nurse if you know you will be seeing a patient with a learning disability.
8. Use hospital passports. These are a patient-held, personalised record of what people with a learning disability have hospital passports and reading them will make your job a lot easier!
9. Provide written information in Easy Read format. This means people are much more likely to read and understand information about their appointments, procedures and results. This is also a requirement of the NHS's own Accessible Information Standard.
10. Always ask the person what they need. Reasonable adjustments are about what the person in front of you needs and they know that better than anyone and any family or carers with them and do your best to provide the support they need.

To find out more information please visit the Mencap Treat Me Well campaign. <https://www.mencap.org.uk/get-involved/campaign-mencap/treat-me-well>



# Learning Disability Planned Admission Pathway



# Learning Disability Acute Emergency Pathway

Patient with learning disability attends A&E/Urgent Care/EAU

## During assessment

- Check Alert Codes on record on clerking document
- Refer to hospital passport
- Consider use of Summary Care Record with Additional Information and check for Reasonable Adjustment Flag
- Consider reasonable adjustments e.g. reduce waiting times where possible, utilise quiet areas where appropriate, allow extra time to explain and complete treatment/investigations and ensure reasonable adjustments are documented
- Utilise family, paid carer or advocate

Is patient going to be admitted?

- Offer hospital passport

**ADMISSION** ↓ **YES**

Handover documentation should include:

- MCA documentation
- Learning disability is flagged and description of reasonable adjustments
- If additional staffing support is required follow local process
- Carers to be encouraged to stay with the patient

**NO** ↓ **DISCHARGE**

Follow Discharge Pathway

If further advice or support is needed, if a patient does not have a learning disability electronic flag on their notes please contact the Acute Learning Disability Lead

# Learning Disability Discharge Pathway

