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Title: The prevalence of overweight and obesity levels among forensic inpatients with learning disability

Citation: British Journal of Learning Disabilities; Feb 2018

Author(s): Russell, Rachel; Chester, Verity; Watson, James; Nyakunuwa, Canisius; Child, Lucy; McDermott, Mary; Drake, Sharon; Alexander, Regi T.

Background: Inpatient mental health settings have been described as "obesogenic," due to factors including psychotropic medication, high-calorie food provision, restricted physical activity and sedentary lifestyles. No research has investigated the prevalence of obesity among forensic inpatients with learning disability, despite this population's increased risk.

Materials and Methods: The weight and body mass index (BMI) data of 46 inpatients (15 women and 31 men) within a specialist learning disability forensic service was examined on, and during admission.

Results: Only 13% of inpatients were a normal weight at admission, whereas 87% were overweight or obese. During admission, 61% gained weight, and 2% maintained. However, 37% lost weight, although many of this group remained overweight/obese. Women gained more weight during their admission, but were also more successful in losing weight. There was no correlation between length of stay and weight.

Conclusions: The results highlight the need for effective, gender-sensitive weight management interventions within similar services nationally.

Title: The role of general anesthesia on traits of neurodevelopmental disorders in a Swedish cohort of twins

Citation: Journal of Child Psychology and Psychiatry; Feb 2018

Author(s): Castellheim, Albert; Lundström, Sebastian; Molin, Mattias; Kuja-Halkola, Ralf; Gillberg, Carina; Gillberg, Christopher

Background: The role of general anesthetics as a risk factor for possible neurodevelopmental disorders (NDDs) in humans is unresolved. The investigation of the role of anesthetics in the development of postgeneral anesthesia (anesthesia onward) NDDs has proven to be complicated, partly because of the inherent confounding in clinical cohort studies, and partly by the fact that anesthetics are only one part in the complex process of anesthesia-surgery.

Methods: Utilizing the Swedish databases Child and Adolescent Twins Study in Sweden (CATSS) and National Patient Register (NPR), we investigated twins discordant for anesthesia, born between 1997 and 2004 for traits of NDDs. We identified 68 twin pairs discordant for anesthesia and explored traits of Attention-Deficit/Hyperactivity Disorder (ADHD), Learning Disability (LD), and Autism Spectrum Disorder (ASD) in them while simultaneously taking congenital abnormalities and systemic disorders (CSDs) into account. We analyzed the possible effect of anesthesia on neurodevelopmental problems, and we analyzed the within-pair differences using conditional linear regression.

Results: Twins with a recorded episode of anesthesia had higher traits of NDDs than twins without; similarly twins with CSDs had higher mean scores on all traits than twins without CSDs. The within-pair analyses suggested that exposure to anesthesia was associated with higher scores of ADHD (regression coefficient 1.02 and 95% confidence intervals: 0.27–1.78) in monozygotic (MZ) twins discordant for anesthesia. This effect remained when adjusting for congenital abnormalities.
**Discussion:** Our finding that traits of ADHD were slightly associated with anesthesia in a genetically sensitive design is in need of replication and warrants further investigation. Future studies should aim to elucidate mechanisms behind this possible association (e.g. anesthetics doses, age at exposure, exposure duration).

**Title:** Ten years of response to intervention: Trends in the school psychology literature

**Citation:** Contemporary School Psychology; Feb 2018  
**Author(s):** Gischlar, Karen L.; Keller-Margulis, Milena; Faith, Erin L.

**Abstract:** With the reauthorization of the Individuals with Disabilities Education (Improvement) Act (IDEA) in 2004, local education agencies (LEAs) were no longer required to employ an IQ-achievement discrepancy model in the identification of a specific learning disability (SLD). Rather, districts were permitted to use data from a Response to Intervention (RTI) framework in determining a student’s eligibility for special services under the SLD classification. Because this change in legislation has the potential to impact the ways in which schools provide services to students, it is important to review the research base that informs practice. This review of the trends in the RTI literature examines the frequency and type of published research in the 10 years that followed the changes to IDEA. Results indicate that further research is warranted, particularly in the areas of procedural integrity and full model implementation.

