





# **PURPLE STAR ACCREDITATION**

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## The Purple Star Strategy



The Purple Star brand was developed in 2014 by the Hertfordshire Community Learning Disability Services through the Health Liaison Team [Herts County Council] in partnership with service users, carers and the University of Hertfordshire Business School.

The Purple Star is a Trademark which is accredited to GP health services who demonstrate the delivery of high quality, reasonably adjusted services to adults with learning disabilities across Hertfordshire, in line with the requirements of the Equality Act 2010.

Like a "kite mark" the presence of a Purple Star at a GP Surgery indicates that a defined set of standards, as set out in the Purple Star Promise, have been achieved and are being maintained.







## The Purple Star Process

#### 1. Application

Once a GP practice has implemented a good annual health check process by working alongside our health equality nurse (HEN), then our HEN will share all the good practice information with the Purple Star nurse who will then be in touch to help gather information and offer support, for the final elements of the 15 Criteria (please see page – 15 criteria)

To help speed up your accreditation, in the meantime, the service should:

**A. Identify learning disability champions** within their service; their role is to take the lead for the service in:

- ensuring compliance with the strategy standards
- supporting the staff team in the collection of the evidence
- overseeing staff training needs and liaising with their link nurse
- Promoting constant service development and improvements in line with changing legislation and good practice.
- **B. Start considering what reasonable adjustments** they already offer to adults with a learning disability and what areas they could improve on. Try and jot the good examples to share with the Purple Star Team.
- **C.** Identify individual carer's of and patients / service users with a learning disability who may be able to provide feedback and also support them in identifying ways they could improve their service delivery
- D. Gather as much feedback as possible from care providers, carers, family members of and patients with a learning disability, using the feedback online smart survey and/or printable version.
- **E. Have a look at the 15 criteria (**below) and start keeping a record of any of the criteria you are currently achieving.
- **F**. Have a look at and start working as individuals or as a Team through the **Purple Star Training Handbook** and Videos available at <a href="https://www.hertfordshire.gov.uk/PSS">www.hertfordshire.gov.uk/PSS</a>

REMEMBER: This is a WHOLE SERVICE award. Please include your full staff team in all you do







## 2. First Meeting

Once the Purple Star Strategy team have capacity to start working with the service, they will arrange to meet with the Learning Disability Champions and any other key staff members.

If the service wishes to progress, they will be asked to sign the agreement (*please see application form at bottom of document*)

## 3. Creating Evidence of the 15 Criteria

The Purple Star Strategy team and the community learning disability link nurses will work with the services Learning Disability Champions and other key staff members to establish what the service is already offering, in line with the promise criteria, and what additional things they need to achieve.

During this stage the community learning disability services 'expert by experience' will also visit the service to scope and they will also make a secret scope telephone call. This is purely to be able to experience the service first-hand and give advice on service improvement from the perspective of someone with a learning disability.

The surgery should also start sharing with the Purple Star Team any good practice examples and reasonable adjustments that they have made for specific individuals.

#### 4. Training

Training sessions will need to be organised to ensure an absolute minimum of 50% of each discipline of the staff team have received the purple star strategy learning disability awareness training. We can design and deliver this in whatever way works best for your practice. The 3 areas that need to be covered are:-

- Admin staff training on LD awareness and the impact they can have on delaying or enabling access to healthcare
- 2. **Clinician training** on LD awareness and using mental capacity and best interest decision to avoid delays in investigations, how to make reasonable adjustments and effective communication.
- 3. Annual Health Check Training for all involved in the collaborative AHC process

The purple star handbook has been designed to be a workbook and includes various links and videos to aid training. This can be used as part of your initial induction to new staff or as refresher training, however, it is not intended to replace learning disability awareness training sessions and the learning disability champion will need to liaise with the purple star strategy team for further training sessions due to staff turnover or if they consider refresher training is required.







# 5. Assessing Accreditation standard

Once the standard for accreditation has been achieved and evidenced in **The Accreditation Report** we will take the evidence to the purple star strategy steering committee for approval for accreditation.

