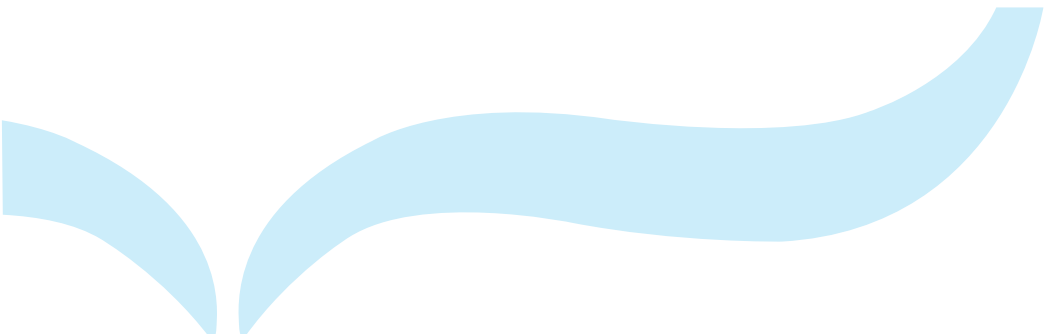


# Hospital Admission Booklet for Acute Hospital Admissions

## Guidelines and Symbols

October 2010



- The hospital information booklet aims to assist in the development of individualised care plans for people with learning disabilities in hospital settings, for example The Victoria Infirmary, The Southern General Hospital or Leverdale Hospital etc.
- These guidelines are intended to support the person filling in the booklet.
- It is hoped that the hospital admission booklet would be completed alongside the person with a learning disability, by someone who knows the person well, such as a family member or a paid worker.
- The booklet should be completed as near to the time of hospital admission as possible.
- A new booklet should be completed for each time the person goes into hospital.
- Please take the booklet with you when the individual goes into hospital and give it to the member of staff who admits the person.
- **ALSO, please remember to tell the Local Learning Disability Team (LLDT), of the admission and that you are completing a booklet, see attached sheet for contact details.**
- Complete this booklet as if you were writing it for someone who doesn't know the individual at all, and try to be as accurate as possible.
- When completing the booklet, if you do not have the information requested or you do not know the answer, please indicate this.
- Make sure the hospital staff know how to contact the person who completed the booklet or their proxy in case they need to ask any questions.
- If an individual has to go into hospital as an emergency, the booklet should be completed as soon as possible afterwards (within at least one day) and handed in to the hospital ward where the person has been admitted.
- Please ensure that any aids, adaptations and equipment required goes with the person when they are in hospital.
- Symbols are included at the back of this booklet to support communication.
- The Hospital Information Booklet aims to assist in the development of individualised care plans for people with Learning Disabilities and further inform staff within acute care. The booklet has been developed in partnership with users and carers and a wide range of professionals. The booklet is evidenced based and has been piloted, evaluated and reviewed extensively including Governance bodies and Partnership Provider Forums. Many thanks to all involved.

The following information may be of help when completing the hospital admission booklet. Please refer to this guidance when completing the booklet.

## **Introduction**

- This section looks at gathering key information. For people who are supported by paid workers this information may be found in the individuals care plan.
- This section contains key information about the person, including their name, address etc. It also includes details of their GP and Local Learning Disability Team (LLDT) member.
- The persons care first number is a unique identification number used by social work, if you have difficulty in finding this contact the LLDT.
- Similarly, the persons CHI number is a unique identification number used by the NHS it contains the persons date of birth followed by a 4 digit number, it should be found in any recent correspondence/ letters from health professionals. If you have difficulty in finding this please contact the LLDT.
- If some of this information is unavailable or unknown, this shouldn't prevent the booklet being completed or sent into hospital with the individual.
- Mental Health Care and Treatment Act ( MHA) may apply.

## **Information about the person completing booklet**

- This section is about the person completing the booklet, please sign and date and remember to highlight your contact details to the ward staff in case they need to ask any questions.

## **How I communicate pain:**

- This section should be used to provide information on how an individual communicates pain.
- It is important to remember, that some people with learning disabilities are unable to report pain and can have difficulty in describing the type and intensity of pain that they are experiencing.
- People who know a person well, can be the key factor in helping others recognise when a person with a learning disability is in pain.
- Please write down all the ways in which the person indicates pain e.g. the person can verbally communicate pain, points to an area that is painful/sore, any behaviour changes, their facial expressions/ body language may indicate pain.