**Title:** Fostering self-regulation of students with learning disabilities: Insights from 30 years of reading comprehension intervention research

**Citation:** Learning Disabilities Research & Practice; Feb 2018  
**Author(s):** Berkeley, Sheri; Larsen, Anna

**Abstract:** Thirty years of intervention research on the effects of reading comprehension strategies for students with learning disabilities was reviewed in this quantitative synthesis. Specifically, researchers targeted studies that contained self-regulated learning components. A systematic search yielded 18 studies from nine research journals that met specified inclusion criteria. Studies were evaluated for methodological quality and to identify types of instructional and self-regulation components within interventions. Large effect sizes were found immediately after instruction and after a time delay, suggesting that instruction in reading comprehension strategies that contain self-regulation components may have a long lasting impact on student performance. Implications for research and practice are discussed.

**Title:** "Mercury exposure, nutritional deficiencies and metabolic disruptions may affect learning in children": Correction

**Citation:** Behavioral and Brain Functions; Feb 2018; vol. 14  
**Author(s):** Dufault, Renee; Schnoll, Roseanne; Lukiw, Walter J.; LeBlanc, Blaise; Cornett, Charles; Patrick, Lyn; Wallinga, David; Gilbert, Steven G.; Crider, Raquel
Abstract: Reports an error in "Mercury exposure, nutritional deficiencies and metabolic disruptions may affect learning in children" by Renee Dufault, Roseanne Schnoll, Walter J. Lukiw, Blaise LeBlanc, Charles Cornett, Lyn Patrick, David Wallinga, Steven G. Gilbert and Raquel Crider (Behavioral and Brain Functions, 2009[Oct][27], Vol 5[44]). In the original article, there was an error in URL link for the Reference 19 was broken and it needs to be replaced with the active link. The active link is present in the erratum. (The following abstract of the original article appeared in record 2009-21635-001). Among dietary factors, learning and behavior are influenced not only by nutrients, but also by exposure to toxic food contaminants such as mercury that can disrupt metabolic processes and alter neuronal plasticity. Neurons lacking in plasticity are a factor in neurodevelopmental disorders such as autism and mental retardation. Essential nutrients help maintain normal neuronal plasticity. Nutritional deficiencies, including deficiencies in the long chain polyunsaturated fatty acids eicosapentaenoic acid and docosahexaenoic acid, the amino acid methionine, and the trace minerals zinc and selenium, have been shown to influence neuronal function and produce defects in neuronal plasticity, as well as impact behavior in children with attention deficit hyperactivity disorder. Nutritional deficiencies and mercury exposure have been shown to alter neuronal function and increase oxidative stress among children with autism. These dietary factors may be directly related to the development of behavior disorders and learning disabilities. Mercury, either individually or in concert with other factors, may be harmful if ingested in above average amounts or by sensitive individuals. High fructose corn syrup has been shown to contain trace amounts of mercury as a result of some manufacturing processes, and its consumption can also lead to zinc loss. Consumption of certain artificial food color additives has also been shown to lead to zinc deficiency. Dietary zinc is essential for maintaining the metabolic processes required for mercury elimination. Since high fructose corn syrup and artificial food color additives are common ingredients in many foodstuffs, their consumption should be considered in those individuals with nutritional deficits such as zinc deficiency or who are allergic or sensitive to the effects of mercury or unable to effectively metabolize and eliminate it from the body.

Title: Perpetrators of domestic violence abuse within intellectual disability services: A hidden population?

Citation: British Journal of Learning Disabilities; Feb 2018
Author(s): Swift, Charlotte; Waites, Erin; Goodman, Wendy

Accessible Summary: Domestic violence abuse is when people hurt family members or partners with their words or actions, take their money or try to control them. It is against the law to do this. We wanted to know more about how many people with intellectual disabilities are being violent in their relationships.

Background: Forensic Community Learning Disabilities Team (CLDT) noticed more people were being referred to the team because they had been violent in their relationships. The Forensic CLDT looked at their referrals to see how many people were violent in their relationships. They also looked at referrals for their local Community Learning Disabilities Teams to see how many people were violent in their relationships. The research showed that more people who were referred to the Forensic CLDT needed help for violence in their relationships in 2015. The CLDTs also had referrals for people who were violent in their relationships. It is important to understand more about people with intellectual disabilities who are abusive in their relationships so we can help them. Domestic violence abuse (DVA) has been identified by the UK Government as a priority to address. Whilst there is a growing body of research into perpetrators of DVA from the mainstream population, there is scant research into perpetrators of DVA who have an intellectual disability. This lack of an evidence base suggests there may be a group of individuals for whom there is no suitable
treatment approach. A Forensic Community Learning Disabilities Team (FCLDT) completed a multiservice evaluation of their service and sector CLDTs to obtain a measure of local unmet need.