**The steering committee** is a group who provide strategic governance for the implementation of the purple star strategy. It comprises:

- Experts by Experience
- Carers / support representatives
- Advocacy service representatives
- Social Work Representatives
- Strategic Lead Nurse
- Strategic Liaison Nurse
- Independent health care service representatives
- Community learning disability nurses

Once the surgery has been approved by the steering committee, then the practice can plan how they would like to receive their accreditation. The surgery can make this as big or small as they like. The mayor and local press can be invited to celebrate with a big bang, or we can deliver the award certificate and star in person or via email.

#### 6. Following Accreditation

The service MUST maintain the standard and continue to meet the 15 criteria

All surgeries are supported and liaised with throughout the 3-year accreditation period re:

- > Following up with you on any actions the steering committee identified for your practice
- Engagement with Health Equality Nurses (HENS)
- Feedback from Community Learning Disability Nurses (CLDN)
- > Any feedback received from carers or patients
- > Annual health check uptake
- Responsiveness to purple star contact relating to any Learning Disability updates

We will work with you on these areas and if there are any concerns these are fed back to steering.







#### At 18 months post accreditation we will :-

- Contact to arrange for our experts by experience to meet with your champions to reflect on how your support for patients with a learning disability is going
- > We will review your report and liaise with you on any actions that may be outstanding

This will be fed back to steering to vote on whether additional actions are required between this point and reaccreditation

#### 3-year Re-accreditation we will work with you. This will entail:-

- Creating a new report of new evidence of compliance with the 15 criteria across the 3 years
- Ensuring the surgery team is compliant with LD training
- > A further secret scoping from the experts by experience

This will be fed back to steering for a vote on reaccreditation

#### Management of non-compliance

 If there are any significant incidents / safeguarding concerns/noncompliance with purple star indicating that an accredited service does not offer a service of excellence, then the Steering committee may suspend or even withdraw the purple star. This process will be transparent and collaborative and will always aim to support the service to achieve the accreditation standard







## EG - GP Example:

Instead of 'saw in car'

We would like-

Person came in anxious and with behaviours indicating they had abdominal pain, they were not going to accept any physical examination. The carer said they had been calm in the minibus with their headphones on, so they returned them to the mini-bus, and they calmed. The GP was then able to do enough of a physical examination to diagnose potential constipation. Without moving them to an environment they were calm in, this diagnosis would have been delayed.

## The 15 Criteria for Purple Star Accreditation for Hertfordshire GP Practices

#### Criteria

## 1. Learning Disability Register

- How many patients do you have on your learning disability register aged 14 and over
- How many patients do you have on your LD register aged under 14
- What is the surgery's full patient numbers [this is so we can work out what percent of your full patient list are flagged as having a learning disability? [data suggests that approx. 0.5% of full patient list should be flagged as LD]
- How many on your LD registered are non white British does this number reflect your full patient demographic or is their likely to be more people unidentified?
- Promote 'preparing for a healthy adulthood' to anyone on the register under the age
  of 18. By sending the standard text we can provide.

#### 2. Learning Disability Champions

- Identify your Learning Disability Champions and what their roles are
- Does someone have knowledge of all the people on your LD register and is this
  recorded somewhere so this info isn't lost if they were off or left the service.
- Do they link with the Carers Champion for people with an LD who live with families
- Does the Champion have a LD discussion slot at the team meeting to gather examples of good practice and hear of issues in practice that may be worth reporting back to PSS to help overcome?







 When you interview new staff do you have any questions re Communication and reasonable adjustments for people with LD and other diverse needs

## 3. Reasonable Adjustments / TEACH

- Do all your staff know about the legal requirement for reasonable adjustments (and have evidence of examples)
- Do you have each patient with an LD's known reasonable adjustments flagged? Do these include adjustments the admin team will need to make as they are the gateway to accessing your service?
- We use the acronym **TEACH** to help embed this in everyone's everyday practice.

TIME, ENVIRONMENT, ATTITUDE, COMMUNICATION and HELP – These Videos form part of the Handbook and should be a bare minimum for all staff <a href="Purple-Principle-Wideos">Principle & Pledges videos for Health Professionals in making reasonable</a> adjustments for people with Learning Disabilities and Autistic people - YouTube

#### 4. Purple Folder

- Promote the New 2023 Purple Folder to everyone on the LD register over 18 and contact us at <a href="mailto:purplefolder@hertfordshire.gov.uk">purplefolder@hertfordshire.gov.uk</a> to get a replacement.
- Send out a text to 18yrs+ with the following: 'Forename, Do you have the New 2023
  Purple Folder? Contact <u>purplefolder@hertfordshire.gov.uk</u> to get one or use this link:
  www.hertfordshire.gov.uk/purplefolder
- Purple Folders have had considerable changes so would be advisable for all staff to watch the 15 min training video
   Purple Folder 2023 Guide for GP's
- Do Clinicians USE the Purple Folder
- Do you promote the **Purple Cards** that are available for people who are more independent?