- This information should be included in the individuals care plan, or if need be, discuss this with other people who know the person to get a full picture.
- You could include any helpful ways you know to help the persons manage pain e.g. redirection, humour, medication, having a bath, having a massage.
- It would be helpful to indicate if the persons will ask or indicate if they require painkillers (sometimes called analgesia).
- •The DisDat is a distress assessment tool. It is designed to help health professionals identify distress cues in people with learning disabilities who have severely limited communication. Please attach if the individual has one.

### **Health risks:**

- People with a learning disability can have very complex health needs that require special attention and support.
- Using the corresponding box to indicate if any of these risks are present giving a brief description, you can expand on these issues using the space on the Notes page.
- Please consider if the person requires close supervision from the hospital staff and what things the hospital staff can do to help the person stay safe.

Some examples are

- **Eating:**
  - » Can the individual feed themselves or do they need support AND what type of support is required. I.e. one to one, verbal prompt?
  - » Can the individual tell staff that they are hungry or full up?
  - » Does the person have specific routines around meal times?
  - » Would the person be able to understand that they may have to fast?
  - » Is there anything that impacts on the person's ability to eat i.e. sensory impairment (visual), dementia or any other conditions?
  - » Does the person eat things they shouldn't (this is called pica)
- **Drinking:**
  - » People with learning disabilities may be at risk of dehydration when in hospital
  - » The person may not be able to indicate if they are thirsty and may not ask staff for a drink.
  - » Does the person require additional prompts and additional attention to make sure they drink?

- » Is there anything that impacts on the person's ability to drink i.e. sensory impairment (visual), dementia or any other conditions?
- » Is the person able to take a drink from a bed side cabinet without support?
- » Does the person drink excessively or recognise what fluids are safe to drink?
- **Swallowing**
  - » Is the individual at risk of choking when eating and drinking?
  - » What type of help reduces the chance of the person choking, i.e. someone helping the person eat, specially prepared food consistency.
  - » What types of food and drink makes the person choke?
  - » Is the person aware of this risk?
- **Mobility**
  - » Is the person mobile or do they need support and if so what kind of support?
  - » Do they require support to get in and out of bed, are they at risk of falling out of bed?
  - » Do they require to be turned when in bed?
  - » Does the person wander?
  - » Is there anything that impacts on the person's mobility (i.e. sensory impairment (visual), dementia or any other conditions?
- **Toileting**
  - » Is the person able to use the toilet or are they incontinent?
  - » Does the person wear continence garments (pads)?
  - » Does the person have constipation and what helps them with this?
  - » Does the person have a catheter?
  - » Is the person able to walk to the toilet or do they need support to get there?
  - » Does the person require verbal prompts to use the toilet?

- **Epilepsy**
  - » Is very common in people with learning disabilities.
  - » Please write down the type of seizures the person has for example tonic clonic or partial seizures etc.
  - » Please note any known triggers etc.
  - » You could include their epilepsy care plan if they have one.
  - » Please include any rescue medication.
  - » You could describe the best way to help the person when they have a seizure and what they are like afterwards.

Please indicate in the box provided if the individual experiences any of these health needs.

- **Visual and hearing impairment**
  - » Visual and hearing impairments are very common in people with learning disabilities.
  - » Hearing and visual impairments are frequently unrecognised and are under-reported and can impact on a persons behaviour, their ability to understand their environment and day to day interactions.
  - » Please remember to send the persons glasses, hearing aids etc into hospital.

