

Complex physical health needs pathways for people with learning disabilities

Allocate a health coordinator



Work in partnership with the person, their carers and other people involved in their health care



Identify health needs



Identify unique barriers to accessing good health care and good health outcomes



Ensure annual health check and specific health assessments and reviews are completed



Ensure health action and management plans created and updated based on the person's individual needs and enable the development of effective, personalised packages of ongoing health care



Follow up actions identified through health check



Create individual care pathways to reduce hospital admission, improve communication and enable best treatment and better partnership working



Ensure individual hospital passport (including plans to support family carers) is created and up to date



Ensure regular evaluation and person centred review of care and treatment

Glossary

Annual Health Check - a health check every year for people with learning disabilities

Focus on Prevention - doing things to help to keep you well

Health Action Plan - a plan to help you be healthy

Health coordinator - a person who helps you to be and stay healthy and makes sure other health professionals know what the plans are

Health Passport - a book that tells health workers about you and your health. It tells people good ways to talk and listen to you

Pain picture - a description of how people can tell if you are in pain if you can't tell them yourself

Personal Budget - money given to people to pay for things like care and support. A personal health budget is money to pay for a person's care needs when they have a lot of health problems

Protocol - an agreement on what people what should do
Reasonable Adjustments - changes people or services must make so everyone can get the same service

Supervision - a meeting between two or more professionals to think about how they can help someone

Health Surveillance - checking how you are so we can tell when your health is changing

Therapeutic Interventions - health professionals helping someone to feel better

The person's health action plan will include how to support and manage risks associated with:

- Pain
- Swallowing difficulties
- Epilepsy and seizures
- Mobility and positioning needs
- Long term health conditions
- Weight management
- Safeguarding

The health co-ordinator will be someone who has a significant role with the person and who is well placed to act as a point of contact (e.g. hospital consultant, community nurse, physiotherapist), to facilitate, coordinate and liaise with all the people involved in a person's care to ensure that:

- there is clear communication between people involved, partnership with the person (or their advocate) and their family
- barriers to good health care are minimised the pathway is facilitated and up to date plans are in place



A pathway for people with learning disabilities and complex physical health needs

There are many barriers to health care for people with learning disabilities, not only due to a limited understanding of their ordinary, but also their additional and often complex health needs.

The 'My Health Pathway' was created to act as a good practice guide, or checklist for the person with a learning disability, their families, carers and the varied health and social care professionals involved in their care. We hope that it will help reduce barriers to care, encourage joint working and that the person centred approach ensures the best health outcomes possible.

The health coordinators role will be crucial in this process, ensuring there is sufficient support and equal access to all health services, but if they are to be successful, support from providers of health and social care at every level is important

"This leaflet has been designed by health and social care professionals in close cooperation with people with learning disabilities, their families and carers. By using it regularly, in the community and in hospital settings, I hope we will share accessible information to improve the standards of care we provide to all." Dr Sherman GP