#### 5. Accessible Environment

- Do you have quiet waiting areas for people who are anxious in busy, noisy places?
   Or a place they can wait outside maybe?
- Do you have reception staff who can be supportive and solution finding if someone arrives anxious?
- Do you adjust your triage and appointment request process for people who are unable to represent their health needs through your standard systems. [eg eConsult]







- Do you have a display board with information for people with an LD and the people who support them [We can email a pack of material you can use]
- Does your website have an easily accessible area for LD patients [We have guidelines on info to consider adding to the website]

## 6. Annual Health Checks (AHC)

- How many of your Learning Disability patients aged 14 and over received the full annual health check in the previous year 1<sup>st</sup> April – 31<sup>st</sup> March?
- How many have you done so far this year?
- What is your process for Annual Health Checks to ensure they are as thorough as possible and reduce the risk of delays in diagnosis.
- And can you evidence how you tried to engage the non- attenders / hard to reach people [we have Hard to Reach nurse to help engage people where all other attempts failed]
- People who decline an AHC need to have MCA consideration logged (we have decliners forms to help with this)
- The target is 90%, with 100% of these receiving a health action plan (HAP) at the end. [we have Created a top tips guide and Stay Healthy at Home checklist to help improve quality of Health Action Plans and share responsibility for health with carers]
- Do you add Stay Healthy at Home Checklist actions to everyone's AHC action plan?
- Do you use the new annual health check prep tool?
- Have all staff involved in AHC process had the support / training from us and watched the AHC training video?
- Do you Send Out Links to Feedback after each AHC?

#### 7. Vaccines

- Flu Vaccine How many people aged 14 plus on your LD register had Flu vaccine in last flu season?
- Do you offer Nasal Vaccine for those who cannot tolerate the injection?
- Can you evidence how you tried to engage with non-responders / attenders and use of LD nursing for support where all attempts from the practice failed.







- Pneumococcal have you checked all eligible LD patients have received this?
   [considering respiratory related conditions are the cause of nearly 50% of deaths in people with an LD consider all risk factors]
- **HPV vaccine** have you checked if they received this in school or offered before the age of 25 if they didn't get it at school? [remember a lot of people with LD will not tolerate cervical screening so HPV vaccine is important]

# 8. Accessible Information Standard/Reasonable Adjustment Digital Flag

- Do you flag the preferred methods of communication for all your learning disability patients?
- Is this shared when referring on to other services or health professionals?
- If not, what steps can you take to gather this info [we have an easy-read form for patients to complete] This should include how the person can communicate with the surgery if they need an appointment if they don't have someone to support them?
- Have you added a pop-up for each person on the Learning Disability register
- Are you aware of the digital flag and Have you met the phases of implementation for the digital flag NHS England » The Reasonable Adjustment Digital Flag action checklist: what you need to do to achieve compliance

#### 9. Safeguarding

- Do all staff understand their role in identifying possible indicators that someone with a learning disability may be at risk? and know who to report even low-level concerns to?
   Report a concern
- Do you have any examples of where you have raised concerns relating to someone's wellbeing. [We have a crib sheet on how to word safeguarding referrals]

## 10. Mental Capacity

- Do all staff know how to 'weigh up' a person's capacity to consent and the importance of evidencing clinical best interest decisions to NOT carry out investigations/ physical examinations/ screening etc in everyday consultations? This is a critical part of reducing delays in diagnosis.
- Do you have examples of where a patient refused a treatment / intervention and MCA and Best Interest were considered
- People who decline an AHC need to have MCA consideration logged (we have decliners forms to help with this)







