

MHLD CONSENSUS QUESTIONNAIRE

Name:	Date:
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Adaptations to pharmacological interventions for people with an LD and mental health problems

The following statements concern suggested adaptations to pharmacological interventions to treat mental health difficulties in people with a learning disability.

Recommendations about adaptations to pharmacological interventions will be informed from the nominal group statements in which there is at least 80% agreement. These 'adaptation' recommendations will follow initial recommendations about which pharmacological interventions should be considered in those with an LD and a mental health problem which will be based on the evidence presented to the committee (draft recommendations have been discussed with the group).

For each of the statements please indicate your agreement as to their appropriateness and utility by circling one number in each row. The scale works as follows:

Number 1: Strongly disagree with this adaptation.

Number 5: Neither agree nor disagree.

Number 9: Strongly agree that this is a useful and appropriate adaptation.

There is also room to provide comments, if you wish.

Treatment and Management									
Statements concerning adaptations to pharmacological interventions to treat and manage mental health problems in people with learning disabilities.	Scale								
	Strongly disagree						Strongly agree		
1. Only learning disabilities specialists should start drug treatment for a mental health problem in people with a learning disability.	1	2	3	4	5	6	7	8	9
Comments:									
2. Before prescribing a drug to treat a mental health problem in people with a learning disability, there needs to be careful consideration of a number of things when obtaining consent including the mode of communication.	1	2	3	4	5	6	7	8	9
Comments:									
3. Before prescribing a drug to treat a mental health problem in people with a learning disability, there needs to be careful consideration of a number of things when obtaining consent including the environment where the information is provided.	1	2	3	4	5	6	7	8	9
Comments:									
4. Before prescribing a drug to treat a mental health problem in people with a learning disability, there needs to be careful consideration of a number of things when obtaining consent including the person's familiarity with whoever provides the information.	1	2	3	4	5	6	7	8	9
Comments:									
5. Before prescribing a drug to treat a mental health problem in people with a learning disability, there needs to be careful consideration of a number of things when obtaining consent including the pace the information is provided.	1	2	3	4	5	6	7	8	9
Comments:									
6. Before prescribing a drug to treat a mental health problem in people with a learning disability, there needs to be careful consideration of a number of things when obtaining consent including the person's capacity to consent.	1	2	3	4	5	6	7	8	9

Mental health problems in people with learning disabilities

Appendix T: Nominal group technique questionnaires

Comments:										
7. The potential for people with a learning disability and a mental health problem to react to psychotropic medication atypically should be taken into account.	1	2	3	4	5	6	7	8	9	
Comments:										
8. Additional risk factors due to underlying syndromes (such as cardiovascular risk factors, difficulties with weight management, increased susceptibility to metabolic syndromes) should be borne in mind before prescribing a drug to treat a mental health problem in people with a learning disability.	1	2	3	4	5	6	7	8	9	
Comments:										
9. Before prescribing a drug to treat a mental health problem in people with a learning disability, the difficulty of taking blood samples from some people with a learning disability should be borne in mind.	1	2	3	4	5	6	7	8	9	
Comments:										
10. Before prescribing a drug to treat a mental health problem in people with a learning disability, likely compliance issues, should be borne in mind.	1	2	3	4	5	6	7	8	9	
Comments:										
11. It may be helpful to support and monitor people with mild learning disabilities who are taking medication for mental health problems to improve compliance with drug regimens (such as through blood testing).	1	2	3	4	5	6	7	8	9	
Comments:										
12. The potential difficulties for people with a learning disability and a mental health problem in tolerating or communicating any side effects should be borne in mind.	1	2	3	4	5	6	7	8	9	
Comments:										
13. When prescribing a drug to treat a mental health problem in people with a learning disability, polypharmacy should be avoided.	1	2	3	4	5	6	7	8	9	
Comments:										
14. To avoid polypharmacy, regular comprehensive medication review is necessary.	1	2	3	4	5	6	7	8	9	

Comments:										
15. When prescribing a drug to treat a mental health problem in people with a learning disability, any drugs that the person is taking for other conditions (such as epilepsy) should be taken into consideration.	1	2	3	4	5	6	7	8	9	
Comments:										
16. Cardiovascular investigations should be undertaken before prescribing a drug to treat a mental health problem because of an increased risk of stroke in some people with a learning disability.	1	2	3	4	5	6	7	8	9	
Comments:										
17. 'Easy read' written or pictorial instructions can be helpful to increase compliance with drug treatment in people with a learning disability.	1	2	3	4	5	6	7	8	9	
Comments:										
18. When prescribing a drug to treat a mental health problem in people with a learning disability, prescribing clinicians should start with a low dose.	1	2	3	4	5	6	7	8	9	
Comments:										
19. When determining the initial dose, prescribing clinicians should balance the need to ensure a low dose to monitor for side effects while avoiding sub-therapeutic doses that may not treat the mental health problem effectively.	1	2	3	4	5	6	7	8	9	
Comments:										
20. If the person with a learning disability is physically healthy, the mean therapeutic dose recommended for use in the non-learning disability population may be appropriate.	1	2	3	4	5	6	7	8	9	
Comments:										
21. The dose of a drug to treat a mental health problem in people with a learning disability should be increased very gradually.	1	2	3	4	5	6	7	8	9	
Comments:										
22. Particular care needs to be taken when discontinuing a drug in people with a learning disability because symptoms may be exacerbated such as with selective serotonin reuptake inhibitors (SSRIs) for anxiety.	1	2	3	4	5	6	7	8	9	

Comments:										
23. Particular vigilance for side effects should be exercised when starting or changing a drug to treat a mental health problem in a person with a learning disability.	1	2	3	4	5	6	7	8	9	
Comments:										
24. Before prescribing a drug to treat a mental health problem in people with a learning disability, clinicians should ensure that they liaise with any other involved specialists (such as neurologists for epilepsy care) to discuss existing drug regimens and possible interactions.	1	2	3	4	5	6	7	8	9	
Comments:										
25. Prescribing clinicians should liaise with other involved specialists (such as neurologists for epilepsy care) regarding the person's drug regimen.	1	2	3	4	5	6	7	8	9	
Comments:										
26. A drug used to treat a mental health problem in people with a learning disability should be reviewed for effectiveness and side effects after 3 to 4 weeks.	1	2	3	4	5	6	7	8	9	
Comments:										
27. A drug used to treat a mental health problem in people with a learning disability should be reviewed for effectiveness and side effects after 6 weeks.	1	2	3	4	5	6	7	8	9	
Comments:										
28. Use of in people with a learning disability and a mental health problem should ideally not be used in the long-term.	1	2	3	4	5	6	7	8	9	
Comments:										
29. Psychotropic medication for behavioural and cognitive symptoms in dementia should only be considered if other approaches have been ineffective and risk from symptoms is high.	1	2	3	4	5	6	7	8	9	
Comments:										
30. Drug treatment for a mental health problem in people with a learning disability should be reviewed by learning disabilities specialists, unless there are locally agreed protocols for shared care.	1	2	3	4	5	6	7	8	9	

Comments:

CONFIDENTIAL