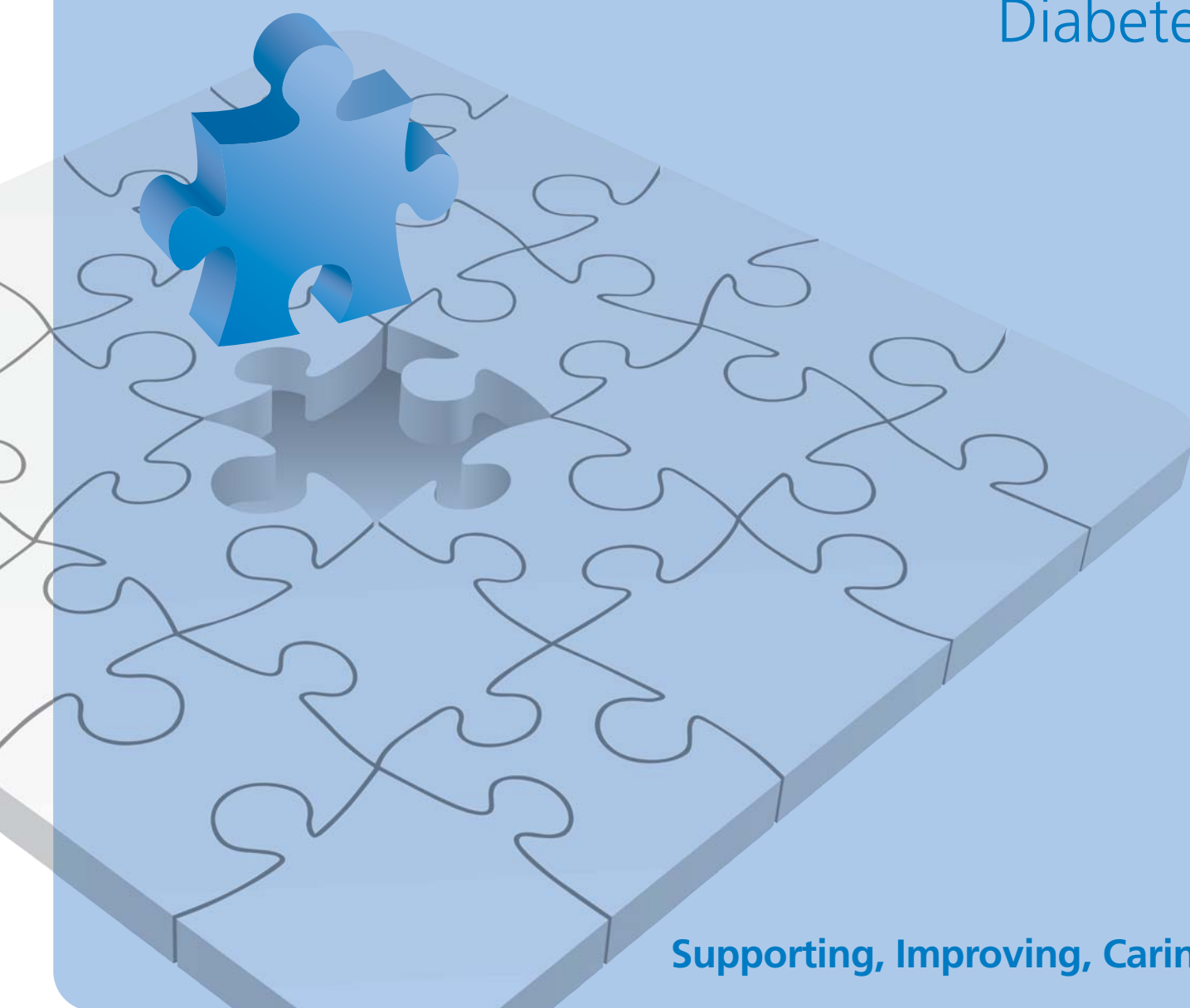


Commissioning for People with Learning Disabilities who have Diabetes



Supporting, Improving, Caring

NHS Diabetes Information Reader Box	
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Commissioning Diabetes and People with Learning Disabilities

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Sue Carmichael Learning Disabilities Policy Team, Department of Health

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Features of a service that is responsive to People with Learning Disabilities who have Diabetes

When using the commissioning guides to commission different aspects of diabetes care, commissioners should ensure that the needs of people with learning disabilities are embedded into the service.

