



briefing

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Equally accessible?

Making mental health services more accessible for learning disabled or autistic people

Key points

- Providers can put in place many reasonable adjustments to make it easier for learning disabled or autistic people to use and access services.
- Health checks at the GP surgery should include mental health state, and adjustments should be made to appointments, including timing and duration.
- Information about medication should be provided in accessible formats, and referral to inpatient services should take account of how autistic or learning disabled people cope in unfamiliar environments.
- Commissioners and local authorities need to work with health and wellbeing boards to plan integrated services that meet the needs of those with autism or learning disabilities.

People with learning disabilities or autism deserve equal access to mental health services and good treatment, but they currently receive variable treatment across England. The law requires that mental health services make reasonable adjustments to services and facilities, so that people with autism or learning disabilities can use them and do not face discrimination.

This *Briefing* summarises a study, commissioned by the Mental Health Network, and funded by the Department of Health, that highlights some of the innovations made in local mental health services in England.

Background

In February 2012, the NHS Confederation's Mental Health Network, funded by the Department of Health, commissioned the National Development Team for inclusion (NDTi) to undertake a study into what the law calls 'reasonable adjustments' that should be made to mental health services to enable people with autism and people with learning disabilities to have equal access and effective treatment.

NDTi's research focused on adult mental health services in England. People were invited to contribute

by email and phone, and meetings were held with people who use services (experts by experience), family carers and healthcare professionals.

The report concentrates on the elements that can help mental health services respond well to the specific needs and situation of people with autism and people with learning disabilities by highlighting pioneers of good work. However, the report also describes "a disappointing story of service failure" in some areas and "the stark and overwhelming message" heard from people with learning disabilities, autism and their

families “of a failure by services to meet their legal obligations to ensure equal access to services.”

Legal requirements

It is a statutory requirement under the Equality Act 2010¹ and the Health and Social Care Act 2008² that public sector agencies make ‘reasonable adjustments’ to their practice to make them accessible and effective for all, including people with autism, learning disabilities, mental health issues, or a combination of these. This means changing services so that they are easier to use.

Government policy

Various policy has addressed the issue:

- *No health without mental health* – the Government’s strategy for high-quality mental health services that are accessible to all.³
- *Fulfilling and rewarding lives* – the Government’s strategy for adults with autism.⁴
- *Valuing people now* – the Government’s ambition for learning disabled people.⁵

The importance of advocacy

Family carers can play a vital role in helping people with a mental health difficulty seek help – a role that staff should acknowledge and encourage. It is also important that advocacy is provided.

In Westminster, mental health commissioners have employed an advocate to support people with learning disabilities using mental health services. The advocate has brought together a group of experts by experience who conducted a review of mental health services to ground their subsequent training activities in local experience.

Advocacy, whether in the form of small, specialist and local advocacy organisations, or professional advocacy by larger generic agencies, can help people gain skills and increase their confidence to be able to use and access services when they need to.

Advocacy should be available to everyone who needs it, especially people who are in residential settings, those who have few

choices and those subject to legal restrictions.

Health checks

Care workers and primary care staff should be trained so they can recognise the needs of people who have any combination of mental health issues, autism and learning disabilities. A checklist⁶ is available to help care staff develop their skills in responding to people with autism. Improvements can also be achieved through staff training (see below). Health checks, including a person’s mental health state, should be carried out at the GP surgery.

Appointments and treatments

Adjustments should be made to appointment times, duration and interventions with the doctor.

Recording systems in GP practices should identify people with autism, learning disabilities, mental health issues, or a combination of these, and show any reasonable adjustments they require, such as easy-read appointment letters and reminder phone calls or texts. There should also be more frequent contact in the time spent waiting for an appointment, so people know they are not forgotten.

A range of treatments and approaches can be appropriate. While some people need talking treatments to avoid metaphor or complexity, other people are hypersensitive to medication,

What are reasonable adjustments?