Materials and methods: A retrospective review was completed for referrals to the FCLDT and four of their sector CLDTs for 2014 and 2015. A record sheet was designed for the process of data collection and the analysis of referrals. Results In regard to the FCLDT, 14% of the total referrals made to the FCLDT in 2014 referenced DVA perpetration and the figure rose to 26% in 2015. For CLDTs, 1.9% of the total referrals made to the CLDT in 2014 and 3.18% in 2015 referenced DVA perpetration.

Conclusions: A significant proportion of referrals to the Forensic CLDT relate to the perpetration of domestic violence abuse. A proportion of Sector CLDT referrals made reference to behaviours that, according to the Home Office definition, would be classified as domestic violence abuse, but was infrequently referred to as such. The paper considers these findings in the light of the Home Office definition and its application to people with intellectual disabilities.

Title: Testing Off the Clock: Allowing Extended Time for All Students on Tests

Citation: Journal of Nursing Education; Mar 2018; vol. 57 (no. 3); p. 166
Author: Birkhead, Susan F

Background: Standardized time allotments are typically imposed for administration of nursing tests. There is little evidence to guide the determination of time allotment. When time allotted for tests is too limited, construct irrelevant variance in test scores may be introduced and the reliability of tests may be negatively impacted.

Method: For test administration, we establish a standard time allotment and offer all students the option of extended time.

Results: Many of the students use extended time, reporting that extended time reduces stress. Program outcomes have not been negatively affected. Data are provided to guide calculation of time allotment.

Conclusion: Extended time may help relieve test anxiety and facilitate success for students with undiagnosed learning disabilities or non-native English speakers. Time allotment should be based on the item composition of tests using published mean item response times. Further research is needed.

Title: Friday is my "inclusion day"—Challenges of inclusivity for people with learning disabilities in the context of real lives, rather than imagined.

Citation: British Journal of Learning Disabilities; Mar 2018; vol. 46 (no. 1); p. 1-3
Author: Gates, Bob

Abstract: An introduction is presented in which the editor discusses articles in the issue on topics concerning people with learning disabilities, including use of psychotropic medication to manage behaviours, active adult life as independent living, and disabled persons' emotional experience of bereavement.
Title: Active adult lives for persons with learning disabilities—The perspectives of professionals.

Citation: British Journal of Learning Disabilities; Mar 2018; vol. 46 (no. 1); p. 10-16
Author(s): Witsø, Aud Elisabeth; Kittelsaa, Anna M.

Objective: Living active adult lives is both a value and a right, but the right to do so is associated with restrictions among adults with learning disabilities. This research aimed to capture professionals’ understanding and perception of active adult living for people with learning disabilities living in clustered housing in a Norwegian community.

Materials and Methods: Field notes and transcripts of interviews were analysed by systematic text condensation based on Giorgi’s psychological phenomenological analysis, with focus on the professionals’ own expressions about their experiences and not an exploration of deeper meanings. Results and Discussion: The analysis identified four main themes: (i) active adult life as independent living and self-determination, (ii) choice of lifestyle, (iii) accommodation and privacy and (iv) the role of professionals. Results are discussed against concepts like dependence, independence and interdependence.

Conclusion: The role of professionals and structural conditions for support and care is crucial for how active adult living is realised for people with learning disabilities. The results highlight the need for further discussions of conditions for active adult living in people with learning disabilities.

Title: In search of a family: The contribution of art psychotherapy to a collaborative approach with a man residing in a forensic learning disability setting.

Citation: British Journal of Learning Disabilities; Mar 2018; vol. 46 (no. 1); p. 17-23
Author(s): Caveney, Domanic; Wassall, Shaun; Rayner, Kelly

Accessible Summary: Some clients in learning disability services have problems in their relationships with people. Some clients with learning disability have broken the law and live in hospital. For clients in hospital, treatment can be learning about managing behaviour, feelings and relationships. This treatment is given by different professionals. This treatment is important to help stop these clients getting into trouble with the police again. An important part of treatment is to help clients understand their experiences in relationships. This case study is about Oliver, and how psychologists and an art therapist worked together to help him.

