

Cheshire and Wirral Partnership NHS NHS Foundation Trust

## Reasonable Adjustment Assessment and Care Plans

### Linda Swann Specialist Health Facilitator

### Background

- 2010 Rapid Improvement Workshop
- Workshop agreed to develop a tool that would identify any additional support needs of patients with learning disabilities and their carers
- Assessment tool developed
- Support Grid developed
- Meets key recommendations from Confidential Inquiry



### **Reasonable Adjustment Care Plan**

- The Risk Assessment and Reasonable Adjustment Care Plan is a way of identifying patients with a learning disability; collecting information and using this information to assess the support needs of patients and their carers.
- The Reasonable Adjustment Care Plan should be completed with the person and their carer.
- The Reasonable Adjustment Care Plan will then tell us about the needs of the patient and their carer and find out what extra support is needed.
- The Reasonable Adjustment Care Plan must be followed by all staff having any direct contact with the patient.



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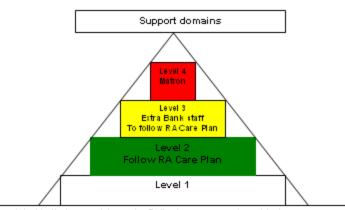
÷ Ri	sk Assessment	Ans	swer	Additional Guidance		
	OMMUNICATION	YES	NO			
	the patient able to communicate effectively to staff to allow their			Does the patient have their own		
	eds to be met?			communication aid that they		
	in they use the call bell?			can bring to hospital.		
	in the patient read?					
	in the patient write?			Consider use of non verbal pain		
	In the patient indicate pain effectively?			tool e.g. DISDAT.		
	ENTAL CAPACITY					
	es the patient have capacity to provide consent for all decisions			Follow principles of MCA.		
inc	cluding treatment.? ( NB. This could be influenced by the			Make arrangements for a best		
pe	rson's behaviour or the circumstances at the specific time the			interest decision		
	cision needs to be made)					
	es the patient have family or a friend who can be involved in a			Involve the IMCA service		
	st interest decision?			(Consider contacting learning		
(N	B. No-one can consent for an adult over the age of 18)			disability service)		
	HAVIOUR					
Ca	in the patient be safely cared for in the ward area without the			Refer to safeguarding team		
ne	ed for extra staff?			who will liaise with community		
1 ()	a. Does the person's behaviour put them or others at risk of			LD service		
ha	rm?)					
M	EDICATION					
Ca	in the patient take their medication independently?			Ask the carer how the patient		
				takes their medication?		
				Do they need prompting to take		
				tablets?		
Is	the patient able to swallow tablets?			Consider alternative forms of		
				administration.		
Ha	as the carer/patient brought their medication with them?			Is the dosage/strength usual		
				hospital stock?		
	ATING/ DRINKING/ SWALLOWING					
Ca	an the patient eat and drink independently?			Does the person need		
				prompting or extra help? Use		
				red tray if patient needs help.		
Ca	in the patient eat and drink without the risk of choking or			Obtain swallowing assessment		
as	piration?			urgently.		
	JPPORT NEEDS					
Ca	in the patient cope in a ward environment independently?			Is extra carer support needed in		
				hospital?		
(E	g this should include all activities of daily living such as washing					
	d dressing?)			Contact matron to approve and		
	- •			complete carer timetable in		
				care plan		



Caring fo	r Patients with Learning Disability and Other Vulnerable Adults
	Reasonable Adjustments Care Plan
PATIENT NEED As identified from risk assessment and discussions with carers	REASONABLE ADJUSTMENTS i.e. What actions have been taken to minimise the risk for this patient To be completed in partnership with the patient's carer or the person who knows them best. Please ask for patient's health passport and use to guide reasonable adjustments care plan
COMMUNICATION	Tips: How the patient communicates is level of understanding ,verbal or nonverbal .Use of equip/prompts/tone of voice etc _* NB _Be guided by carer/family
comforters such as po-	techniques or objects for managing behaviour i.e. presence of familiar faces, use of intable DVD's/comforters , Environmental factors such as lighting, noise, busy areas with to a side room/quiet room . <b>NB* –BE GUIDED BY CARER/FAMILY</b>