## **Permission to treatment, the following points may be useful to consider:**

- A welfare guardian is a person appointed by the courts who can legally make decisions on person's behalf regarding welfare matters. A welfare guardian can make decisions about the persons care and treatment and must be consulted about treatment whilst the person is in hospital.
- For further information please see [www.mwscot.org](http://www.mwscot.org).
- If the person has a welfare guardian then their name should be included in this section.
- If the person has a welfare guardian the information should be in their care plan. If you are unsure discuss with your line manager or contact LLDT.
- The individuals support worker is not able to give consent to treatment.
- Please document using the tick boxes any issues about consent to medical treatment that the hospital staff need to be aware of.
- Indicate in the space provided the people that are involved in helping the individual make decisions about their care, the person may or may not be their welfare guardian.
- The last section suggests that hospital medical staff should complete SECTION 47 PART 5 of the Adults with Incapacity Act.
- Part 5 of the Adults with Incapacity (Scotland) Act 2000 gives a general authority to medical practitioners to treat people who are incapable of consenting to the treatment in question.
- Medical practitioners will be responsible for determining incapacity and for the issue of the medical certificate confirming incapacity.
- For further information please see [www.enable.org.uk/docs/An\\_Introduction\\_to\\_the\\_Adults\\_with\\_Incapacity\\_Act.pdf](http://www.enable.org.uk/docs/An_Introduction_to_the_Adults_with_Incapacity_Act.pdf)

## **Communication Profile**

- Communication difficulties are common amongst individuals with learning disabilities and can be a significant barrier to accessing appropriate health care.
- The person may require support with expressing themselves, understanding what is being said and making themselves understood.
- Therefore, it is important that we can provide information about their communication needs.
- Please indicate the persons first language and other language the

person understands.

- Using the tick boxes, please advise on the person's communication profile.
- Please make sure that you involve all the people who know the person, so that you come to a consensus and are as accurate as possible with your descriptions.
- If the person uses a communication aid or passport ensure that this goes into hospital and staff are aware of this.
- You may wish to tell the hospital staff about what is the best way to communicate with the person, what works and what doesn't.
- Additional information can be recorded on Notes page.

### **Medication:**

- Please note any known medication allergies the person has, also indicate any other known allergies for example penicillin or allergic reactions to food etc.
- In the table provided, write down all the person's medication and include any 'over the counter' medicines that the person takes.
- Be as accurate as possible and attach the most recent prescription sheet if you have one.
- To aid accuracy, all medication information MUST be taken directly from the person's prescription sheet or the printed medication sheet that is dispensed from the pharmacist.
- This information may also be found on printed medication box labels or printed labels on a dosette box dispensed from pharmacist.
- Please try to complete all sections of this page so that staff are well informed about medication that the person is taking.
- It is important that hospital staff know if medication is taken in tablet or syrup form.
- Remember to note if medication needs to be thickened or taken with water.
- Please note any help the person needs to take their medication such as does the person need to be given the medication or will respond to a verbal prompt.
- Some people may have to take their medication without their knowledge. If the person takes their medication covertly please note this and include their covert medication policy. This should be found in their care plan and is agreed by the person's family, carers, GP and other professionals.
- **For further information:**

[www.mwscot.org.uk/web/FILES/Publications/Covert\\_Medication.pdf](http://www.mwscot.org.uk/web/FILES/Publications/Covert_Medication.pdf)



- Please remember it is the hospital staffs responsibility to ensure the right medication is given.

## **Information about general health**

- Please indicate the cause of person's learning disability for example genetic causes such as downs syndrome, pre/post natal injury.

## **Specific health needs**

- People with learning disabilities can experience specific health needs that are more common than in the general population, these can include respiratory problems, epilepsy, mental health and behaviour problems. People who do not know the person may require a lot of help to recognise these health needs.
- To help support the individual in hospital, it is important to list all known health needs. Please be as accurate as possible, for example it is really easy to mix up dysphagia (swallowing problems) with dysphasia( difficulty in speaking).
- If the persons has a paid carer, you should get this information from the persons care plan, you could also look at letters from Health/ Social Work professionals correspondence.
- Please include information about the specific health needs for example diabetes, epilepsy, respiratory conditions.
- If required, you can give additional information on Notes page.

## **Risk**

- People with learning disabilities can be at risk of accidents and injuries occurring when in hospital.
- In order for hospital staff to support and keep an individual with a learning disability safe it is important they know about anything that may pose a risk to the person i.e. falls, wandering, aspiration etc.
- Please tick appropriate box, you can tick more than one box. If you require to give additional information please use Notes page.

## **Tissue viability**

- Some people with learning disabilities can have problems with pressures sores, they can bruise easily or can have skin or medical conditions that make them susceptible to skin problems.
- Tissue viability can include pressure ulcers (bedsores), putting on bandages, or other issues concerning the health of the person's skin.

