GP Passport for Learning Disabilities

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Background

A recent review found that patients with learning disabilities are dying prematurely; men 13 years sooner and women 20 years sooner than the general population, and overall 22% were <50 years old (1).

The Annual Cardiff Health Check for people with learning disabilities was introduced in order to improve health outcomes for people with learning disabilities and to help reduce this gap. However, in 2013-14 only 44.2% of eligible adults had the Cardiff Health Check completed (2).

Project Aim

In order to improve outcomes for patients with learning disabilities we need to be able to proactively identify and address concerns. The Annual Cardiff Health Check was created. However it is only useful if patients attend and GPs are facilitated to complete this comprehensive review in a meaningful way. Thus the aim of this project was to improve GP consultation for patients with learning disabilities so that the attendance for these annual reviews is improved, with a secondary aim of making them more time efficient for the staff involved with them.

Project Design/Strategy

A short survey monkey questionnaire was also sent out to GPs in the pilot practice ascertaining their views on the usefulness of the review and what they conceived the barriers to it were. A driver diagram was then created to ascertain potential ways of achieving the above aim.

Benefits

“Chance to identify any health or social needs”

“Opportunity for patient and perhaps more importantly the carer to raise any issue”

Limitations

“Time”

Changes Made

The GP Passport was created which is a RAG rated 10 page A5 booklet containing a balance of medical and social information necessary for the annual review. This is send out to the patient/carer with their appointment and a letter explaining what the appointment is for and why it is important to come. and is filled in beforehand, so that the appointment is not reduced to a form filling, tick box exercise.

Outcomes

• Increase of 10% attendance rates for the annual review since implementing the passport.  
• Reduction in the average consultation time for both nurses (24%) and to a lesser degree GPs (14%)  
• Specifically the documentation of alcohol consumption increased from 64% to 80%  
• Somewhat surprisingly documentation of the other specific criteria of the Cardiff Health Check did not increase, and in some cases was actually reduced.

Next Steps

The outcomes measured above is from a very small sample set given the time constraints of the fellowship year and the outcomes measured are to do with annual reviews. Gathering data over a longer period of time would enable more significant conclusions to be made.

Interestingly none of the passports were viewable in the patient notes and had been entered either manually or via templates. Perhaps the next step to evolving this project is to develop an electronic version that would allow the valuable information gained from the passport to be included in the notes without duplicating work for GPs.

Excitingly discussions are being had with WHCCG about potentially incorporating this into the LD friendly initiative.

References