**Visiting exceptions**

Visiting or support from families or external carers need to follow the national and Trust guidance where ever possible. Each patient needs to be assessed as to the risk of harm to themselves (not others) or risk of high anxiety or distress without having those who they are familiar with their complex needs around them whilst in hospital.

Link to Hospital Visiting Guidance: http://www.salisbury.nhs.uk/InformationForPatients/Covid19/Pages/Visitorrestrictions.aspx

National Visiting Guidance: [https://www.nhs.uk/using-the-nhs/nhs- services/hospitals/visiting-someone-in-hospital/](https://www.nhs.uk/using-the-nhs/nhs-services/hospitals/visiting-someone-in-hospital/)

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**Caring for a patient with Learning Disability Principles during Coronavirus/ COVID-19**

**Notifying deaths of patients with a Learning Disability**

Deaths of people with learning disabilities continue to be notified to the national review programme (LeDeR).

If you know of a patient with a learning disability who has died in the SFT please contact the Adult Safeguarding Lead who will make sure the correct team makes the referral

Ext 2814

SFT email address: shc-tr.SafeguardingSFT@nhs.net

People with a learning disability have a higher rate of morbidity / mortality than the general population. In

2018/19 at least 41% of people with a learning disability died as a result of a respiratory condition.

This leaflet contains information and guidance to support patients with a Learning Disability and/or Autism.

Professor Stephen Powis, National Medical Director for

England, has stated that:

'The terms "learning disability " and "Down's Syndrome" should never be a reason for issuing a DNACPR order or be used to describe the underlying or only, cause of death....learning disabilities are not fatal conditions"

**The following key points should be addressed when assessing or treating a patient with a learning disability or autism who is suspected of having, or known to have coronavirus,**

 Pay attention to healthcare passports

 Listen to parents/carers

 Make reasonable adjustments, this is a legal requirement.

Ask the person and their carer / family what reasonable adjustments should be made.

 Communication - check with the person / family / carer or passport the best way to achieve this.

 Be aware of diagnostic overshadowing - don't mistakenly attribute the presentation of symptoms or behaviour purely to their learning disability or autism diagnosis.

 Mental Capacity Act/DoLS Covid-19 guidance

Refer to the principles of the Act to support decision making there has not been any exceptions or changes in any of the recent Covid-19 guidance or the Coronavirus Act 2020

 DoLS requirements (the “Acid Test”) remain the same however “Where life-saving treatment is being provided, including for the treatment of COVID-19, then the

person **will not be deprived of liberty as long as the treatment is the same as would normally be given to any person without a mental disorder.** The DoLS will therefore not apply.

 Safeguarding duties and responsibilities have not changed; any concerns please raise a s42 Safeguarding referral with the relevant Local Authority

 Ask for specialist support and advice if necessary

 Mental wellbeing and emotional distress. A change in routine and current PPE requirements may have a big impact. Work with the person, their family or carer to find out how to help the patient stay calm. For a few

patients this may require 1:1 support, or a family member or carer to stay with them

**Resources:**

SFT Safeguarding Hub: <http://intranet/website/staff/staffservices/safeguardingchildrenandadults/adults/index.asp>

**Clinical Frailty Scale**

NICE Guidance has been updated 25th March 2020:

Link to MicroGuide: <https://viewer.microguide.global/SALIS/COVIDSALI#content,91e0caf9-4b25-436c-afda-81f95f6bf389>

**Mental Capacity Act (2005) Practice and Procedures**

Link to MicroGuide: <https://viewer.microguide.global/SALIS/CLINICAL#content,e9f81923-a94b-4339-b187-c56841c9909b>

*'The CFS should not be used in younger people, people with stable long-term disabilities (for example cerebral palsy), learning disability or autism. An individualised assessment is recommended in all cases where the CFS is not appropriate'*

Version 1.0 May 2020

Due for review May 2022