

Remember!

Waiting is the hardest part of the visit

- Minimise waiting times.
- Try to perform the procedure/visit immediately without waiting.

People may have exceptional long term memories!

- A good experience may result in better cooperation or less anxiety at the next visit.

- A negative experience will make future visits very difficult

Caregivers/and family members often know best

- Always ask what works best and what to avoid.
- Ask about communication, understanding, previous experience abilities and sensitivities (touch, smell, noise etc).
- Use the caregivers approach to the patient as a guide for interacting and involve them in the appointment.
- Caregivers are not medically /clinically trained—be supportive and understanding.

An accepting attitude is critical

- Speak directly to the patient. Show them you value them.
- Be prepared to work from the patients perspective, or follow a patient around—a flexible and relaxed approach is essential.
- Use a gentle tone of voice and minimise words and touch.
- Allow the patient to touch and hold equipment before it is used.

Adjust the physical environment where possible

- Reduce sensory stimulation and interruption.
- Remove unnecessary clinical equipment if required.

Focus on the positive

- Compliment the patient on cooperative behaviour.
- Ignore behaviours that might seem odd (e.g. unusual vocalisations or body gestures)

For further information or support...

Joint Community Learning Disability Team, Shropshire ☎ 01743 254080
Joint Community Learning Disability Team ☎ 01952 202600
Telford & Wrekin
Adult Learning Disability Division (Health) ☎ 01743 261181

Acknowledgement to Warrington PCT

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Your next patient has a
learning disability.....



A practical guide for health care professionals
to effectively meet the needs of patients with
a learning disability

A learning disability is....

"A significantly reduced ability to understand new or complex information, to learn new skills (impaired intelligence), with a reduced ability to cope independently (impaired social function), which started before adulthood and has a lasting effect on a person's development."

(Valuing People, DoH 2001)

People with learning disabilities share a set of core difficulties, although these may be more or less prevalent depending on the individual. These difficulties include;

- **Comprehension** - understanding what is said or meant
- **Expression**—making themselves understood and expressing needs
- **Attention**—may be limited
- **Perception**—of events, language and the world we live in may differ
- **Short term memory**—often limited
- **Coping with change**—this is often a challenge

The health care visit

It is essential that the health care team be creative, and flexible and, where possible, prepare in advance. Below are some steps to follow to make the appointment a success.

- **Pre-assessment** a short telephone conversation with a caregiver could make all the difference.
- **Communication.** Consult with caregivers for tips that work. They are your greatest allies and they are best experts on this person. How much language does the person understand? Can they consent to treatment?
- **Planning.** based on the person's needs and sensitivities. eg a quiet waiting area for someone who is sensitive to noise, or seeing a patient in a different room where there is less equipment.
- **Be familiar** with communication and behavioural skills to promote compliance. Find out who your learning disabled patients are and start to build relationships with them. This will pay dividends in the future.
- **Investigate** all possible causes. Challenging behaviour is not part of learning disability—it may be a person's only way of telling us something is wrong. Examine patients properly and rule out all other causes before assuming psychiatric or psychological causes.

Techniques to use with people who have learning disabilities:

Address the person using their chosen name.

Do not just talk to caregivers. Engage the patient in their own care and talk

to them, even if the carer needs to answer on their behalf.

Choice

If possible, offer choices on appointment time, who the patient would prefer to see and where they would prefer to be seen.

Extra time

Plan to spend at least twice as long with people who have a learning disability. This way, neither you or they will be rushed and you will have time to have a more fulfilling appointment.

Imitation and Role Modelling

Use objects and equipment to represent the patient and procedure—using a pen to symbolise an injection etc. Also, demonstrate non-invasive techniques on yourself or a carer, like taking a blood pressure measurement.

Visuals

For patients who have difficulty with language, procedures can be explained using pictures or photographs showing what will happen and will be expected of them

Consent

- This is a big concern for health professionals. English law states that everyone should be deemed capable of giving consent until an assessment proves otherwise.
- If a patient does not, in your opinion, have capacity to agree to or refuse treatment, you are legally obligated to act in their overall best interest.
- Complete Consent Form 4 and make sure you talk to the people who know the patient best before making your decision.
- If in doubt, seek advice from the Community Team or Learning Disability Division