

Promoting Access To Mainstream Psychological Services For All: Including people with mild to moderate learning disabilities



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“An estimated 25-40% of people with learning disabilities have mental health problems... Commissioners and service providers will need to continue to ensure that mental health services are accessible to all disabled people.... The improvement of mental health services for people with learning disabilities [requires] inclusivity of mainstream mental health services for people with learning disabilities who have mental health problems”.

No health without mental health (Dept. of Health, 2011)



“The IAPT programme will consider that equitable access has been achieved when the proportion of patients using IAPT services is in line with both prevalence and the community profile”

(IAPT three-year report. Dept. of Health, 2012)



What is IAPT (Increasing Access to Psychological Therapies)?

In 2006 Professor Lord Richard Layard wrote 'The Depression Report'



Professor David Clark – IAPT National Clinical Advisor

What is IAPT (Increasing Access to Psychological Therapies)?

NICE guidance (2004) showed good evidence for talking therapies

The aim of IAPT is to increase the number of people in England with anxiety and depression to access talking therapies (15%)

So they can continue to work or go on to find employment

IAPT is now available for all ages



What is IAPT (Increasing Access to Psychological Therapies)?

IAPT was rolled out to all of England in 2008

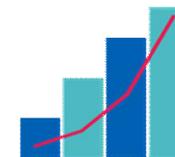
It uses a 'stepped care approach' :

Low intensity treatments (PWP)

High intensity with a fully qualified therapist



Focus on outcomes – person completes a questionnaire on every visit



Self referral or referral via GP

Prevalence of mental health problems in people with learning disabilities

People with learning disabilities are more likely to develop mental health problems as compared to the general population.



1 in 4 people experience a mental health problem at some point in their life (Singleton et al, 2001)

Estimates range from 20 – 40% for people with a learning disability



Risk Factors for Mental Health Problems for people with learning disabilities

- Have few friends



- Additional long term health problems such as epilepsy and sensory impairments (Emerson and Hatton, 2007)
- Lack of meaningful activity (Stancliffe et al, 2011)
- Have fewer psychological and material resources to cope with adversity (Jahoda et al, 2006)



Risk Factors for Mental Health Problems for people with learning disabilities

- Experience social exclusion, poverty and abuse (Gravell, 2012)
- Communication and language
- Risk-averse service cultures which contribute to restrictive environments with fewer opportunities to build self-efficacy and develop problem-solving skills (Dagnan & Jahoda, 2006)
- Not always offered opportunities to get a job, socialise, have relationships developing low expectations. (FPLD, 'Count us in', 2002)



Are people with learning disabilities accessing IAPT services?

IAPT and Learning Disabilities. Research report 2014, Chin et al by Kings College London with FPLD.



IAPT and Learning Disabilities



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Deborah Chinn
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Research Report
October 2014

What they found

- Staff in IAPT services do come across people with learning disabilities as clients.



- The IAPT programme as a whole has not adequately addressed access issues for people with learning disabilities
- Some IAPT services exclude people with learning disabilities by specifying eligibility criteria that rule them out.



What they found

- Both teams agreed that IAPT should be supporting people with learning disabilities with common mental health problems (anxiety and depression)
- The Psychological Wellbeing Practitioners seem most optimistic about people with learning disabilities making good use of IAPT (provide shorter, more practical interventions focusing on self-management and education about mental health.)



What helps?

- IAPT staff and learning disability staff have developed good working relationships, including training
- Having prior experience of the needs of people with learning disabilities
- Are adapting their materials and their work practices –more flexibly and at a slower pace
- Involve family and carers in their work.



The Access to Mainstream Psychological Therapies Project

- Funded by Dept. of Health and run by the Foundation for People with Learning Disabilities in partnership with Kings College and Cumbria Partnership NHS Trust.



- Explore ways in which Improving Access to Psychological Therapies (IAPT) services can better support people with learning disabilities and mental health needs (using action learning sets.)



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Reasonable adjustments: at a service level



- Working together with the local CTLD to develop a care pathway which can lead to joint assessments for therapy with IAPT and/or CTLD clinicians
- Training to IAPT practitioners from CTLD teams
- Use of learning disability as a label/flag on IAPTUS client electronic record system to increase monitoring

Reasonable adjustments: Screening tool designed to assess health literacy (Cumbria)

Within First Step we see people with a wide range of needs. We want to be as helpful as possible. Answering the following few questions will help us to best meet your needs.