Background: Clients with attachment issues are over-represented in learning disability services. Forensic inpatient services are no exception. Treatment pathways comprise multidisciplinary interventions, and skills-based treatments are considered vital to recovery and maintenance of prosocial and adaptive behaviour and reduction in risk. An important aspect of treatment is the psychological intervention to enable clients to understand their early experiences and the way this may have impacted on later relationships and behaviour. Without exploring the difficult early lives that many clients in forensic inpatient services have experienced, skills-based treatments and attempts to facilitate discharge may not be effective.

Materials and methods: This case study presents the theoretical background of attachment, autism, learning disability and sexual offending that informed the collaborative multidisciplinary psychological treatment offered to one man with learning disabilities and autism in a secure forensic setting.
**Results:** The introduction of Art Psychotherapy enabled the client to explore his history and the potential internal barriers to his therapeutic progress. Issues of safety and belonging, previously unexplored with this man, were uncovered and these themes were incorporated into his risk formulation and treatment plan.

**Conclusions:** The paper reflects on the specific contribution of Art Psychotherapy in specialist services, and the importance of the collaborative relationship between the Art Psychotherapist and the ward Multi-Disciplinary Team.

**Title:** From "Learning disability to intellectual disability"—Perceptions of the increasing use of the term "intellectual disability" in learning disability policy, research and practice.

**Citation:** British Journal of Learning Disabilities; Mar 2018; vol. 46 (no. 1); p. 24-32

**Author(s):** Cluley, Victoria

**Accessible Summary:** "Learning disability" replaced the outdated term, "mentally handicapped" in the UK over 20 years ago. Recently, some services and professionals have been using the term "intellectual disability" instead. In America, "intellectual disability" has been chosen to replace the old term, "mental retardation." There has been lots of explanation why this has happened. In the UK, there has not been much explanation. It is important to know what terms mean and why they are being used because their use affects the lives of people with learning disabilities. This article looks at what different people in the UK think about term "intellectual disability."

**Background:** The term "intellectual disability" is increasingly used to refer to people with learning disabilities in British learning disability policy, practice and research. This change is undoubtedly a reflection of the changing international context. The inclusion of the term "intellectual disability" has been particularly pronounced in countries such as the USA. By contrast, this change has been relatively silent in England.

**Methods:** In light of this, the paper explores the discussions of 12 focus groups conducted with professional and lay groups working in or influencing learning disability research and practice in England. Each focus group was asked the following two questions: Have you heard of the term "intellectual disability" and how do you feel about the term "intellectual disability"?

**Discussion and Conclusion:** Thematic analysis of the discussions identified four dominant themes: dislike and disbelief; ambiguity; tautology; and fear. It is concluded that more explanation is required in order for researchers and practitioners in England to understand this semantic change.

**Title:** Improving services for people with learning disabilities and dementia: Findings from a service evaluation exploring the perspectives of health and social care professionals.

**Citation:** British Journal of Learning Disabilities; Mar 2018; vol. 46 (no. 1); p. 33-44

**Author(s):** Chapman, Melanie; Lacey, Huma; Jervis, Nicola

**Accessible Summary:** Dementia is an illness caused by damage to a person's brain. People with learning disabilities, especially people with Down's Syndrome, are more likely to get dementia, and when they are younger. We talked to people working in community learning disability teams to find out what they thought about services and support for people...
with learning disabilities and dementia and carers. Screening and assessments mean that people get diagnosis and support more quickly and other problems are picked up. More appropriate housing and support is needed so people can stay at home for longer. Research needs to look at the best ways to support people with learning disabilities and dementia. It is important to find ways to involve people with learning disabilities and dementia and carers in meetings about their support and future research.

**Background:** Dementia prevalence rates are higher amongst people with learning disabilities than the general population. People with Down’s syndrome are at even greater risk of developing dementia and of developing dementia at an earlier age. This study, conducted as part of a wider service evaluation, explored community learning disability team perspectives on screening, pathways, training, information and supports developed to improve services for people with learning disabilities and dementia.

**Methods:** A focus group was held with health and social care professionals working in community learning disability services. Thematic analysis was used to analyse the data.

**Results:** The dementia screening, pathways and processes had become embedded in practice, leading to a common framework, an efficient, multidisciplinary, proactive approach, earlier detection and diagnosis of dementia and identification of other health needs and issues. This avoided crisis situations supporting people to remain at home longer. Training and information were felt to improve care quality and reduce caregiver anxiety. People with learning disabilities and caregivers were involved to varying extents. External influences impacting on support included the availability, appropriateness, cost and effectiveness of different models of service provision.