- Please tick the appropriate box or boxes and clearly mark any areas of concern on the diagram, you can also give a brief description in the space provided.
- If you require to give more information please do so on Notes page for example indicate the need for pressure mattresses or sleep systems.

## **Eating and drinking**

- Some Individuals with learning disabilities are at increased risk of having eating, drinking and swallowing difficulties.
- Please indicate as accurately as possible what the persons eating and drinking needs are.
- Some people require to have their food and drink prepared to a certain consistency and use adapted crockery or cutlery.
- Other people require full physical support when eating and drinking.
- Some people with learning disabilities require to be have their food and drink through a nasogastric or gastrostomy tube, please inform the staff of the best way to help the person with this. For example the person may be able to have small tasters of food.
- Some people may have routines around meals times for example they eat with a spoon or eat food in a specific order.
- This information should be in the persons care plan.

## **Activities of daily living**

- This is a snapshot of the things that you do for someone to help them live their life.

## **Mobility**

- Some people with a learning disability require help with their mobility.
- Use the space provided to highlight the help the person needs to get about.
- It is important to ensure that any aids e.g. wheel chairs, walking frames etc go into hospital with the person.
- Please also consider any issues that may impact on the persons mobility e.g. foot care, postural management, the environment etc

## **Personal hygiene**

- Some people with learning disabilities require help to maintain and maximise their personal care.
- Using the space provided indicate what help the person needs to wash, dress and clean themselves this can be in the morning or during the day.

## **Toileting**

- This can include incontinence, constipation or the use of continence garments (pads) and catheters.
- Please note any help the person needs to use the toilet, this can include problems with incontinence, constipation or walking to and using the toilet. note if the person may need a commode.

## **Sleep routine**

- Please indicate any support needs or routines the person has.

- **Arrangements for discharge**
  - » Please give contact details of carer, type of transport, amount of notice required and any post discharge medication needs.
  - » Try to keep information succinct and accurate, ensure the contact person is contactable even at night time.
- **Additional information**
  - » Specific health needs, lack of information and communication barriers can impact on the effective care for people with learning disabilities in hospital.
  - » It is important that we provide accurate and reliable information.
  - » Please use this section to cover things like emotional and behavioural support, the persons routines, likes, dislikes and how and when the person prefers to sleep (sleep pattern).
  - » This page can be used to offer additional information it may include signposting to specific support plans
  - » Previous hospital admissions
  - » Recent medical tests and when they were carried out
  - » Any fears or phobias for example getting blood taken, any medical interventions such as having a canular inserted.
  - » Risks around pulling out lines and tubes.



You



health needs



hospital stay



pain



support



help with  
communication





permission to  
treatment

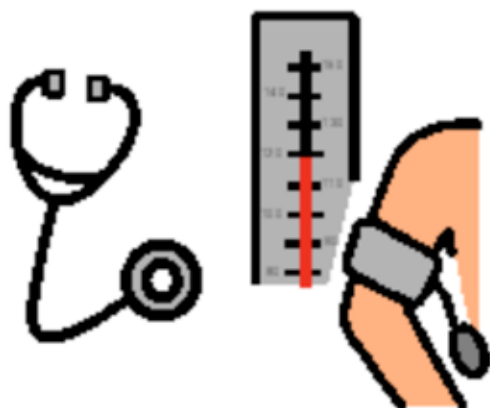


yes / no ?

medication



general health



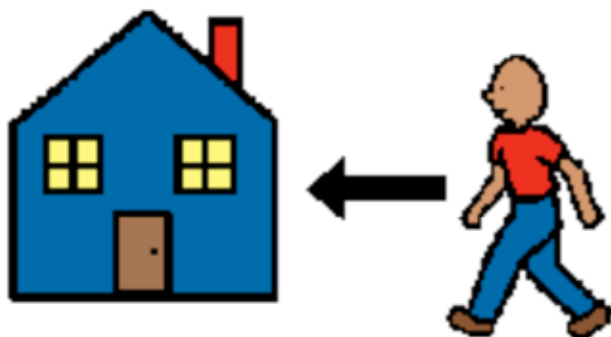
daily living



eating and  
drinking



Plans to go  
home



yes



no



unsure



understand



I don't understand



