Use of a learning disabilities and autism toolkit in mental health care

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In this article...
- Principle, policy basis and examples of reasonable adjustments
- A tool to improve mental health care for people with learning disabilities and/or autism
- An example of implementing the Green Light Toolkit

People with learning disabilities or autism should expect high-quality mental health care across NHS services; Valuing People Now (Department of Health, 2009) and the Autism Act 2009 state that they should be able to live ordinary lives and access mainstream services wherever possible. This is substantiated by a legal requirement for statutory services to make ‘reasonable adjustments’ for people with disabilities (including those with learning disabilities and/or autism).

‘Reasonable adjustments’ in healthcare include adapting services to make them easier to use. A range of legal and policy documents outline the need for reasonable adjustments, including the Health and Social Care Act 2012, Equality Act 2010, Autism Act 2009, NHS England’s accessible information standard (Bit.ly/NHSEAccess) and several National Institute for Health and Care Excellence guidelines (Box 1). Box 2 contains further policy resources around mental health care provision for people with learning disabilities or autism.

The Green Light Toolkit provides a framework to help mental health services meet that legal requirement and adequately respond to the needs of people with learning disabilities and/or autism (National Development Team for Inclusion, 2017). Advocated by the Care Quality Commission, it is

Box 1. NICE guidance
- Learning Disabilities and Behaviour that Challenges: Service Design and Delivery (2018) nice.org.uk/ng93
- Mental Health Problems in People with Learning Disabilities: Prevention, Assessment and Management (2016) nice.org.uk/hg54
- Autism Spectrum Disorder in Adults: Diagnosis and Management (2012) nice.org.uk/cgi42
an annual self-assessment audit tool containing 27 quality standards, which was originally published in 2004 by the Department of Health and updated in 2017 by the National Development Team for Inclusion (NDTI). This article describes the experience of Norfolk and Suffolk NHS Foundation Trust (NSFT) – which provides mental health and learning disability services across two counties – when implementing the Green Light Toolkit.

Green Light Toolkit
The Green Light Toolkit ensures mental health services:
- Provide fair access;
- Make reasonable adjustments;
- Work jointly with learning disability services.

This can reduce anxiety and lack of confidence among staff, which have been found to be barriers to fair access to services for people with learning disabilities or autism (McNally and McMurray, 2015; Roberts et al, 2013). Completing the audit annually allows services to determine how well they meet the needs of these groups and identify areas requiring improvement.

The audit and standards are broken down into three levels (Box 3). Within an organisation, Green Light champions are responsible for completing the audit in each team; this can be done by the champions themselves or collectively in team meetings. The purpose is to obtain a collective picture of each team’s performance, rather than individual views, as managers and frontline staff often have differing views on how the team is doing.

Implementation
Learning disability services have changed markedly since the emergence of community-based care in the 1980s. At NSFT, since a service redesign in 2012, people with mild learning disabilities whose main need is mental health care are supposed to use mainstream mental health services (people with autism were already doing so). However, in 2014, it became apparent they did not all have fair access to these services – not all staff were able to meet their needs and reasonable adjustments were not always being made or understood.

Having identified this problem, and in response to two serious case reviews, the director of nursing set up a learning disability and autism strategy group, which identified that the Green Light Toolkit could help monitor and improve service provision. At the time, I was the matron for learning disability services and, in September 2015, was given a 12-month full-time secondment as project lead responsible for implementing Green Light and driving systematic change throughout NSFT.

A project plan and key performance indicators were agreed. The aim was to implement and/or improve on all the standards in the toolkit, including:
- Promoting co-production with service users, deemed experts by experience;
- Providing staff in mainstream mental health services with the skills, knowledge and experience to support people with learning disabilities and/or autism;
- Collaborating with partner agencies to ensure seamless pathways between services;
- Ensuring information is given to service users in the format they require.

Managing change
I used McKinsey’s 7S Framework, a widely used strategic change management model (Fig 1) that focuses on seven ‘hard’ (organisational) or ‘soft’ (staff/skills) elements needed to implement cultural change across a large organisation. The interplay between each element is key: achieving the right balance means getting cultural change right. The changes made in relation to each element of 7S are described below.

