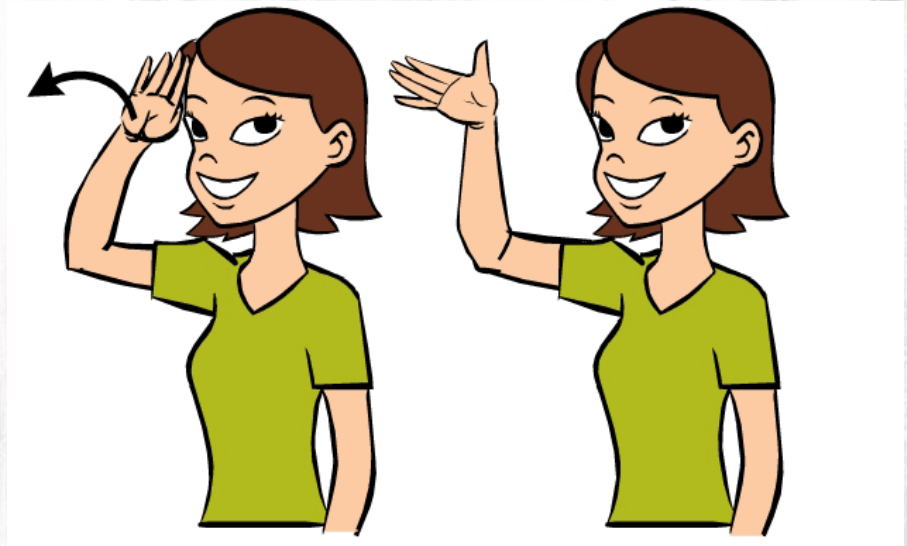


HNELHD Specialised Intellectual Disability Health Team



Contact:

49246067

HNELHD-IntellectualDisabilityTeam@health.nsw.gov.au

HNELHD Specialised Intellectual Disability Health Team

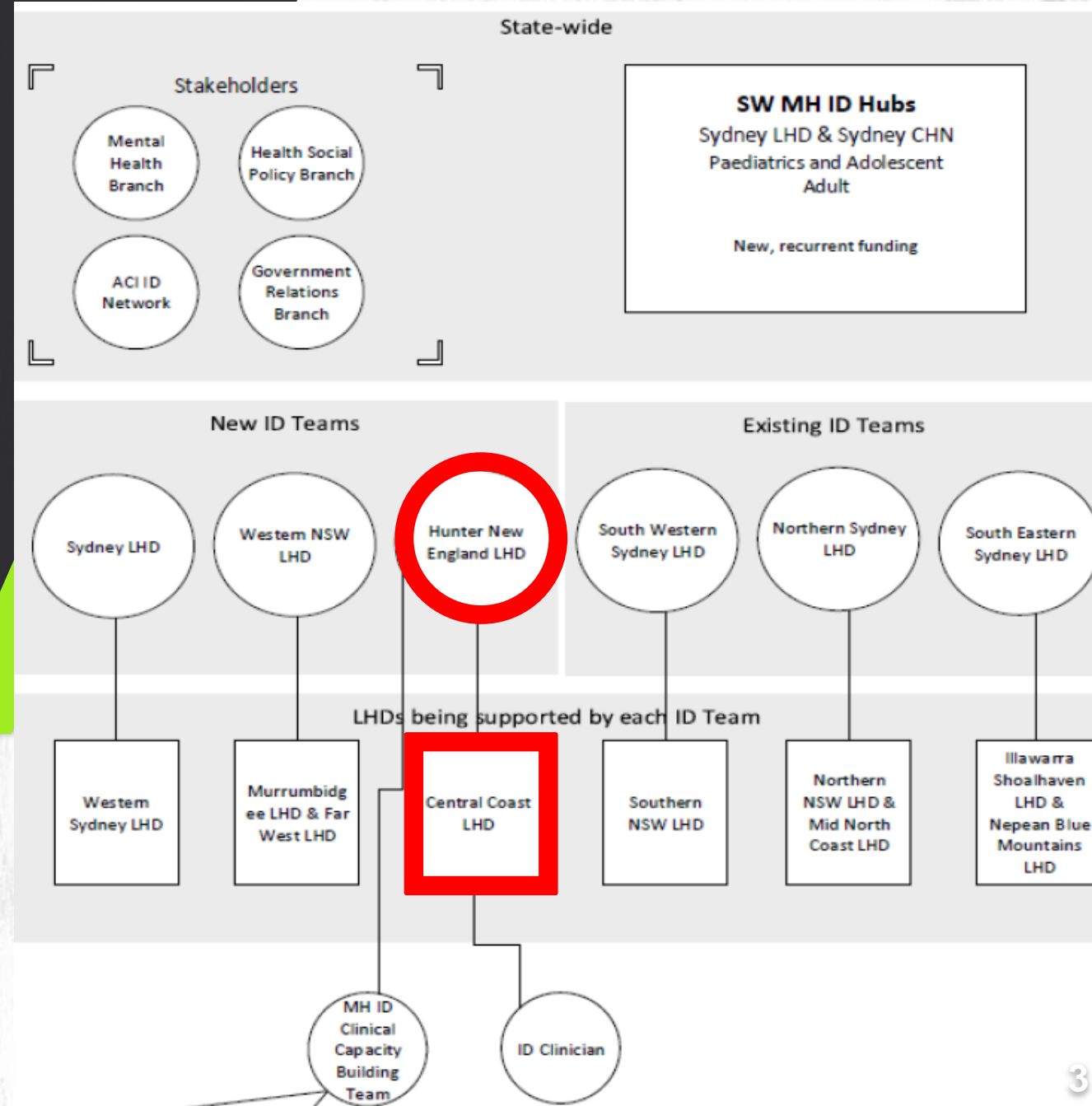
- New service established in 2020
 - referrals now being accepted
- Recurrent funding
- Based at Wallsend