1. How often do you have someone (like a family member, friend or professional) help you read letters and information leaflets?

Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
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2. How often do you have problems filling out questionnaires by yourself?

Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
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3. Do problems with numbers make it difficult for you to manage day-to-day activities such as paying bills and reading timetables

Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
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Reasonable adjustments: Screening tool designed to assess health literacy (Cumbria)

We are also trying to improve access to our service for people with learning disabilities. The following question will help us to work out how well we are doing.

4. Which of the following services have you received (please tick as many as apply)?

Mainstream school

Specialist support unit in a mainstream school

Specialist school for people with learning disabilities

Learning disability service for adults

Other

Reasonable adjustments: for clinicians

- Length of sessions (they may need to be shorter to aid concentration, or longer to record cover the outcome measures and minimum data set and therapy)
- Preparation time out of session to plan and make resources (if necessary)
- Easy read leaflets about service and appointment letters
- Number of sessions (likely to need more to aid repetition)
- Reminders of when sessions are – by text or telephone call, and possibly to support staff and family too



Reasonable adjustments: Adapting the minimum data set

PHQ-9 : Patient Health Questionnaire for Depression

Over the last two weeks how often have you been bothered by any of the following problems?
For each question, select the option that best describes the amount of time you felt that way.

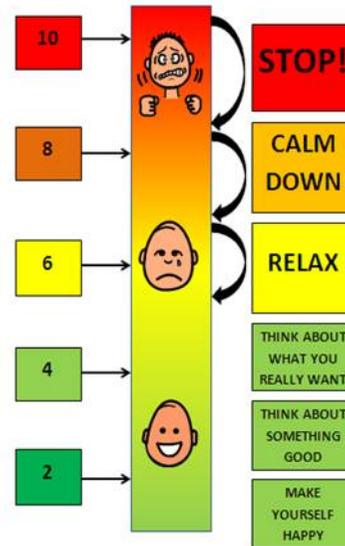
In last 2 weeks...	Not at all	Several days	More than half the days	Nearly every day
	0	1	2	3
1. Little interest or pleasure in doing things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Feeling down, depressed, or hopeless	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Trouble falling or staying asleep, or sleeping too much	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Feeling tired or having little energy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Poor appetite or overeating	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Feeling bad about yourself - or that you are a failure or have let yourself or your family down	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Trouble concentrating on things, such as reading the newspaper or watching television	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Moving or speaking so slowly that other people could have noticed. Or the opposite - being so fidgety or restless that you have been moving around a lot more than usual.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Thoughts that you would be better off dead, or of hurting yourself in some way	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
PHQ-9 Score <input type="text"/>	Previous Scores		n/a	n/a

Reasonable adjustments: during sessions

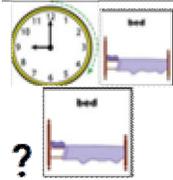
- Face to face for first interaction (not via 'phone)
- Orientation visit to IAPT service
- Visual aids
- Homework tasks
- Use of family or supporters during therapy
- Being under IAPT and CTLD services at the same time



Reasonable adjustments: Visual anxiety thermometer

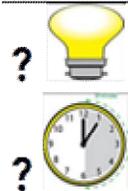


Reasonable adjustments: Accessible sleep diary



What time did I go to bed?

What did I do in bed?(Read, TV, sex)



What time did I put the lights out?

How many minutes before I fell asleep?

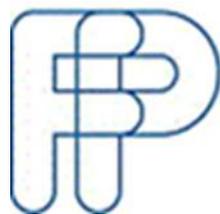


What time did I wake up at?

Number of times I woke up?

Number of hours I slept

On waking up in the morning, how rested do I feel? 0 – 10
(10 most rested)



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Reasonable adjustments: Mindfulness group intervention

- Pre-group meeting with family or supporter
- Easy read materials
- Short break
- Homework sheets covered contents of session and tasks for week
- CD's also given



Project outcomes

- Joint working between IAPT/LDT
- Reference groups set up in some areas has resulted in the involvement of commissioners and local plans
- Clearer statements of inclusion in IAPT services
- Recording systems allowing for monitoring of people with learning disabilities' access to IAPT (Cumbria model)
- Training for PWPs and other IAPT therapists from CLDT



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Next steps

Update the IAPT Good Practice Guidance

Conference on September 17th

Influence policy and practice



Question

How confident do you feel that someone with a learning disability would receive a good service from your local IAPT service?



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