Shared values
Shared values are at the heart of the 7S framework – underpinning cultural change, strategy, effectiveness and performance – and linked with every other element. The first few weeks were spent raising awareness of the Green Light Toolkit and clarifying the legal perspective on equality and inclusion.

Attending all operational and strategic team meetings allowed me to promote the project and encourage staff with an interest or experience in supporting people with learning disabilities or autism to volunteer for the role of Green Light champion. Trust-wide communication – vital to ensure all staff were aware of the project – was achieved by regular bulletins and updates.

There were challenges in some teams, as staff were concerned the project would create extra work. As a learning disability nurse, I was able to discuss complex cases with teams and suggest different ways of working to support individuals. This enabled many to see the benefits of Green Light.

Systems
During the first four months, I examined systems in the organisation to check they provided the right foundations for implementation. The first question was: how do we know how many people with learning disabilities or autism use our services?

In its accessible information standard (Bit.ly/NHSEAccessible), NHS England specifies that all health and social care services should flag a diagnosis of learning disabilities or autism in the format they require. This article describes the experience of Norfolk and Suffolk NHS Foundation Trust (NSFT) – which provides mental health and learning disability services across two counties – when implementing the Green Light Toolkit.
disability or autism – as well as the person’s communication needs – on the patient record. However, our local systems did not allow staff to record this. A ‘task and finish’ group, which included the IT team, developed a system to record these diagnoses on the patient’s electronic record and produced quick reference guides for staff.

I then began reviewing local policies and produced guidelines to give staff clear operational guidance. New documents included an accessible information policy and a guideline for supporting people with learning disabilities or autism. An intranet page was developed and quickly gained momentum as a central repository for useful resources, research and national guidance; we continue to publish a bimonthly Green Light bulletin to share best practice.

**Staff**

The project continued with the recruitment of volunteers to become Green Light champions. A Green Light champion can be anyone with a specialist interest or knowledge, who is driven to bring about change and improve the experience of service users. Champions can be clinical staff, service users, relatives, carers or members of partner organisations.

- **Our Green Light champions:**
  - Effect change at local level;
  - Advocate positive values in their teams;
  - Promote reasonable adjustments.

They are involved in developing and delivering staff training, developing easy-read information, and providing specialist advice to colleagues. Champions attend whole-day bimonthly meetings of the Green Light champion network to share ideas and good practice; the meetings also provide updates and further training on subjects such as communication, person-centred care and accessible information.

The trust currently has a Green Light champion in 95% of its mental health teams. A role description has been created so prospective champions have a clear idea of what is expected of them. I meet every new champion to discuss the role and local implementation of the project, and give champions support and advice when they are unsure how to meet people’s needs. The most successful staff champions are those given protected time to undertake the role.

**Skills**

Historically, people with learning disabilities who had mental health care needs were directed to services segregated from mainstream mental health services, which meant mainstream mental health staff did not have the opportunity to develop the skills, knowledge or experience to support them. Standard 14 of the Green Light Toolkit focuses on ensuring the workforce has the skills to deliver good clinical care that meets the needs of this group.

Initially, I created a basic learning disability and autism awareness course, which was developed into an e-learning course to ensure maximum exposure to the 4,000 staff working in NSFT’s mental health services. Over time, further training courses were developed with staff and service users, enabling us to offer all Green Light champions a suite of courses covering topics such as learning disability, autism, easy-read information and person-centred care.

In 2016, I convened a group of Green Light champions – mainly psychologists – to create a three-level autism training course. The group meets monthly to develop, review and roll out the training, which is available to all staff. The champions have also developed a course on reasonable adjustment, which is now available to staff – including reception staff and administrators; this is complemented by a poster that can be used as an aide-memoire in staff areas.

- **Skills for Health** published an education and training framework that sets out the essential skills and knowledge needed by all staff involved in caring for people with learning disabilities, in any health or social care setting (Bit.ly/SfHLDFramework). In March 2017, a multi-agency training group in Suffolk began to develop the training packages proposed in the framework. The purpose of having such a group was to ensure all agencies in the county worked together, drawing from each other’s expertise and sharing the training packages for local delivery.

