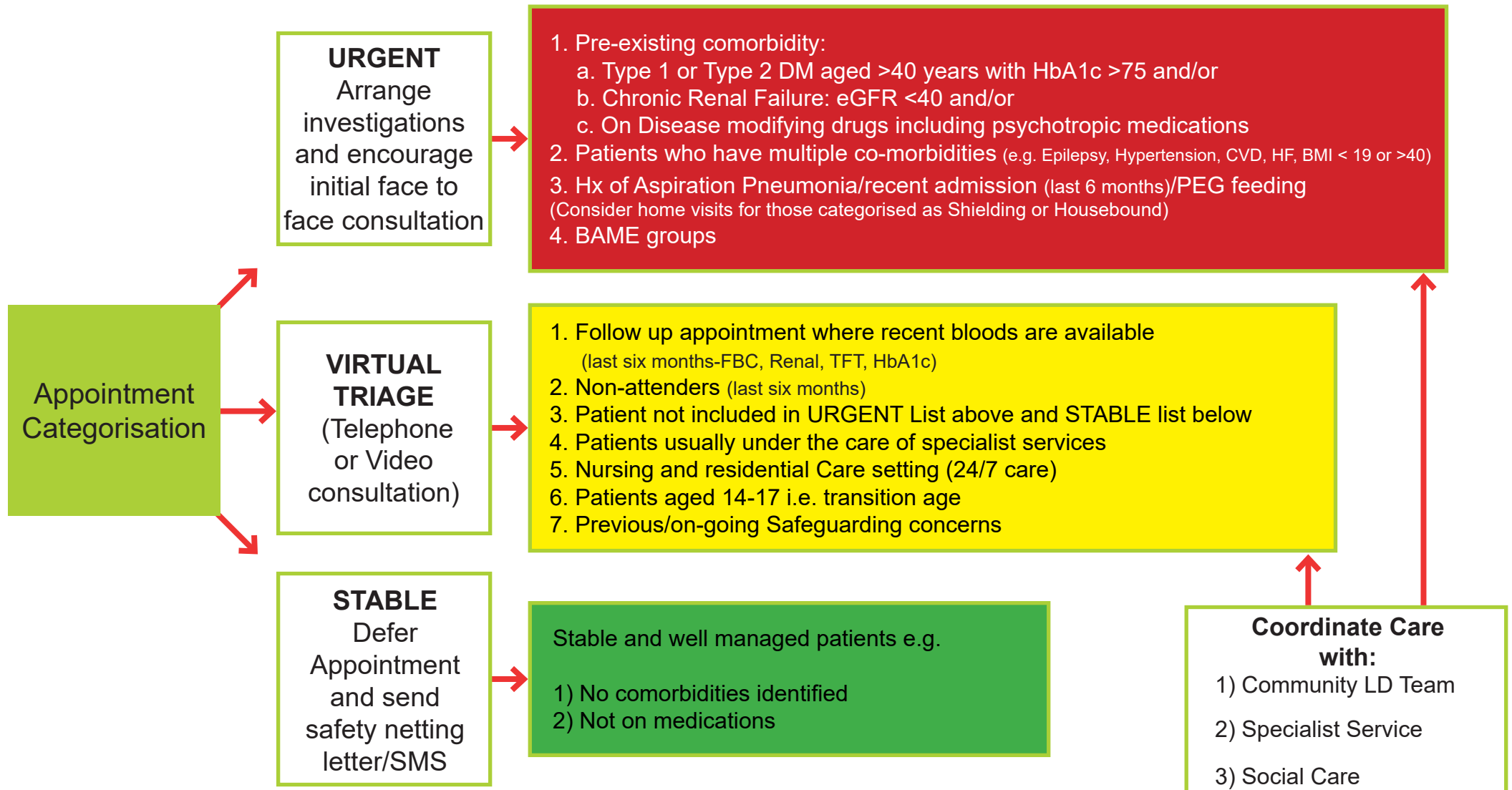




Appointment Prioritisation for Health Checks in People with Learning Disability



1. Do as much preparation remotely and in advance as possible.
2. Consider appointment when there is minimal other patient activity in the surgery; eg avoid coinciding with other F2F clinics (i.e. blood clinics, antenatal clinics etc)
3. Consider 1st appointments of the day (ie no footfall yet in the surgery, surgery has been cleaned, so less chance of cross-contamination)
4. Consider using Extended Access clinics / Improved Access clinics (less footfall)
5. Consider using a dedicated Saturday clinic
6. Consider practitioner going to people in their care homes/supported living rather than they come to the surgery. Particularly if they have more than one patient in each placement.
7. Consider doing all LTC health checks at the same time as the AHC.
8. Liaise with Community Learning Disability Team/Specialist/ Health Facilitation Team as appropriate.

Useful resources:

Health Facilitation Team, St Mary's Hospital, 0113 8555049 <https://www.getcheckedoutleeds.nhs.uk/>

1. Make Reasonable Adjustments/use Reasonable Adjustments Care Plan under GPs/Practice Staff tab on website above.
2. Use Searches <https://www.getcheckedoutleeds.nhs.uk/wp-content/uploads/2019/11/improving-identification-of-people-with-a-learning-disability-guidance-for-general-practice-1.pdf>
3. Use of software to support patient/carer engagement with health and social care systems e.g. <https://www.myhealthguideapp.com/>
4. Support use of Microsoft Teams across settings for an integrated approach (Primary, Secondary and Community)
5. Provision of point of care testing gadgets to support clinical assessment:
 - a. Patient level: Digital thermometers, BP machines, Pulse Oximeters.
 - b. PCN level: POC testing machines.

Authored by



University of Central Lancashire

With thanks to Umesh Chauhan RCGP Special Interest Group July 2020

Contact: uchauhan@uclan.ac.uk