

Making changes to our services to make it easier for you



We know that some people with learning disabilities and autism can find it hard to use health services



The law says that all health services need to make changes so that everyone can use the services.



We can make changes to our health services so they are easier for you to use.



The Law calls these changes Reasonable Adjustments.

A reasonable adjustment is just a small change that makes things easier. Things like extra time with your doctor, giving you easy read information or more support to understand.



We need you to tell us what changes we can make to make it easier for you to use our services.



When we record what support you need, we can also record and say why you need these changes.



You might have a Learning Disability, Autism, Epilepsy or another physical disability.

We do not have to record this we can still add the flag without this information.

Would you like your disability also added to the flag?

☐

YES

☐

NO

If the person completing this form lacks capacity to choose either of the above boxes, please discuss with someone who knows them to decide what is in their best interest.

This has been discussed with

and it is:

☐

In their best interest

☐

Not in their best interest



We will then put a note on your health record saying what changes you need.

We call this note a reasonable adjustments flag.



This flag will tell all NHS staff, like your doctor's surgery and the hospital, what changes you need.



We need you to say if you want to have this flag on your health record. By choosing yes you are giving us your agreement to put the flag on your record.

Please tick one box below...

☐

YES I want you to add the flag to my records

☐

NO I do not want you to add a flag to my records

If the person completing this form lacks capacity to choose either of the above boxes, please discuss with someone who knows them to decide what is in their best interest.

This has been discussed with _____ and it is:

☐

In their best interest

☐

Not in their best interest

If you DO NOT want a reasonable adjustments flag added to your records you do not need to complete the rest of this form.

Thank you.



Reasonable adjustments and changes

Put a tick in the box of the changes you need to make it easier to use our services. We will do what we can to support these requests, but we cannot promise that we can support every request.



1. I need a longer appointment time.

☐ Please tick the box if you need this.



2. I need my appointment at a quieter time of the day.

☐ Please tick the box if you need this.



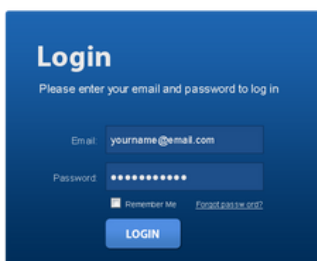
3. I need a quieter place to wait.

☐ Please tick the box if you need this.



4. I find waiting difficult and need to be seen quickly.

☐ Please tick the box if you need this.



5. I need help to check in for my appointment.

☐ Please tick the box if you need this.



6. I need help like a ramp and wide doors to get into buildings.

☐

Please tick the box if you need this.



7. I need my appointment downstairs on the ground floor.

☐

Please tick the box if you need this.



8. I will need a hoist for any physical examinations.

☐

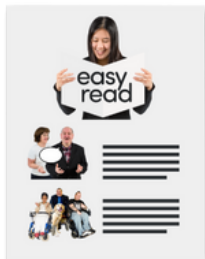
Please tick the box if you need this.



9. I need a home visit

☐

Please tick the box if you need this.



10. I need information written in easy read.

☐

Please tick the box if you need this.



11. I need information written in large print

☐

Please tick the box if you need this.



12. I need information written in a different language which is

☐

Please tick the box if you need this.



13. I need a phone call to remind me about my appointment.

☐

Please tick the box if you need this.



14. I need a text message to remind me about my appointment

☐

Please tick the box if you need this.



15. I need a carer or family member to support me.

☐

Please tick the box if you need this.



16. I prefer to see a male member of staff if possible.

☐

Please tick the box if you need this.



17. I prefer to see a female member of staff if possible.

☐

Please tick the box if you need this.



18. Before my treatment I would like to be shown any equipment that you may use

☐

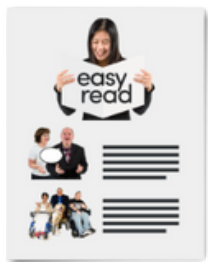
Please tick the box if you need this.



19. I need time to ask questions

☐

Please tick the box if you need this.



20. I need a summary of my appointment written in a way that I can understand.

☐

Please tick the box if you need this.

Please tell us about any other changes you might need





Your name is





Your birthday is



Your address is



Thank you for filling out this form.



Please now take this back to your GP surgery to be added to your notes.

We will do our best to make these changes for you.

For office use only- Not to be filled out by patient

Reasonable Adjustment	RA Flag Category	SNOMED Code
1. Longer appointment time	Individual care requirement	1108171000000102
2. Appointment at a quieter time	Individual care requirement	1325351000000103 (first appointment) 1325361000000100 (last appointment)
3. Quiet place to wait	Adjustments in relation to the environment of care	1325391000000106
4. Finds waiting difficult	Individual Care Requirements	1325841000000109
5. Needs help to use checking in machine	Bespoke reasonable adjustments	1108111000000107 and then add <u>freetext</u> <u>r.e. checking in</u>
6. Wheelchair User, requires ramp access and wide doors	Adjustments in relation to the environment of care	1108191000000103
7. Need appointment on ground floor of building	Bespoke reasonable adjustments	1108111000000107 and then add <u>freetext</u> <u>r.e. ground floor</u>
8. I will need a hoist	Bespoke reasonable adjustments	1108111000000107 and then add <u>freetext</u> <u>r.e. hoist</u>
9. I need a home visit	Individual care requirements	1325371000000107
10. I need information in easy read	Accessible information- requires specific information format	
11. I need information written in large print	Accessible information- requires specific information format	
12. I need information in a different language	Community Language Support	Look at 200+ language codes under community language support
13. I need phone call appointment reminders	Accessible information- requires specific contact method <u>and additional</u> communication needs and support	Need to add telephone code And 1108131000000104 (only states appointment reminders)
14. I need a text message to remind me about my appointment	Accessible information- requires specific contact method <u>and additional</u> communication needs and support	Need to add telephone code And 1108131000000104 (only states appointment reminders)
15. I prefer to see a male member of staff	Individual Care requirements	314435009
16. I prefer to see a female member of staff	Individual care requirements	314434008
17. I would like to be shown equipment you will use	Individual care requirements	1325331000000105
18. I need extra time to ask questions		
19. I need a written summary in a way that I understand		