The biggest challenge in delivering training was how to release staff from their daily work to attend. In January 2019, I approached colleagues at Suffolk County Council and West Suffolk CCG and Ipswich and East Suffolk CCG, who agreed to jointly fund a contracts and training manager post to ensure all care providers trained their staff on learning disability and autism. This mandatory training will be built into care provider contacts.

**Structure**

The structure of the Green Light project fits in with the existing governance line of reporting and supports the equality agenda. The annual audit report informs the trust board and champions of the progress made and areas needing improvement. As project lead, I am accountable to the director of nursing.

The annual audit is undertaken by Green Light champions in their teams; using the audit tool, they ask as many staff and service users as possible to contribute. I collate the data from each team and send it to the NDTI, which converts the results into a chart. In October 2016, 12 months after the start of the project, all key performance indicators had been reached. The trust board decided to increase its investment in the project by converting my role of project lead into a substantive nurse consultant position and recruiting a deputy (who is a learning disability specialist nurse) to help with implementation.

**Strategy**

The Green Light standards form the basis of the trust’s learning disability and autism strategy (NSFT, 2017), which sets out the trust’s plans to improve access and equality for people with learning disabilities and/or autism. Developed during a
series of stakeholder workshops in March 2017 – which involved champions, service users, relatives/carers and partner organisations – it was produced in an easy-read format at the request of attendees, and launched in December 2017.

The strategy provides a clear plan to which the board, champions and all other stakeholders are signed up. It is monitored by a group comprising agency partners, service users, relatives and carers, who meet quarterly to review progress and hold the Green Light team to account for the delivery of the implementation plan.

During the development of NHS Improvement’s (2018) learning disability improvement standards for NHS trusts (outlined in Box 4), the Green Light champions from NSFT were involved in the production of a ‘grab guide’ for staff highlighting examples of good practice.

Style

The Green Light Toolkit’s flexibility and adaptability means it can support accessibility and inclusivity for anyone with a cognitive impairment. Dementia services using the toolkit at NSFT say they are better equipped to support people’s needs on issues such as communication and mental capacity. It also enables staff to learn how to adapt services and ensure reasonable adjustments are made.

Examples of changes we have made in mental health services at NSFT include:

- Using Makaton symbols for people with dementia to help them remember words and express their needs;
- Providing information in a format that meets service users’ needs (easy-read appointment letters and care plans, accessible signage);
- Sending appointment letters in blue envelopes so service users realise they are not junk mail;
- Having longer appointments so service users have time to process information;
- Assessing service users face to face rather than over the telephone;
- Providing all teams with ‘reasonable adjustment boxes’ containing equipment such as fiddle toys, ear defenders and communication aids.

Reasonable adjustments such as these are commonplace in learning disability services, but we had to introduce them in mental health services.

Outcomes

Since the first audit, NSFT’s performance has improved in all 27 standards year on year and, in 2018, we achieved a score above the national average in 25 of the 27 standards.

Implementation of the Green Light Toolkit has improved partnership working. The champions network has created professional relationships across and between services; health and social care champions work together more effectively and share good practice more than before. The action of the champions will be crucial to ensure sustainability by embedding changes in local practice and raising awareness of the reasonable adjustments required to provide high-quality services.

In September 2018, we recruited someone with a learning disability to fill the role of peer support worker in the Green Light team. The aim of recruiting an ‘expert by experience’ was to ensure true co-production with service users. Reasonable adjustments were made to the recruitment process by producing an easy-read job description and application forms, and organising a job session rather than formal interviews. The session involved all candidates meeting the Green Light team together to discuss the job, present a little information about themselves and convert a leaflet into easy-read text. At the end of the session, three candidates said the fourth should be appointed. The peer support worker is responsible for developing easy-read information, chairing the service user-led easy-read group, training staff in how to create easy-read information, and ensuring the easy-read materials developed are clear.

Conclusion

I would recommend implementing the Green Light Toolkit in mental health services. Having a project lead who can drive the initiative and inspire others to embrace a new vision and new ways of working is key to successfully introducing the Green Light Toolkit to a trust.

The annual audit provides ongoing monitoring of quality improvements. If more trusts did it, the picture of the quality of services people with learning disabilities and/or autism receive would be broader. This would help all trusts adopt NHS Improvement’s learning disability improvement standards (Bit.ly/NHSILDSStandards).

References


