

Plain English Newsletter

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1. About this newsletter

This newsletter is for:

- autistic people
- people with a learning disability
- family carers
- advocates
- community groups
- charities

It has been made with people with lived experience, including members of our Advisory Group.

There's lots of information in this newsletter. We have tried to make it plain English. We explain the hard words.

Sometimes you will see blue web links. Click on these to find out more.



2. The importance of reasonable adjustments and the Reasonable Adjustment Digital Flag

The NHS says that if people have a disability, there should be a flag on their health record to say if they need reasonable adjustments for their care.

A flag is a note on someone's health records which tells staff to look at the record for more information about the reasonable adjustments someone needs.

A reasonable adjustment is a change that a service can make, to help someone with a disability to get good, person-centred health and care.

Person-centred means making sure things are put in place to meet your individual needs, if this is possible.

In the future, a reasonable adjustment digital flag will be used across all health and social care services, which are paid for by the NHS or local councils.

Information will only be added to the digital flag, or shared, if you agree.

You may need services like a hospital, the doctors, a pharmacy, or physiotherapy. In all these places, staff will be able to see what your reasonable adjustments are, if you agree.

Remember, you may need different reasonable adjustments in different places.

Some reasonable adjustments you might need to support your: Communication needs

- getting information in easy read and making sure clear, simple language is used
- someone who can sign using British Sign Language (BSL) and explain to the person what is being said (interpreter or language/translation services)
- extra time for appointments
- a carer, friend, family member to go to the appointment with you

Physical needs

- an access ramp
- hospital transport to appointments
- space for a wheelchair
- disabled parking



Sensory needs

- a quiet place to wait or less busy appointment times
- to wait outside, in a car
- lights dimmed or
- someone to call your name when the service is ready to see you for your appointment

If you have a disability and you think you need reasonable adjustments, please talk to staff about these, to see what they can do to help you.

[Watch this video](#) to find out more about the Reasonable Adjustment Digital Flag.



3. National guide for acute mental health inpatient services for adults

In [edition 16](#), we told you about getting the right support at home, so you don't go into a mental health hospital when you don't need to.

In this newsletter, we tell you about a new national guide NHS England made, to make care better in acute mental health inpatient services for adults. Read the [easy read](#) version of the guide.

Acute mental health inpatient services means supporting people who are experiencing a serious, short period of mental illness who need to be in hospital.

This can include autistic people, people who have a learning disability or people who have both. Examples of mental health conditions are depression and [psychosis](#). Psychosis is when people lose some contact with reality.

When someone stays in hospital this means they are an inpatient and the care they get is called inpatient care.

They may be 'detained' under the Mental Health Act. This means they must stay in hospital. They need to have permission to leave hospital.

The new national guide

It is national guidance for integrated care boards (ICBs) to follow.

Integrated care boards are the organisations who plan and pay for health and care services for people in local areas.

This guidance describes what integrated care boards should think about when they are planning and paying for mental health inpatient care.

You can see the full [guidance](#) here. It is not in plain English, so you might want support to read it.



More about the national guide

The guide explains what should happen when an adult who has a learning disability or who is autistic or both, needs to go to an acute mental health hospital.

The guidance talks about two different types of acute mental health inpatient hospitals:

1. The first type is an acute mental health hospital. They are for all adults who need to go to hospital because of their serious mental health condition.

By law, people need to make reasonable adjustments to support people.

A reasonable adjustment is a change that a service can make, to help someone with a disability.

For example, reasonable adjustments in acute mental health hospitals could be:

- considering someone's sensory needs
- making sure the environment is suitable for a person, for example, having wheelchair access or having a low sensory space (with low lighting and less noise)
- using different communication methods for example Easy Read or Braille

2. The second type is an acute mental health hospital which is just for adults who are autistic or have a learning disability. They may need special care and support from people who understand their needs.

This inpatient care is for people:

- who need treatment that can only be given in a hospital
- who cannot use a general acute mental health hospital because it is not possible to make the right reasonable adjustments

Four key points in the guide

- people should only go to hospital when they need to
- services should work together
- people should be supported in general acute mental health hospitals where possible
- a hospital stay should make people get better



People you might meet in a mental health hospital

- psychiatrists are doctors who are specialists in mental health
- psychologists use talking therapies, conduct risk assessments to help people
- mental health nurses help people of all ages, who have many problems, emotional distress and/or mental illness
- learning disability nurses support and help people with their health and wellbeing, helping them to be as independent as possible
- occupational therapists (OT) help people of all ages to carry out day to day activities. They give practical advice or support
- physiotherapists (physios) help people to move their bodies better, to improve how they move
- nurses give care and support to people who have long or short-term physical health conditions
- speech and language therapists help people speak and communicate better. Some also help people who have problems with eating, drinking and swallowing
- advocates speak up for people, can attend meetings with you and can speak for you
- social workers help to keep people safe, to stop harm to people, to live more independently
- GPs (some services employ GPs directly) help people who have physical health problems

All the above professionals should work with the person and their families, carers, advocates and different services to help that person maintain their health and wellbeing.



Care and Treatment Reviews (CTRs)

The national guide will also tell you what help you should be having like care and treatment reviews (CTRs).

In [edition 16](#), you can read more about CTRs.

A care and treatment review is for adults with a learning disability or autistic adults or adults who have both, who might have to go into a mental health hospital.