Commissioners are also referred to the Standard NHS Contract for Mental Health and Learning Disability Services to ensure that the relevant legal requirements are met for this care group.

The features or characteristics identified below are based on the following key documents that should underpin the development of services for people with learning disabilities

- Valuing People Now: A New Three-Year Strategy for people with learning disabilities¹
- Valuing People Now: The Delivery Plan²
- Improving the health and wellbeing of people with learning disabilities³
- Primary Care Service Framework: Management of Health for People with Learning Disabilities in Primary Care⁴

The following features highlight the specific actions that need to be implemented in order to ensure that a service is responsive to the needs of people with learning disabilities who have diabetes. It is essential that:

- diabetes networks develop links with Local Authority Learning Disability Partnership Boards to ensure that individuals have their needs met appropriately across all services and that effective adjustments are made to take account of individual disabilities
- there is an identified lead clinician within the diabetes service who has overall responsibility for ensuring access to services for people with learning disabilities
- health and social care staff are aware of the fact that people with learning disabilities are more likely to experience 'diagnostic overshadowing' – that is reports of physical health being viewed as part of their learning disability and so are not investigated. So individuals and their families may not understand the importance of specific symptoms, e.g. symptoms of possible diabetes, and careful checking without symptoms being reported may be necessary as well as additional investigations. Clinicians need to be additionally vigilant
- people with learning disabilities who receive an annual health check from their GP have included screening for diabetes
- general practice registers include people with learning disabilities – this may mean linking in with Local Authority and PCT databases in developing systematic call/ recall process. This should be communicated to family carers and support workers.

¹ Department of Health, Valuing People Now: A New Three-Year Strategy for people with learning disabilities, Jan 2009
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_093377

² Department of Health, Valuing People Now: The Delivery Plan, Jan 2009,
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_093378

³ Department of Health, World Class Commissioning for the health and wellbeing of people with learning disabilities, Nov 2009,
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_109088

⁴ Primary Care Service Framework: Management of Health for People with Learning Disabilities in Primary Care
www.primarycarecontracting.nhs.uk/uploads/primary_care_service_frameworks/primary_care_service_framework__ld_v3_final.pdf

- where there are linking and alert systems in acute hospitals, diabetes information is included
- people with learning disabilities who are in the criminal justice system receive diabetes care
- diabetes health care professionals are competent to manage and support people with learning disabilities who have diabetes, and can call on additional support from a learning disability specialist, e.g. learning disability specialist nurse, if required
- people with learning disabilities who are diagnosed with diabetes have prompt access to diabetes services with reasonable adjustments to meet their individual needs
- each patient has a patient-held individualised care management plan (Health Action Plan/ Person Centred Plan) which has information on services and on improving and maintaining health. This should link in with the diabetes care plan
- Health and social care staff should have training and have continuous professional development in understanding, promoting access and delivering the service according to the needs of people with learning disabilities
- all information is available in easy to read formats to allow access to read and review information where possible, and picture and other formats are based on the individual's communication requirements
- allowance is made for additional time to explain and review new information to ensure there is understanding, and additional appointments are made, if necessary, to repeat and confirm the information given to ensure confidence and understanding.

Commissioners should bear in mind the following specific health issues for people with learning disabilities who have a greater probability of developing diabetes:

- People with Down's Syndrome who have diabetes have a higher rate of cardiovascular complications compared to able bodied people with diabetes
- People with Prader Willi syndrome, a rare disorder that is characterised by weak muscle tone, hypogonadism, obesity, central nervous system and endocrine gland dysfunction which causes, amongst others, varying degrees of learning disability, are susceptible to developing diabetes
- People with learning disabilities tend to have higher rates of obesity and therefore may have a greater probability of developing type 2 diabetes
- People with Down's Syndrome have an increased incidence of early onset dementia. This will have an impact on the capacity of the individual to manage their condition, therefore personal management plans need to be reviewed accordingly.

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