**Conclusions:** Service developments have been made as a result of the findings which suggest that dementia pathways and supports improve service provision and outcomes for people with learning disabilities. It is important to develop the evidence base on the effectiveness of different service models for people with learning disabilities and dementia. Future studies need to gather views of people with learning disabilities and carers.

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**Title:** "I carry her in my heart": An exploration of the experience of bereavement for people with learning disability.

**Citation:** British Journal of Learning Disabilities; Mar 2018; vol. 46 (no. 1); p. 45-53

**Author(s):** Thorp, Nicki; Stedmon, Jacqui; Lloyd, Helen

**Accessible Summary:** Four people with learning disability talked about what it was like when someone they cared about had died. They said that it was important they were included, but that it was hard. They said they carried on loving the person after they died and that they missed them.

**Background:** Bereavement is a universal experience, yet little research has explored the lived experience of bereavement for people with learning disability (PWLD).

**Materials and methods:** Four PWLD were interviewed about their experience of bereavement. Data were analysed using interpretative phenomenological analysis.

**Results:** Four themes were identified: "Needing to know: Being included," "Struggling to say: The emotional experience," "Love after death: A continuing relationship" and "Missing their presence: The wider impact of death."

**Conclusions:** PWLD should have the opportunity to make informed choices about their level of involvement and to develop their emotional experience. PWLD should be supported to develop a continued bond with the deceased and the wider impact of their loss recognised.
Title: Moving on: Transitions out of care for young people with learning disabilities in England and Sweden.

Citation: British Journal of Learning Disabilities; Mar 2018; vol. 46 (no. 1); p. 54-63
Author(s): Roberts, Helen; Ingold, Anne; Liabo, Kristin; Manzotti, Grazia; Reeves, David; Bradby, Hannah

Accessible Summary: When young people with learning disabilities leave the care system, they can experience many problems. Here we describe some of these problems and what they do (or would like us to do) to improve things. Young people do not always want the same things that professionals or family carers want. We do not spend enough time listening to what young people can tell us.

Background: Young people with learning disabilities are frequently underrepresented in research accounts. This study describes the experiences of young people moving from the care system.

Methods: We scoped the English and Swedish literature for first-hand accounts and interviewed four young people with learning disabilities leaving the English care system. We combined findings from both sources.

Findings: "Grey" and campaigning literature are more likely than academic studies to include the voices of service users, but even then, the voices tend to be those of professional or family carers. Both the literature and interviews demonstrate young peoples' awareness and understanding of the social as well as financial benefits of work. Good foster care could be precarious, and young people in unhappy placements lacked direction. Exploitation around a young person's housing and finances could be problems. There was evidence of "threshold" difficulties in accessing services.

Conclusions: Despite an NHS commitment to listening to users in the UK, and similar aspirations in Sweden, our search of the literature identified few studies reporting care leavers' with learning disabilities own words. Our data add to the voices of a group frequently silent or silenced. We found evidence of resilience and hope as well as difficulties and frustrations. The accounts in the literature and our interviews provide data on what it can be like to try to operate "the system." The people we spoke with and those whose accounts we found in the literature were thoughtful and engaging. They provide an important source of knowledge for policy and practice.

Title: Transforming identities through Transforming Care: How people with learning disabilities experience moving out of hospital.

Citation: British Journal of Learning Disabilities; Mar 2018; vol. 46 (no. 1); p. 64-70
Author(s): Head, Annabel; Ellis-Caird, Helen; Rhodes, Louisa; Parkinson, Kathie

Accessible Summary: People with learning disabilities talked about what it was like to move out of hospital. People talked about how important their relationships with other people were. People wanted to feel comfortable with new members of staff so that they felt safe and happy in their new home. People talked about how moving out of hospital changed how they thought about themselves. When they were in hospital, people sometimes thought that they were "bad." But after they moved, some people started to think that they were a different person. It is important for everyone to think about how they talk to people when they are in
hospital, and when they have moved out. People can do really well living in their own home, rather than in hospital.

**Background:** People with learning disabilities are moving out of hospitals as part of the Transforming Care programme, although thus far their views on how they have experienced this have not been researched.

**Materials and Methods:** A qualitative design was used to explore how people with learning disabilities experienced moving as part of Transforming Care. Eleven people took part in semi-structured interviews; they were supported by Key Support People (n = 9) who knew them well. A social constructionist Grounded Theory approach was used in analysis.

