50 Correspondence

# Special medical and nursing care needs of people with severe learning difficulties

#### DEAR SIRS

The large traditional hospitals for mental handicap usually incorporated an infirmary ward for seriously sick and terminally ill patients. Latterly, the 'demedicalisation' of mental handicap and 'normalisation' philosophies prompted nursing and hospital managers to abandon such provision in the belief that mentally handicapped people should be nursed in the immediate surroundings where they lived and that if they needed more intensive care they should go to general hospitals. In practice, general hospitals are unable or unwilling to give long-term nursing care to people with severe learning difficulties beyond the investigation, assessment, diagnosis and treatment of their illnesses.

In Leeds, population just over 700,000, with an estimated circa 2,500 severely mentally handicapped persons, a number of people with severe learning difficulty continue to present a need for intensive nursing care over varying periods in addition to psychiatric problems associated with their handicaps. In the interim the mental handicap hospital still existing is receiving these patients. There are at least four categories of referrals.

Rehabilitation. People with learning difficulty living in community residences can sustain serious fractures of limbs and need care and active rehabilitation over weeks or months. In some instances they fail to make progress under 'normal' conditions in busy general hospital departments, but they respond to the attention of trained staff in the mental handicap hospital and are able to return to life in the community.

Therapy for particular problems. One patient required care over many months for a large pressure sore which had arisen in a community house. Another patient, with Down's syndrome had a rare skin disorder, Grover's disease, and required long term nursing care. A general hospital could not offer continuing care and nursing homes could be reluctant to accept demanding long-stay cases, or charge higher costs.

Care of patients discharged from general hospitals. People with learning difficulties who have medical and surgical disorders treated in general hospitals are today discharged as soon as possible. Such early discharge is facilitated by transfer to a unit for mentally handicapped people for nursing and medical supervision until they are fit enough to go to their usual or an alternative residence.

Terminal care cases. There are people with learning difficulties who reach terminal states which need continuing nursing care with special attention to feeding, general heath, care of bladder, bowels, skin,

anticipation and control of infection, and prevention of pressure sores. Some patients have cancer and need control of pain.

### A team approach

In the NHS unit a team approach brings the knowledge and skills of various professionals to bear on the management of the patients described above.

- (a) Medical cover from consultant psychiatrist and medical practitioner.
- (b) Nursing care involving staff with knowledge and experience or nursing techniques and skills, e.g. catheterisation, and who are also familiar with handling mentally handicapped patients.
- (c) Physiotherapy and advice on chairs and mobility aids.
- (d) Nutrition, feeding and supplements advice from dietician.
- (e) Medication and dressings advice from Environmental Health.
- (f) Control of infection advice from Environmental Health, Infectious Diseases and Control of Infection Services.
- (g) Support from visitors, League of Friends, hospital chaplains.

#### Special equipment

This can be essential in the care of some patients. Alternating pressure air mattresses, APAMs, have proved invaluable.

## Case load

A continuing trickle of patients falling into the categories above comes to the service for care and help. Conditions can arise suddenly, for instance, strokes and accidents, or more insidiously, for example, physical and mental deterioration, progressive immobility, heart and lung diseases, dementia, and cancer.

#### Conclusion

In the planning of services for people with learning difficulties the need for special provision for those with challenging behaviour and psychiatric disorders is now being recognised. The needs of the patients described here are at risk of being overlooked. A local NHS staffed facility can bring together the expertise necessary and care as economically as any for these patients, to achieve rehabilitation if possible and to relieve suffering, pain and distress in others.

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