# Learning Disability Annual Health Check Decision to Decline Tool

# Patient Name

|  |  |
| --- | --- |
| NHS number |  |
| Date of birth |  |
| Who was involved in this decision [names / role or Relationship to the person] |  |

To be completed by GP practice: contact patient to ….

**Ascertain reason for declining and their understanding.** If someone is declining an Annual Health Check the health professional / AHC booking person OR the family / people who support the person should ask these questions to help establish the person’s understanding of WHAT and WHY Annual Health Checks happens and what the RISKS are of declining.

In this contact:

1. Ask the person if there are certain parts of the annual health check that make them feel anxious or are they struggling with the place it is done and need some changes? Having SOME of the annual health check is better than missing it all.

Provide details

\*\* If after using the persons preferred method of communication you have been unsuccessful, please refer to hard to reach nurses for further support. see bottom of form \*\*

2. Check that they could understand and retain the following information:

* Some illnesses are hidden so the annual health check helps us make sure that nothing is missed, and you are healthy?

Yes  No

* If you have something wrong that is not treated it can get worse and then it can be too late to treat.

Yes  No

* People with a learning disability are not always able to tell if something has changed and let someone know. So, this can mean they have things wrong that are not treated.

Yes  No

* People with a learning disability often die younger than everyone else because illnesses are not found early enough. The annual health check will help to find things early so this helps to lowers the chance of this happening to you.

Yes  No

GP practice to document:

The methods used to communicate and who they spoke with. Detail what the person said or did to demonstrate their level of understanding of the above. Any additional information received from the people who support them.

|  |
| --- |
|  |

To be completed by GP practice **Remember: This decision must be the patient’s decision and not the decision of people who support them** - if there are queries relating to who has made this decision and the patients understanding then please refer to Hard to reach Nurse. see bottom of form

From this information did the person have **Capacity to decline** **the annual health check** and understand the reasons their GP practice think they should attend

Yes  No

**IF YES, they do have capacity to Decline**

**Are there any reasonable adjustments or additional support we can give to help build better acceptance of health support from the GP practice?** if additional support is required Refer to hard to reach Nurse– see bottom of form

**If NO, they do NOT have Capacity to understand the reasons for an annual Health check and risks if they do not attend**

Then make a best interest decision through discussion with people who know the person well. if further support is required Please refer to LD hard to reach Nurse– see bottom of form

Consider:-

* How much of the annual health check can be done via discussion and support with people that do know them well and they trust.
* Has the health check preparation form been completed to identify areas of health and create an action plan for overcoming barriers for the coming year?
* Are there any reasonable adjustments or additional support that can be given to help them build better acceptance of health support from the GP practice?

Is it in their Best Interest to have an Annual Health Check YES □ NO □

Detail the reason for the decision and any Reasonable adjustments they need if proceeding

If further support is required to overcome barriers contact [healthequalitynursing@hertfordshire.gov.uk](mailto:healthequalitynursing@hertfordshire.gov.uk)

Information required for this referral to Hard to reach LD nurse:

* copy of this document,
* home address,
* known risks,
* support in place,