‘Reasonable adjustments’ are changes to services to make them easier to use and access. This includes:

- removing physical barriers
- having clear signs in buildings, giving directions
- using pictures and large print on appointment letters
- making alterations to policies and procedures
- change staff training and service delivery to ensure they work equally well for people with learning disabilities or autism.

Key questions for boards to consider

- Is the organisation meeting its legal obligations to provide all people, including those with learning disabilities and autism, equal access to mental health services?
- Has the organisation recently looked at the issues of making reasonable adjustments to services so they are easily accessible for people with learning disabilities and autism?
- How can specialists best support mainstream services to make adjustments for this part of the population in terms of equal access?
- How can innovation and good examples of equal access to mental health services for people with learning disabilities and autism be accessed and replicated locally?
- Is the organisation ready to work with health and wellbeing boards, local commissioners and local authorities to plan integrated services that ensure equal access to mental health services for all of the local population?

so prescriptions should begin at below average dose and increase gradually, with careful monitoring for side-effects.

Self care

Alternative ways in which autistic or learning disabled people can be involved in managing their psychological and emotional wellbeing include: social prescribing; the involvement of peer experts and mentors; health trainers; psychological wellbeing practitioners; cognitive behavioural treatments; and access to offline and online peer support groups.

Psychological therapies

Staff should offer psychological therapies. In Greenwich, there are plans to create a specialist IAPT (Increasing Access to Psychological

Therapies) service for people with learning disabilities.

Such services have had reasonable adjustments made to them to make them more accessible, such as giving presentations and handing out leaflets at learning disability events; offering home visits; extended appointments; providing large print and audio materials; and involving family members in assessment and interventions when necessary.

Information

Information about medication and other treatments should be provided in accessible formats. The need for referral to inpatient services and other specialists should take account of how autistic or learning disabled people cope in unfamiliar environments.

Avon and Wiltshire Partnership NHS Trust ensures that people with learning disabilities have their own 'hospital book', which provides useful information to the inpatient team about how the person prefers to communicate, their preferences and support needs.

Specialist teams and services that assess and treat people with complex needs should also help mainstream services to respond well in their turn, and discharge planning needs to accommodate the distinctive support needs of autistic and learning disabled people.

The criminal justice system

It is important that agencies in the forensic and justice fields make reasonable adjustments. In some services, adjustments are coordinated by a learning disability practitioner, for example, Bristol Court Assessment and Referral Service and Prison Mental Health Service. Similarly, there are registered nurses (learning disabilities) at Ashfield Youth Offender Institution and staff there have been trained in working with people with autism.

Effective local services

People with learning disabilities or with autism need to be identified and their needs taken into consideration when the health needs of a local population are being considered.

Clinical commissioning groups (CCGs) and local authorities

should work with health and wellbeing boards and the local community to plan integrated services that meet the needs of the whole community, particularly those who are vulnerable and have the worst health outcomes.

There is a risk that people with a combination of needs will be neglected. It is important, therefore, that people with autism or learning disabilities, in addition to a mental health issue, are included in the Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy.

In Lancashire, a trust and several PCTs have promoted local rather than out-of-area placements, whenever possible, for people with learning disabilities and co-occurring mental health needs.

Monitoring

It is important that services know what they should be doing, so that they can check they are getting it right. The *Getting it Right charter*,⁷ for example, sets out what healthcare organisations may commit to in all their activities.

Good monitoring is a blend of national and local requirements. The Government is currently consulting on proposed changes to national data collection systems for monitoring. Meanwhile, local mental health services are monitoring certain factors to ensure that people with autism or learning disabilities receive a good service. These include consent to treatment, reasonable adjustments, safety,

untoward incidents, local provision of mental health services and disability equality.

Reasonable adjustments can be made to governance arrangements, policies and procedures, and people with autism, learning disabilities and mental health issues can be involved in the design, day-to-day management and evaluation of the organisation.