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### Caring for Patients with Learning Disability and Other Vulnerable Adults



Level 1= Limited supervision only .Patient can carry out most tasks independently-Consider RNID interpreters / Use of portable hearing loop/.Advice from Geoff Pennock if visually impaired -ext 2671

Level 2= Patient need more DIRECT and regular supervision. Likely to need verbal prompts but can manage within the ward area without need for extra staff.

Level 3 =Need for extra staffing from Bank staff (known locally as specials) This level reflects the need for further increase in time to support a patient eg extra time needed for specific communication techniques/feeding and closer supervision for direct patient care in order to follow reasonable adjustments as outlined in the RA Care plan

Action: Ward manager must be notified if patient is scoring a level 3 on the support domain grid extra bank staff will be needed.

Level 4 -Must have own carers /family/familiar people around them to support them whilst accessing health care

Action -.1) Matron must be informed immediately to commence back fill funding. 2) Obtain support / advice from:

> Patient Disability Adviser ext 2869, Safeguarding team ext 2442

Community Learning disability team 0151-653-9660

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### Caring for Patients with Learning Disability and Other Vulnerable Adults

support Domains	Support levels	1	I	2		3	3	4	
Personal Care		are Able to provide own personal care		Able to provide own personal care with prompts from ward staff		Ward staff need to provide support		MUST have ow staff team to deliver support	
Toileting		D N Fully continent and self caring		D N Fully continent with prompts by ward staff		D N Ward staff need to fully support in line with RA		D N MUST have ow staff team to deliver support	
Eating drinkin		D Fully se without		Able to ea drink unai but requir to prompt support c	ided res staff t and	D Requires ward sta support i.e. cuttin feeding,	rff ng food,	D MUST ha staff team deliver su	n to
Medica	ation	Fully co-oper taking medicat		D Needs wa staff to supervise medicatio	taking	Needs w staff to administ medicati per RA	er	D MUST ha staff team deliver su	n to
Procedures		D H Fully co-operative during procedures		D II Needs staff to provide reassurance during procedures as per RA		Ward staff need to support as per RA		MUST have own staff team to give support during procedures	
Challenging behaviour		Able to cope on ward without help and is co- operative with staff D		D N REFER TO RA Environmental adjustments required		D N REFER TO RA i.e.1:1 on ward May wander Passive resistance D N		D N REFER TO RA MUST have ow staff team/ safeguarding team	

Learning Disability Risk Assessmentand Reasonable Adjustment Care Plan IN- PATIENT VERSION Use of this form is by permission of Wirral University Teaching Hospital

5

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Caring for Patients with Learning L	Disability and Other Vulnerable Adults
Flexibank- Matron will need to approve flexiban	k requests for additional staff to support the patient.
<ul> <li>Care home - Backfill funding – Matron will need from the community home, to enable a familiar f additional hours will need to be negotiated with t</li> </ul>	
Matron's name and signature (if funding required	4):
Date:	
REASONABLE ADJUSTMENTS F	OR SAFE DISCHARGE
Patient Needs	Actions
Risk Assessment/ Reasonable Adjustment form cor	npleted by:

Staff Name and Designation:

Sign and date:

Carer's name:

Sign and date:

### What needs to happen

- The Reasonable Adjustment Care Plan can be used across all "vulnerable groups"
- The Reasonable Adjustment Care Plan is easy enough to adapt for any hospital
- Although easy to develop it needs high up hospital managers to support it and promise to get staff to use it





### Cheshire and Wirral Partnership NHS

**NHS Foundation Trust** 

### Thank you for listening

# Any questions?