Whittington Health 
Barnet, Enfield and Haringey 
Mental Health NHS Trust

My Health Pathway was the outcome of a working group hosted by

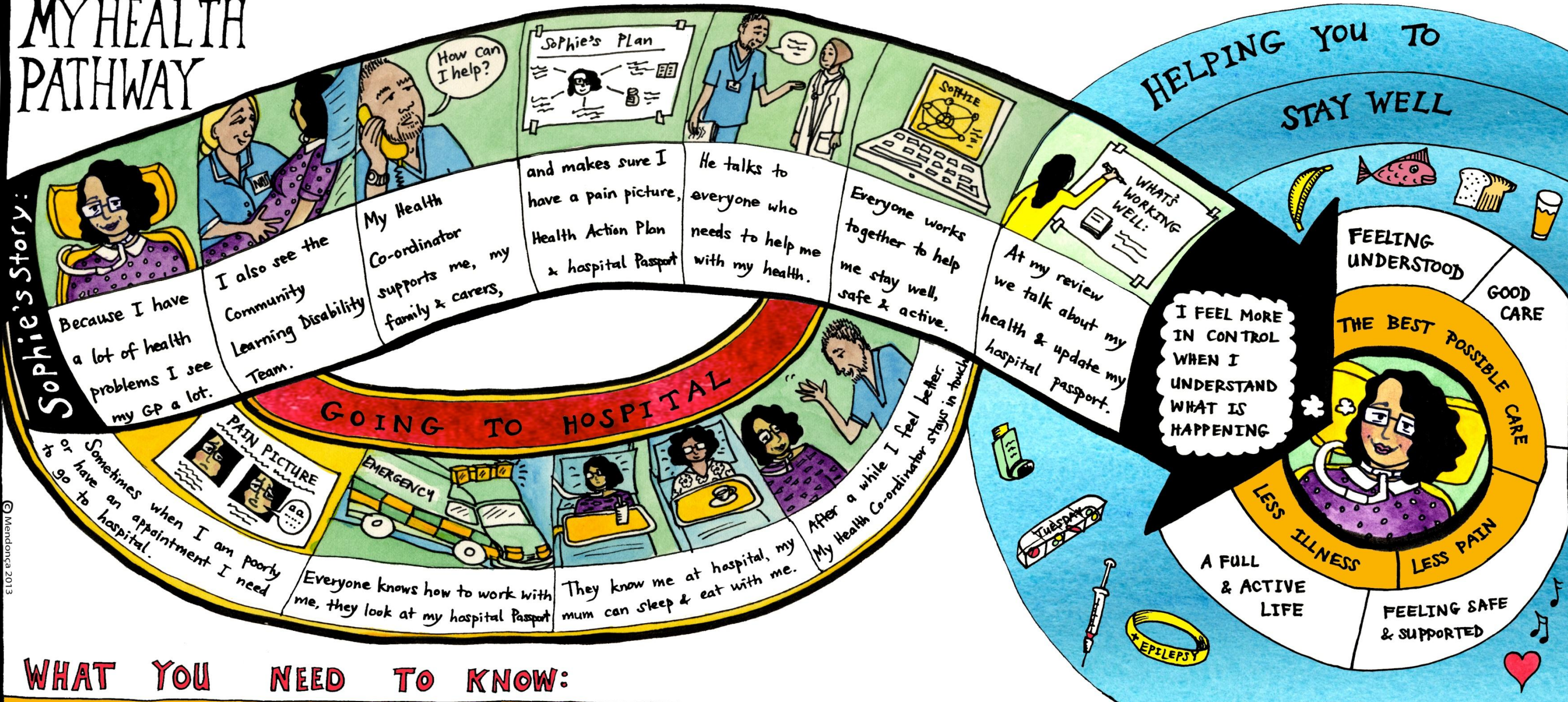
Haringey Learning Disabilities Partnership with Funding from NHS London (2013)



Haringey Council

MY HEALTH PATHWAY

Sophie's Story:



WHAT YOU NEED TO KNOW:

FIRST STEPS

WHAT WE NEED TO KNOW ABOUT:

- Your health history
- Your current health needs
- How you communicate
- Your views, family/carer views
- Your medication & treatment
- Your understanding about your health
- What helps you stay in control of your health

WHAT NEEDS TO BE IN PLACE:

- A HAP, hospital Passport & pain picture
- Personal Budget (if you have one)
- A plan for emergencies
- Good communication
- Health coordinator
- Circle of Support
- Health check at least yearly
- Everyone knows how to keep you safe

IN AN EMERGENCY

WHAT WE NEED TO KNOW ABOUT:

- Your emergency plan
- How you communicate
- Ambulance protocol (personal)
- Hospital protocol (personal)
- Your carer's needs
- Reasonable adjustments we can make
- How to keep you safe

WHAT NEEDS TO BE IN PLACE:

- Pain picture, HAP, passport
- Health coordinator informed
- Quick hospital admission
- Good care when needed
- Focus on illness (not disability)
- Assessments to see what's wrong
- Support/breaks for carer
- Named link person at hospital

STAYING HEALTHY

WHAT NEEDS TO BE IN PLACE:

- Named health coordinator
- Focus on prevention
- Training, support, supervision for paid carers/health workers
- Health surveillance
- Everyone keeping you safe
- Therapeutic interventions
- Medication, aids, equipment

A CHECKLIST FOR YOUR REVIEW:

- Has safe care been developed?
- Reasonable adjustments made?
- Yearly health check done?
- Plan for prevention of unnecessary hospital admissions?
- HAP etc... up to date?
- Good healthcare received?
- Good experience of health care services?

HAP = HEALTH ACTION PLAN