

NHS England Consultation: Draft Service Model for People with Learning Disabilities and Autism

The Optical Confederation responded to specific, relevant questions in NHS England's survey on the Draft Service Model for People with Learning Disabilities and Autism. Please see our responses below.

Question 8) We are proposing that local areas have an 'at risk of admission register' for those people with a learning disability and / or autism who are most at risk of hospital admission for a mental health problem or behaviour that challenges.

i) Who should be on the register?

ii) How do we risk stratify to identify level of risk and the type of support/service response required?

Response: This is a good proposal to ensure people with learning disabilities and autism get the support they need when coming into contact with what can seem the juggernaut of the acute mental health (or any other statutory) system.

As we have explained in some detail and with evidence in our responses to NICE consultations on Older Adults with Learning Disabilities and a Service Model for People with Learning Disabilities and Challenging Behaviour, people with learning disabilities are significantly more likely to suffer from visual and hearing impairments, and from earlier ages, and these needs are often overlooked adding to the disadvantage and frustration individuals suffer when engaging with systems like mental health or criminal justice. There is a further risk of overshadowing, particularly on admission and assessment at new services, as behaviours related to poor vision may be misdiagnosed as due to autism spectrum disorder (ASD) or learning disabilities rather than being appropriately managed.

It would be helpful therefore if the register also recorded whether individuals had sensory impairments and wore spectacles or hearing aids so that it could be checked that they were wearing these or had them available at assessments. Communication depends greatly on sensory functioning – at a minimum through either vision or hearing, though ideally through both – and having access to these essential functional aids is critical to enabling effective communication to the greatest extent possible.

Question 9) How can we better describe to those providers of day-to-day care and support what sort of training their paid staff should have, and how do we ensure that this takes place and is being provided effectively?

Response: As Q.8, hearing and visual impairment awareness training. This is essential to safeguard that the communication needs of people with learning disabilities and autism are not overlooked or misunderstood.

Question 11) We have said people with a learning disability and / or autism should have access to integrated specialist multidisciplinary health and care services should they need it.

i) Do you agree with how we have described eligibility for these services (see section 7 in the service model), what they should provide, and how different teams/services/organisations should be structured to deliver them?

Response: Checking that those who need spectacles or hearing aids for day-to-day functioning are clearly identified and have these aids with them when interacting with health and social care teams. Visual impairment is often overlooked by health care professionals, particularly where the value of good sight may not be well understood in relation to people who may not work, read or drive. Therefore it is necessary for the teams to include professionals who are responsible for assessing people with learning disabilities and autism's communication needs and determine if they require spectacles, hearing aids or any other form of ongoing support.

12) (Required) We have said people with a learning disability and / or autism should have access to specialist health and care services that support people who have come into contact with or are at risk of coming into contact with the criminal justice system should they need it (i.e. offering a community 'forensic' function - see section 8 in the service model).

i) Do you agree with how we have described eligibility for these services, what they should provide, and how different teams/services/organisations should be structured to deliver them?

Response: Checking that those who need spectacles or hearing aids for day-to-day functioning are clearly identified and have these aids with them when interacting with the criminal justice system to ensure they are not further disadvantaged.

13) We have said that generic inpatient mental health services should be used for people with a learning disability and/or autism requiring non-secure inpatient care where they can. When are mainstream mental health inpatient settings not appropriate for people with a learning disability and / or autism with a mental health problem or behaviour that challenges?

Response: Whenever they are judged appropriate, our answer to Q.11 applies.