**Results and Discussion:** People reported that their relationships with other people, including friends, family and staff, played a significant role in how they experienced the move. Moving was also an opportunity for people to shift their ideas about who they were as a person and opened up a wider array of stories about their identity.

**Conclusions:** A number of recommendations are discussed, relevant for staff working in this field to support positive transitions out of hospital.

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**Title:** Reading Fluency and Students With Reading Disabilities: How Fast Is Fast Enough to Promote Reading Comprehension?

**Citation:** Journal of Learning Disabilities; Mar 2018; vol. 51 (no. 2); p. 124-136

**Author:** O'Connor, Rollanda E.

**Abstract:** The goal of improving reading rate and fluency is to positively impact reading comprehension; however, it is unclear how fast students with learning disabilities (LD) need to read to reap this benefit. The purpose of this research was to identify the point of diminishing return for students who were dysfluent readers. Participants included 337 students with reading difficulties in second and fourth grade (61% eligible for special education; 80% with a diagnosis of LD in the area of reading) and 150 typical readers from the same general education classes. LOESS (LOcal regrESSion) plots (logistic regression) were used to determine where linear relations between reading rate and comprehension broke down for these students: the rate at which getting faster no longer contributed clearly to reading comprehension improvement. Although typical readers in this sample showed patterns of oral reading rate and comprehension similar to students in other studies, patterns for students with reading difficulties differed. For dysfluent readers, improving reading rate improved comprehension only in the bands between 35 and 75 words correct per minute in second grade and between 40 and 90 words correct in fourth grade. Reading at faster rates revealed no clear advantage for reading comprehension.

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**Title:** Helping families understand how capacity and consent affect care.

**Citation:** Nursing Standard; Feb 2018; vol. 32 (no. 25); p. 65-65

**Author:** Russ, Marina

**Abstract:** The author presents a personal narrative of her experience of helping families and carers of people with learning disabilities to have knowledge on capacity and consent affect care.
Title: Health promotion for young people with profound and multiple learning disabilities.

Citation: Nursing Children & Young People; Feb 2018; vol. 30 (no. 1); p. 28-34
Author(s): Davis, Kathy; Carter, Simone; Myers, Elizabeth

Abstract: Research confirms that children and young people with severe learning disabilities do not have the same level of access to high-quality care, health education and health promotion activities as children and young people without disabilities. This article discusses a quality improvement, action research project to investigate alternative approaches to health promotion that enhance the health and well-being of children and young people with complex neurodisabilities. The project involved assessment of school records and completion by staff of an eight-question survey. It found that the proactive approach of school nurses in raising awareness and understanding through questioning was positively received, and reinforced how meaningful and relevant information could be delivered to these young people. The project also had unexpected benefits, including more integrated team working, increased knowledge, greater awareness and understanding of the importance of health promotion participation, and student satisfaction.

Title: Metamorphosis -- or bridges not barriers.

Citation: Mental Health Practice; Feb 2018; vol. 21 (no. 5); p. 13-13
Author(s): McClimens, Alex; Ismail, Mubarak; Kelly, Shona; Breckon, Jeff

Abstract: In the article, the authors discuss the importance of cross-training between fields of practice in mental health in Great Britain to guarantee that individuals with mental health issues and learning disabilities will receive the proper physical healthcare.

Title: Barriers Facing Social Workers Undertaking Direct Work with Children and Young People with a Learning Disability Who Communicate Using Non-Verbal Methods.

Citation: British Journal of Social Work; Jan 2018; vol. 48 (no. 1); p. 88-105
Author(s): Prynallt-Jones, Katherine Anne; Carey, Malcolm; Doherty, Pauline

Abstract: This paper analyses data drawn from a small group of qualified social workers specialising in work with disabled children who communicate using non-verbal methods. While a number of studies have criticised social services for neglecting disabled children, this paper re-evaluates evidence from the standpoint of a small group of experienced practitioners. Three substantive themes are explored, which include: problems faced by practitioners communicating with children and young people; barriers to direct work; and positive engagement or use of creative methods. Among other findings, the paper highlights the complexity of communication techniques when seeking to accommodate diverse service user and carer needs, as well as creative responses used by practitioners despite significant barriers that include limited available training, technology and financial resources. Despite policy initiatives and legal requirements emphasising the importance of direct work and participation with disabled children, the conclusion reiterates the narrow focus of current risk-averse social work around disability, as well as a need for additional resources and training.
to improve relationships, communication and meaningful support for children and young people who meet basic legal requirements.