- Provides service across:
 - HNELHD and
 - CCLHD



NSW Health Enhancements

- Six specialised ID Health Teams
- Nine specialist ID Health Clinicians in LHDs without a team
- Two state-wide specialist Intellectual Disability Mental Health Hubs
- 12 locally based programs to improve access to NSW Health mental health services



Why a specific team?

- Unavailability or lack of appropriate assessment tools;
 - Diagnostic overshadowing
 - Discrimination in healthcare systems
 - Factors related to the person's ID which complicate assessment, such as verbal communication and cognition challenges
 - Lack of training and confidence
 - Lack of coherent service models
 - Lack of specific inclusion of people with ID in formulation of policies
 - Poor coordination between services and treating agencies
- Health conditions of people with ID are frequently under-recognised, misdiagnosed and mismanaged by the health system.

465, 000 Australians with an ID

- ID: “A disability characterized by significant limitations both in intellectual functioning and adaptive behaviour, which covers many everyday social and practical skills. This disability originates before the age of 18.”
 - DD: differences in neurologically based functions that have their onset before birth or during childhood, and are associated with significant long-term difficulties.
 - Not all with DD have ID
- IQ: Mild (50-70) Moderate (35-50)
Severe (20-35)

ID today will mean
**intellectual
disability**- not
infectious diseases



Health Needs

High % with comorbidities in ID population

- 11% epilepsy, respiratory and gastrointestinal illnesses, swallowing and feeding disorders (impacting on dental and nutrition health), obesity, diabetes, vision or hearing problems
- 40% comorbid mental illness
 - present to EDs twice as often
 - admissions are twice as often and twice as long
 - higher rates of schizophrenia, affective disorders, anxiety disorders and dementia

Eligibility Criteria

To be eligible for this clinical service a child, adolescent or adult with intellectual disability will have:

- complex health conditions, and
- a current unresolved health problem, and health care needs that cannot be met by usual care.

Eligible clients will receive:

- A multidisciplinary health assessment
- A Health Care Plan with recommendations
- Referrals to health and other services as needed

- The team does **not** provide routine reviews.
- The team can provide advice, information and resources to General Practitioners and the other clinicians who will provide ongoing health care to the client.

Buzz words

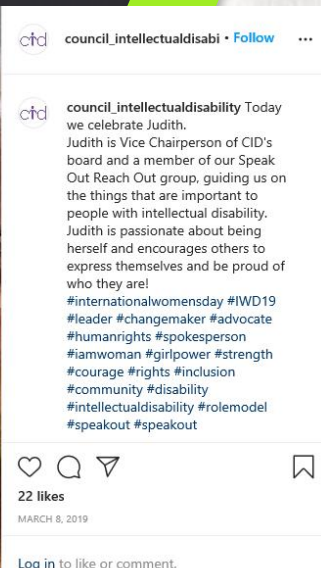
- Reasonable adjustments
- Trauma Informed Practice
- Person-centered
- Dignity of risk

ID and health

- Healthcare is for everybody- even those with NDIS funding

- People with ID have less access to preventive health care, screening
 - lower immunisation rates
 - less BP, lipid level monitoring
 - fewer Pap tests, mammography screenings
 - See GPs at least as often but....
- Reduced health literacy
- Disjointed health care
- Higher percentages of comorbidities
 - 40% comorbid mental illness

“Be heard and seen, be out there, be different and beautiful – for all women”



Dying too young

Most common causes of death:

- Respiratory – aspiration pneumonia
- Choking
- Nervous system deaths – related to epilepsy

- Age at death for people with ID is 20-36 years lower than general population
- Twice as likely to die from avoidable cause
- Significant proportion of ‘premature’ deaths of people who experienced multiple physical health problems in addition to their disability
 - with average of four physical health conditions/person

Doesn't NDIS fix it all?

