

Talking Therapies for people with a Learning Disability

7 Minute Briefing

What is the issue?

The Learning from Lives and Deaths: People with a Learning Disability and Autistic People (LeDeR) Programme in Norfolk and Waveney has seen in reviews, that nearly all common mental health problems for people with a learning disability are managed using psychotropic medications as a first line treatment. We do not see evidence of Talking Therapies being referred to or even considered for this vulnerable group. Both improving access to psychological therapies and reducing the inappropriate prescribing of psychotropic medications were identified as priorities in the NHS Long Term Plan.

Why is this important?

Mental health conditions were the second most common group of co-morbidities in our most recent annual LeDeR report, with anxiety and depression alone being noted in 30% of the reviews completed. Psychotropic medications for managing depression and anxiety have side effects, including difficulties managing a healthy weight, gastrointestinal problems and sleep issues amongst others. This then impacts comorbidities which we already frequently see in LeDeR reviews for people with a learning disability. As such all our work should be adhering to STOMP (Stopping Over Medication of People with a learning disability and autistic people) and STAMP (Supporting Treatment and Appropriate Medication in Paediatrics) principles.

What do you need to know?

Services previously known as Improving Access to Psychological Therapies (IAPT), has been rebranded as Talking Therapies. These services can provide treatment for people with the following common mental health problems:

- Agoraphobia
- Body Dysmorphic Disorder (BDD)
- Depression
- Obsessive-Compulsive Disorder (OCD)
- Generalised Anxiety Disorder
- Health Anxiety (hypochondriasis)
- Mixed Depression and Anxiety
- Panic Disorder
- Post-Traumatic Stress Disorder (PTSD)
- Social Anxiety Disorder
- Specific phobias

People experiencing anxiety and depression should be offered psychological therapies as a first choice of intervention for treatment and management. According to National Institute for Health and Care Excellence (NICE) guidelines, this includes for people with mild learning disabilities and acquired cognitive impairments. There are NICE guidelines for the assessment and management of mental health problems in people with learning disabilities (NICE, 2016).

Making services more accessible and providing reasonable adjustments to the way we provide healthcare is a legal requirement under the Equality Act 2010. NHS England released a new Information Standard in 2023, called the Reasonable Adjustment Digital Flag. The flag indicates that Reasonable Adjustments are required for an individual and optionally includes details of their significant impairments, underlying conditions and key adjustments that should be considered.

What can you do about it?

1. Make sure mental health is reviewed in a meaningful way as part of the Learning Disability Annual Health Check. If indicated, consider a referral to Talking Therapies.
2. NHS Talking Therapies offers structured CBT or counselling-based treatment interventions, which are aimed at reducing the symptoms of anxiety and/or depression. It is important before referring, that you consider whether the individual can recognise that there is a problem and that they can make changes with support, as these are essential components in getting benefit from Talking Therapies.
3. Early signs of a mental health problem may start with a change in presentation or behaviour. Once physical causes for any change in presentation have been ruled out and concerns around mental health remain, then consider referrals to Talking Therapies for those with a mild learning disability and Specialist Community Learning Disability Teams for individually tailored mental health support for those people with Learning Disability who have more severe cognitive impairment and where more than 'Reasonable Adjustments' are required.
4. Ensure all support staff have up to date mental health awareness training, which accounts for differences in presentation which may be seen in people with a learning disability.
5. Establish clear pathways for referrals to services for those who could benefit from Talking Therapies. If you have any indications a person may be experiencing changes in their mental health, then speak to the person's GP as a first port of call.

6. The difference between therapy succeeding or failing might be them successfully engaging in work between sessions and involving support networks is a standard of care. Carers should work collaboratively with mental health services to ensure they support people to complete informal work if appropriate. This may also require training and support in communication.
7. Talking Therapies may need someone to attend appointments, and engagement needs to be consistent for talking therapies need to be most effective, as such staff need to prioritise support for people to get to appointments.

What happens if we do nothing?

- Continued inequity in access to appropriate mental health treatment for people with learning disabilities.
- Increased incidences of undiagnosed and/or unmanaged mental health issues, which may impact on any comorbidities.
- Over reliance on psychotropic medications to manage the symptoms of common mental health conditions. This is a problem as these medications have their own side effects.
- Overuse of medications to manage behaviours that carers or professionals interpret as challenging, which may be a symptom of poorly managed mental health.

Team Information

[Norfolk and Waveney Talking Therapies Website.](#)

[Norfolk and Waveney Community Learning Disability Teams](#)

Further Reading

[NHS Talking Therapies for anxiety and depression Manual.](#)

[NICE guidelines: Mental health problems in people with learning disabilities: prevention, assessment and management](#)

[Foundation for People with Learning Disabilities.](#)

[Mencap.](#)

[Norfolk and Waveney Annual LeDeR Reports.](#)

[STOMP/STAMP Resources.](#)

[Communication Access UK.](#)