The review is to look at the care, help and support they need.

The national guide also tells you how the person should be supported when they leave hospital. This is called being discharged. CTRs also happen in hospital to support your discharge.

Health staff in hospital will work with you and the people who support you including friends, family and carers to decide when is best for you to be discharged so you can go home.

You should have a plan in place to make sure you get the care and support you need in the community where you live.

How the national guide can help you

It includes information about the people you might meet who could support you when you are in hospital.

By reading this document you, your carer, or advocate will have a better idea what to expect if this happens to you.

If you are struggling with your mental health, it's important to make sure you speak to someone you trust and get the help you need.



4. What is diabetes?

Diabetes is a serious health condition.

When we eat food, some of that food turns into sugar and we need sugar for energy.

If you have diabetes, your body cannot turn sugar into energy, so it stays in your blood.

This causes problems and your sugar levels in your blood (sometimes referred to as blood sugar level) will need to be reduced.

Types of diabetes

There are two types of diabetes, type 1, and type 2 diabetes.

Type 1 diabetes is usually diagnosed in childhood or when you are a young adult. You have it for all of your life.

It is caused by a problem with your immune system. It is not connected to your lifestyle or being overweight.

Your immune system helps you fight germs and viruses, if it is working well.

We will talk more about type 1 diabetes in our next edition.

Most people who have diabetes, have type 2 diabetes.

People with type 2 diabetes can do things to help their diabetes.

You need to do the right things to look after yourself, so it doesn't lead to problems. Without treatment, diabetes can cause problems to your:

- eyes
- feet
- kidneys
- heart
- nerves
- brain and thinking



To avoid diabetes

Type 2 diabetes can often be prevented by:

- keeping physically active and exercising regularly
- reducing your weight if you are overweight

But people who are not overweight can also get diabetes.

It is important to eat food that keeps you healthy

- for most people it's good to eat fruit, vegetables, beans and lentils
- some meat, fish and dairy (milk) products if you can eat these types of foods.

Speak to your health professional if you have any concerns or need more advice, particularly if you have any allergies or intolerances.

Reduce the amount of sugary and unhealthy foods you eat, such as

- cakes, biscuits and chocolate
- white bread and white rice
- fizzy drinks

Developing diabetes

You might be more at risk of developing type 2 diabetes, if you:

- are over 40 years old
- are overweight or obese (such as having lots of weight around your tummy) or
- are not physically active

Some groups of people are more likely to develop type 2 diabetes if they

- have a close relative with diabetes, such as a parent, brother or sister
- are from an Asian, Black African or Black Caribbean ethnic background
- have a learning disability

But anyone can develop type 2 diabetes.



Symptoms of type 2 diabetes

Some symptoms of type 2 diabetes can include:

- feeling thirsty all the time
- needing to pee more than usual
- feeling very tired
- losing weight without trying to
- cuts or wounds not healing
- itching around your vagina or penis

Thrush is an infection that can affect your private parts like the vagina, penis and skin and can make you feel itchy. You may also get thrush in your mouth, and it will show as white patches on your tongue, inner cheeks and sometimes on the roof of your mouth and gums.

Another symptom of type 2 diabetes could be

- having blurred vision

Blurred vision means when you look at things, they will not look sharp and clear.

What to do if you are worried

If you have some of these symptoms, it does not mean you have diabetes, as these can be signs of other health problems.

But if you have any of the symptoms, you may be at higher risk of developing type 2 diabetes. If you are worried, you should see your GP.

Talk to your GP or nurse and they may ask you to have a urine and blood test. The earlier diabetes is found, and treatment started, the better.

If you do have diabetes, it is important that you keep up to date with all your checks, including diabetic checks, when invited



5. How to get support and speak up. Organisations who can help you

If you are worried about the care and treatment the NHS is giving you, tell someone you trust straight away.

The NHS has made a booklet and form in accessible formats. It helps you tell staff or a service what you think could be done better.

Read the booklets and forms: <https://www.speakup.org.uk/asklistendo>

Ask someone you trust to help you fill in the form, if you need to.

People who can help you

Click on the links below to find out more:

- [Advocates](#) - they can help you with writing letters, attending meetings, or explaining your options
- The [NHS Patient Advice and Liaison Service](#) (PALS) to find your nearest PALS office, or ask staff how to get in touch with PALS. They help with any queries or problems if you are in hospital
- Your local [Healthwatch](#) can help with questions about your GP, hospitals, dentists, pharmacies, care homes or other support services. A list of local Healthwatch organisations is available on their website
- If you are a parent carer, you can contact your [local parent carer forum](#). Parent carer forums try to make sure that services in their area meet the needs of disabled children and their families



6. Keep updated

Follow us on Facebook, as well as Twitter, which is now known as x.com to get more information and updates about how the NHS is making services better.

- Click on [Facebook](#) - we are called NHS England Learning Disability and Autism Engagement
- Click on [x.com](#) - we are called @NHSAbility

Read our previous [Plain English and Easy Read Newsletters](#)

Sign up for update emails by writing to: engage@nhs.net

NHS England website: <https://www.england.nhs.uk/>



7. Thank you

This newsletter was produced by the NHS England Learning Disability and Autism Engagement team and the wider programme, together with members from the Learning Disability and Autism Advisory Group.

Get in touch if you have any feedback on this newsletter.

You can either phone us on 0113 824 9686 or email us at engage@nhs.net