

Directed Enhanced Service for annual health checks for people with learning disabilities

February 2009

Frequently asked questions

These FAQs were collected from a number of different conferences and events and this document aims to address some of the queries that were raised with regards to the implementation of the Directed Enhanced Service for people with learning disabilities. This document should be consulted in conjunction with the more specific guidance and audit requirements for the DES for the GMS contract which will be published shortly.

There were three areas of enquiry:

- Set up and maintaining a register
- Training
- Annual health check

1) Set up and maintain a register of people with learning disabilities

[What about those with less severe needs but who have some other additional health need?](#)

The DES is targeting the provision of health checks towards adults with a learning disability who have the most complex needs and therefore are at the highest risk from undetected health conditions and will benefit most from receiving an annual health check.

People with learning disabilities known to Social Services (approximately 240,000 people in England) through a request for social care support are likely to be people with moderate/ severe learning disabilities or people with mild learning disabilities and additional complex needs and it is these people that should be identified by each local authority and this information shared with corresponding PCT's to enable health checks to be offered.

People who have a mild learning disability should still be identified as part of the learning disability qof register. GP practices are already being awarded four qof points to maintain a register of all people with learning disabilities. Whilst these people are not eligible for an annual health check under the DES, PCTs and GP practices should consider that these people may be covered under the Disability Discrimination Act 2005. This means that reasonable adjustments should be made to services and initiatives such as smoking cessation or diabetes clinics to include this group. This will ensure that health needs are addressed as part of wider health promotion initiatives. Guidance on commissioning healthcare that is accessible to people with learning disabilities and a guide on reasonable adjustments as they relate to people with learning disabilities will be published shortly.

What if the GP considers the person to have a moderate or severe disability, who is not currently on the local authority list?

We expect that most people with moderate and severe learning disabilities are already known to the local authority. There may be times when the person is eligible to receive services from the local authority yet is not known to them. In this case the person could be referred to the local authority. However referrals should only be made if it relates to a request for an assessment for support services from the local authority and not to ensure that the person is eligible for an annual health check. It is also imperative that the person gives consent to this referral.

What about young people in transition – what age is covered?

The DES applies to adults with a learning disability aged 18 and over. Most areas have in place transition arrangements between children and adult services and these will be able to provide information on people with learning disabilities who turn 18 in the future and thus become eligible for an annual health check on their 18th birthday.

What about people who were assessed by local authorities in the previous counting year, and were not eligible for services, and have not been reassessed this year?

PCT and GP practices can include these people as the definition for the DES and the underpinning Vital Sign Indicator is:

“Learning disabled clients known to Councils with Adult Social Services Responsibilities (CASSR): Those clients who are assessed or reviewed in the financial year and who have received a service, **as well as those who are assessed and/or reviewed but who have not received a service**. In addition include learning disabled clients who should be reviewed by the CASSR in a financial year but are not.”

How will individuals be identified, who have been placed by a local authority from outside the area in which an individual is registered with a GP?

There will be some people in residential care, or other care provision, whose ordinary residence is outside the local authority area they were initially registered with. These people are entitled to use their local health services and will be able to take up the scheme.

It is good practice for the new host local authority to be informed of these placements, so we anticipate that the local authority has already records of those individuals which they in turn could share with the PCT.

In addition, Local Authorities who place people in out of borough placements should enable managers of care homes or care providers to bring this population to the attention of the GP and the PCT. Strategic health facilitators, care managers and placement monitoring officers can play a very helpful role in encouraging full take up.

For those individuals who are registered with a GP in Wales, a similar DES exists. There is however no equivalent service in Scotland.

2) Undertake awareness raising training for practice staff

What about practices that have received some training, but it does not fulfil the key content outlined in the specification. Do the health checks they have carried out not count towards the vital sign?

It is important that practices undertake training prior to carrying out health checks and we would encourage people locally to follow the guidance on training provided in the DES as it will enable more effective health checks and will assist the practice to make reasonable adjustments to their service.

Ultimately it will be for each PCT to determine whether individual practices have met the requirements of the DES specification. If GP practices can demonstrate to their local PCTs that their continued professional development has covered the training component of the DES then there should be no reason why the health checks undertaken won't count towards the vital sign.

Some GPs have started to develop an e-learning tool to provide information for the training:

www.gptom.com

However it is important that practice staff supplement any e-learning training with locally provided face-to-face training which involves self advocates with a learning disability to enable sharing of experiences.

If there are concerns about availability of training they can contact their strategic health facilitator (where available) , PCT lead for learning disabilities, regional valuing people lead or the strategic health authority learning disability lead for advice and support.

www.valuingpeople.gov.uk/dynamic/valuingpeople40.jsp

3) Annual health checks

Is there an evidenced based annual health check for people with learning disabilities?

The DES guidance based the annual health check on the Welsh model, or Cardiff health check because they have provided a DES for a couple of years. There are examples of electronic templates for annual health check for people with learning disabilities on the Primary Care Contracting website which PCTs can access and download. We have also provided a list of READ codes alongside this document from which a local agreed template can be designed . The DES specification outlines the minimum content of the health check. We will shortly provide the specification and an updated health check template on the Primary Care Contracting website. PCTs will have to satisfy themselves that local GP practices use a health check that conforms to the specification laid out in the DES guidance.

www.pcc.nhs.uk/204

Useful contacts

For regional queries please contact your valuing people regional lead or your strategic health authority lead:

www.valuingpeople.gov.uk/dynamic/valuingpeople40.jsp

For more general strategic queries, please email Helen Mycock on helen.mycock@eastmidlands.csip.nhs.uk

or Stephan Bruschi on stephan.bruschi@westminster-pct.nhs.uk