#### 11. LeDeR and DNA CPR's/ ReSPECT

- Do all staff know about the need to report all deaths of people on the LD patient list to the LeDeR mortality review programme?
   LeDeR is the National mortality review of all deaths in people with learning disabilities from the age of 4 up. Here is the National flyer (PDF 194KB) with details of how to report a death in your patient group and information on how Herts are meeting the LeDeR requirements
- Have you had any LeDeR cases?
- Have you checked your DNA CPR's / ReSPECT Documents to be certain that the
  reason for it clearly identifies why CPR would be medically futile and does not site
  their learning disability as a reason? Has the MCA [and Best interest if applicable]
  been properly completed? [We can support with checking these and info on how to
  complete well is at <a href="https://www.hertfordshire.gov.uk/LDhealthprofDNACPR">www.hertfordshire.gov.uk/LDhealthprofDNACPR</a>

## 12. Health Equalities Targets

- **STOMP** have you engaged with the STOMP Health equalities Nurse? The Stopping of the Over medicating of psychotropic medications in people with Learning Disabilities is a National programme. This involves carrying out a patient search. We can then help by working with the person to fully risk assess any reduction possibilities, overcome barriers or concerns about reducing and create a plan and monitor.
- Have you engaged with the Cancer screening Health Equalities Nurse? What is
  your cancer screening uptake for your LD Patients? The cancer screening nurse can
  help by assessing capacity and overcoming barriers This involves you completing
  a patient search.
- Hard to Reach patients engagement with Hard-to-Reach Hen for Annual Health Checks
- Have you run a search of all people with **Downs Syndrome** aged 28 and over and engaged with CLDNs re a baseline dementia assessment referral
- Have you Refer people in need of blood tests, who haven't been able to have despite Reasonable adjustments, to LD nursing for blood test pathway support using MCA form

#### 13. Training

- Have staff received training on meeting the health needs of people with Learning Disabilities?
- The Purple Star Team can provide this in whatever way works best for your practice







- We can do short sessions in 3 parts:
- For admin team on LD awareness and the impact they can have on delaying or enabling access to healthcare
- For Clinicians on reasonable adjustments and making least restrictive best interest decisions and adapting practice
- For all involved with Annual Health Checks.

To be Purple Starred a minimum of 50% of each sector of your staff team will need to have been involved in the training and after that the LD Champion can use the Training Handbook and video clip links as part of induction for new starters.

Use the **training Handbook** <u>Purple-star-handbook-V6-June-2024</u> and view <u>the training</u> <u>videos</u> as part of induction and staff development

#### 14. Community Learning Disability Nurse

- Do you utilise your Community Learning Disability Nurses?
- Are referrals made to the Community Learning Disability Nursing Service?
- Is there a designated phone line or email address for health professionals to use when wanting to discuss a patient, to avoid delays?

#### 15. Evidence of good practice via patient and carer feedback

- Do you gather feedback from your patients with learning disabilities and their carers about the quality of care they receive? <u>Feedback form</u>
- We need this feedback to provide evidence of your excellent work.
- Can you give us the names of any care homes / supported living / residential homes that have LD patients registered with you for us to seek feedback
- Do you have an active PPG and does it have Carer and LD patient representation?







# **Purple Star Strategy**

# **Application Form**

Name and address of Surgery	
Date of Application	
Name of 3 key contacts:  (and their role, for example: care co-	
ordinator, GP, admin)	
Email addresses of key contacts:	
Direct dial number for health	
professionals	
Surgery number  Details of Practice Manager	
Number of people on your	
learning disability register	
aged 14 and over Number under 14 on LD	
register	
Number of people on your full	
register [so we can establish percentage of LD patients]	
In signing up to the purple star strategy process, we are agreeing to	
the following:	
1. Purple star team will keep a	
record of evidence and this will be shared at the Steering	
committee meeting 2. The same evidence will be	
shared wider through carers	
in herts and other organisations for feedback	
but will be anonymised	







- 3. Our experts by experience will carry out a secret scoping call to the surgery to gage how welcoming and accessible they find the practice
- 4. Following the secret scoping call we will request that you listen to the recording to reflect on it and also send us a copy of the recording. This will be listened to by the purple star team and experts by experience only
- 5. Our experts by experience will visit the practice by arrangement
- 6. We will contact care providers that use your surgery for feedback

Sign:			
Date:			

Return form to: <u>purplestarstrategy@hertfordshire.gov.uk</u>

or by post to: Farnham House, FAR015, Six Hills Way, Stevenage, Hertfordshire, SG1 2FQ