Title: Quality of home life for adults with learning disabilities: the interplay of economic policy and professional practice.

Citation: Tizard Learning Disability Review; Jan 2018; vol. 23 (no. 1); p. 8-11
Author: Dalrymple, John

Objective: The purpose of this paper is to provide a commentary on the preceding article describing changing patterns in the provision and take-up of accommodation services for adults with learning disabilities in Ireland, in the context of the types of reductions in funding that have been apparent internationally for some time.

Design: The commentary examines some of the implications and discusses some of the underlying quality of life issues implicit in the data presented. It also explores the tensions between owning one’s home and receiving specialist support and examines what supported living might enable services to achieve.

Findings: The paper concludes that the nature of economic policy and professional practice, alike, have implications for the quality of home life enjoyed by adults with learning disabilities; and that the interplay between them is more complex than is often allowed.

Value: These issues are not new, but frustratingly enduring. Their fresh consideration might assist the urgent need to achieve a more coherent narrative capable of consistent application for present and future generations.

Title: The use of anti-psychotic and other psychotropic medication in a specialist community service for adults with learning disabilities.

Citation: Tizard Learning Disability Review; Jan 2018; vol. 23 (no. 1); p. 12-21
Author(s): Clare, Isabel C. H.; Wade, Kelly A.; Bolton, Sorcha; Wagner, Adam P.; Steven, Tatsiana; Holland, Anthony J.

Objective: The purpose of this paper is to examine the extent to which, in the five integrated community teams for adults with learning disabilities (CTLDs) in an English county-wide service, the use of psychotropic medication for service users was based on the presence of an appropriate mental health condition or epilepsy.

Design: Adult participants were recruited following referral to one of the CTLDs for assessment, treatment and/or support of a possible mental health and/or behavioural need. Data were collected about participant characteristics and psychotropic medication 12 months after recruitment.

Findings: While a total of 42 (78 per cent) of the 54 participants were apparently prescribed regular or PRN (as required) psychotropic medication, only 24 (57 per cent) of these individuals had a recorded past or current mental health condition or epilepsy for which such medicine could be appropriate.

Research limitations/implications: There were several limitations: the sample size was small and its representativeness was uncertain; and data collection was compromised by barriers to explicit knowledge exchange within and across the learning disability service.

Practical implications: While recent guidance about the use of psychotropic medication is welcome, minimising inappropriate use requires more comprehensive person-centred
interventions (including crisis management plans), underpinned by imaginative, but feasible, data collection methods and integrated formulations. Investment is needed in developments that support multi-disciplinary and inter-agency working to promote “good practice” by CTLDs in responding to referrals for possible mental health and/or behavioural needs. Originality/value Complementing recent large studies of primary care (General Practitioner) records, this is the first examination of the use of psychotropic medication by service users in English CTLDs.

Title: Optimising psychotropic medication use.

Citation: Tizard Learning Disability Review; Jan 2018; vol. 23 (no. 1); p. 22-26
Author: Sheehan, Rory

Objective: This commentary accompanies Clare et al.’s study investigating psychotropic drug prescribing for adults with intellectual disability who were referred to specialist community learning disability teams in the east of England. The purpose of this paper is to explore some of the background to psychotropic drug prescribing for people with intellectual disability, review important contextual factors that influence prescribing decisions, and consider how we might make the best use of psychotropic drugs in this group.

Design: Narrative summary and opinion, supported by reference to recent research literature.

Findings: Psychotropic drug use for people with intellectual disability raises complex issues, not least because of the lack of research evidence that exists on the topic. Psychotropic drugs can be an important part of treatment for people with mental illness but further research is needed to support prescribing for challenging behaviour. Medication optimisation is a framework within which individual preferences and values are considered alongside the evidence base and clinical judgement in order to inform safe, effective, and collaborative management decisions.

Practical implications: Prescribing decisions should be individualised and reviewed regularly, incorporating evidence from patients and carers. Improving the use of psychotropic medication requires concerted action, adequate social support, and the provision of alternative, non-pharmacological interventions that are acceptable and effective.

Originality/value: This paper reviews some of the current concerns about the use of psychotropic drugs and opens up new avenues of discussion.

Title: Correlates for the risk of specialist ID hospital admission for people with intellectual disabilities: development of the LDNAT inpatient index.