For example, Leicestershire Partnership NHS Trust has elected a person with learning disabilities to its shadow governing body. Derbyshire Healthcare NHS Trust has developed a care pathway for people with learning disabilities and dementia. Avon and Wiltshire Mental Health Partnership NHS Trust has established a benchmarking club for all inpatient mental health wards, as well as carrying out an annual rating against seven clearly defined performance indicators related to the experience of learning disabled people on the ward.

Environment and workforce

Buildings need specific design and furnishing to meet the needs of people with learning disabilities and autism. Some adjustments may help including:

- meeting in a north-facing room with natural light
- offering a home visit
- allowing the person to move in and out of the interview at will
- wearing calming clothing

'Clinical commissioning groups and local authorities should work with health and wellbeing boards and the local community to plan integrated services'

- allowing inpatients to leave a bedside light on through the night.

At an organisational level, co-locating staff who work in autism, learning disabilities and mental health services can help ease communication flow, while other agencies have changed furnishings and fittings to accommodate people's needs.

Training for staff

The workforce needs to be trained and supported to deliver a high-quality service. When health professionals qualify, often they have not been given much information on how to work with people who have a combination of needs. Advice is, however, available. Even a small amount of training can help mental health staff become more confident and effective in responding to people with learning disabilities.

Working across traditional boundaries

It is possible for staff to remodel and deliver interventions by working across traditional boundaries. For example:

- family or systemic therapy can be adjusted to become accessible to learning disabled people

'Even a small amount of training can help mental health staff become more confident and effective in responding to people with learning disabilities.'

- speech and language therapists at Rampton Hospital have adapted dialectical behaviour therapy
- psychotherapists at Somerset Partnership NHS Foundation Trust have used 'sandplay' with adults who have difficulty with words
- arson treatment can be used with people with autism or learning disabilities.

Some people will need expertise from two or more teams, so staff need to work together and navigate differences in approach, language or priorities. There are various ways to do this:

- Lancashire Care NHS Foundation Trust runs a dedicated liaison service
- Mid Yorkshire Hospitals NHS Trust has an initiative to train and support 'champions' on an ongoing basis – a training course equips staff in acute hospital settings to take on additional responsibilities surrounding the care, treatment and patient experience for people with learning disabilities or autism.

Actions and approaches implemented in England

Actions and approaches that have been taken by individual services across England include:

- Specialist learning disability or autism services have facilitated access to mainstream mental health services rather than doing it themselves and setting up more specialist services.
- Individuals have met with mental health professionals face to face rather than over the phone or via written assessments.
- Meetings have taken place in familiar surroundings and with friendly support to give the person the opportunity to choose where to meet the mental health professional and who they would like to be there to support them.
- Services have learned to be flexible in both their organisational procedures and in the practice of professionals.

Mental Health Network viewpoint

Adjusting mental health services to accommodate people with autism or learning disabilities will meet legal obligations but, just as importantly, it will also improve service quality for everyone.

There are a significant number of examples of good practice and innovations in local mental health services around England, but good practice is still far from common practice.

Much more needs to happen to ensure that people with learning disabilities and people with autism get a good deal in mental health services and that legal requirements are met. Many issues need to be resolved: differences in

eligibility thresholds; effective health promotion; access to sophisticated assessment; the availability of evidence regarding efficacy of particular interventions; and how specialists can support mainstream services to make adjustments.

However, the examples of good practice highlighted in *Reasonably adjusted?* should encourage all parties – people using services, staff and family carers – to find ways of ensuring that people with autism, learning disabilities, mental health issues or a combination receive fair and equal treatment.

Further information

National Development Team for inclusion: www.ndti.org.uk

References

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The Mental Health Network

The NHS Confederation's Mental Health Network (MHN) is the voice for mental health and learning disability service providers to the NHS in England. It represents providers from across the statutory, for-profit and voluntary sectors.

The MHN works with Government, NHS bodies, parliamentarians, opinion formers and the media to promote the views and interests of its members and to influence policy on their behalf.

For further details about the work of the MHN, visit www.nhsconfed.org/mhn or email mentalhealthnetwork@nhsconfed.org

Further copies or alternative formats can be requested from:
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