Citation: Tizard Learning Disability Review; Jan 2018; vol. 23 (no. 1); p. 42-50
Author(s): Painter, Jon; Ingham, Barry; Trevithick, Liam; Hastings, Richard P.; Roy, Ashok

Objective: The purpose of this paper is to analyse ratings data from the recently developed Learning Disability Needs Assessment Tool (LDNAT) to identify factors associated with specialist intellectual disability (ID) hospital admissions.

Design: Ratings from 1,692 individuals were analysed and the LDNAT items differing significantly between inpatients and non-inpatients were identified. Statistical analyses on total scores derived from these items were used to calculate an optimal cut-off. This LDNAT inpatient index score was also confirmed via an alternative statistical technique.
Findings: On average, 18 of the 23 LDNAT item ratings were significantly higher in people with ID assessed as inpatients compared to those rated in community settings. Using the total of these items, the resulting LDNAT inpatient index was analysed. A cut-off score of 22.5 was calculated to be the optimal balance between sensitivity (0.833) and specificity (0.750). This was confirmed by calculating the Youden index (j=0.583). At this level 68 per cent of inpatients and 81 per cent of non-inpatient cases were correctly identified.

Practical implications: Currently there is a national (UK) programme to radically reduce the amount of specialist inpatient care for people ID. This will necessitate early identification of individuals most at risk of admission together with investment in improved, proactive community services if admissions to a diminishing bed-base are to remain manageable.

Originality/value: This study confirms the associations between mental health difficulties, challenging behaviour and specialist hospital admissions for people with ID, extending existing research by translating these findings into a clinically usable risk index.

Title: CQC inspection reports for acute NHS trusts: are there relationships between the comments in inspection reports regarding people with learning disabilities and CQC hospital/trust ratings?

Citation: Tizard Learning Disability Review; Jan 2018; vol. 23 (no. 1); p. 56-62

Author(s): Baines, Susannah; Hatton, Chris

Objective: People with learning disabilities are at risk of poor health and premature death. Due to these inequalities, NHS trusts are required to make reasonable adjustments to their care, such as longer appointment times, with the legal duty on them being "anticipatory". The paper aims to discuss these issues.

Design: Secondary analysis of CQC acute hospital inspection reports asking the following research questions: Do CQC inspection reports mention people with learning disabilities? Where issues concerning people with learning disabilities are reported in CQC hospital inspection reports, what issues and reasonable adjustments are reported? Are there any relationships between comments made in the inspection reports and CQC ratings of the trusts?

Findings: In total, 29 of the 30 trust-wide inspection reports (97 per cent) and 58 of the 61 specific site reports (95 per cent) included at least one mention of people with learning disability/ies. Most comments about practices for people with learning disabilities were positive across all CQC inspection output types and across all CQC overall ratings, although the proportion of positive comments decreased and the proportion of negative comments increased as CQC ratings became less positive.

Research limitations/implications: Overall the authors found that CQC inspection reports routinely contained some information regarding how well the hospitals were working for people with learning disabilities. The depth of information in reports varied across trusts, with the potential for CQC reports to more consistently report information collected during inspections.

Title: Outcomes of an Occupational Therapy–Supported Education Program for College Students with Autism Spectrum Disorder, Learning Disability, and Mental Health Diagnoses.

Citation: American Journal of Occupational Therapy; Jul 2017; vol. 71 ; p. 167-167
Author: Schindler, Victoria

Title: School Nurses' Role in Helping Children with Attention-Deficit/Hyperactivity Disorders.

Citation: NASN School Nurse; Jan 2017; vol. 32 (no. 1); p. 36-38
Author(s): AlAzzam, Manar; Suliman, Mohammad; AlBashtawy, Mohammed

Abstract: Attention-deficit/hyperactivity disorder (ADHD) is a multifaceted disease characterized by core symptoms of hyperactivity, inattention, and impulsivity, affecting children across every socioeconomic and ethnic group. An estimated 40% to 60% of children with ADHD have comorbidities such as anxiety, depression, and learning disabilities. School nurses must be an integral part of the process of increasing awareness about ADHD through improving the service delivery model for affected children and their families. There is a solid foundation of research on which they can build to improve the benefits through study, workshops, community programs, and national screening programs.

Sources Used:
The following databases are used in the creation of this bulletin: BNI, CINAHL & PsycINFO.

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