- Check out this link for an opinion on NDIS from people with an ID:
<https://cid.org.au/wp-content/uploads/2019/07/NDIS-position-statement-Easy-Read-2019-CID.pdf>



- **NDIS isn't about health**
- NDIS: doesn't address health issues
- NDIS is only for those people with significant and permanent disability (ages 0 to 65).
- Our Healthcare system is for **everybody**- even those with NDIS packages!

Team

- Kate Thomson-Bowe – Paediatrician
- Renee Selway- Admin Officer
- Liz Thompson – Adult Rehab Specialist
- Kath Doosey – Social Worker
- Ria Leonard – Psychiatrist
- Trish Stedman- Team Leader/CNC
- Belinda Border – IDMH Pathways Project Officer

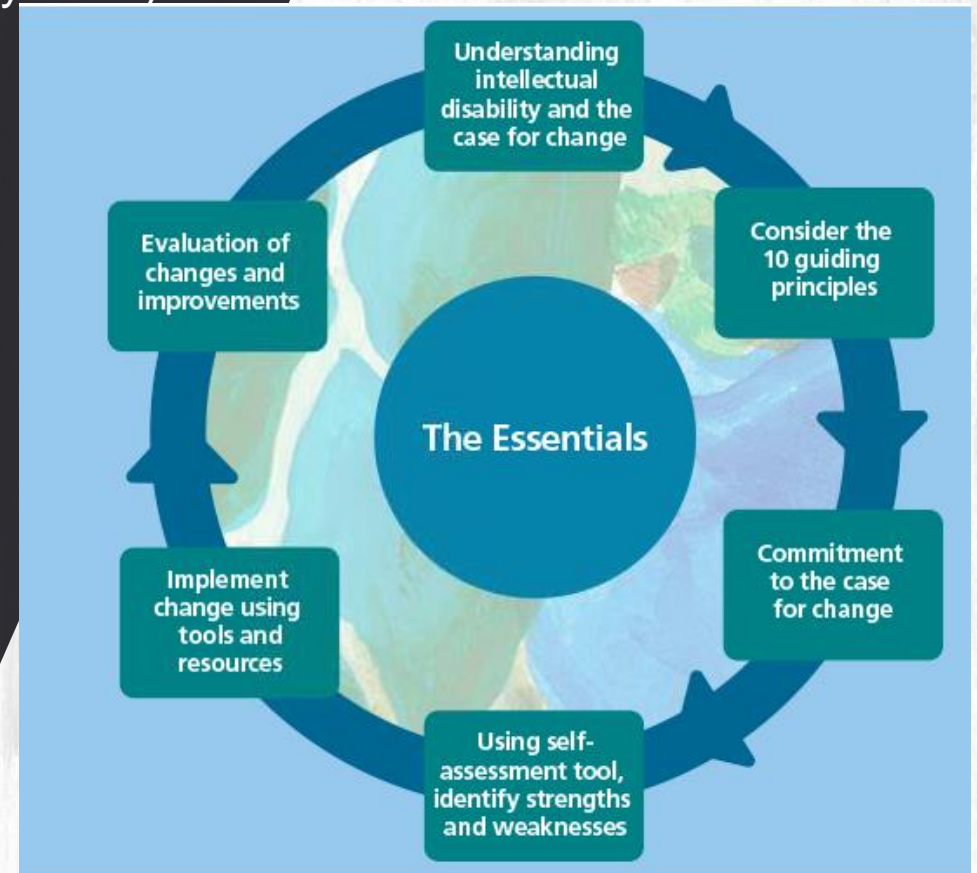


Contact Details & Further Information

- Email: HNELHD-IntellectualDisabilityTeam@health.nsw.gov.au
- Phone: **02 49246067**
- Intranet Page: [Specialised Intellectual Disability Health Team](#)
- Factsheets:
 - [For Carers](#)
 - [For GPs](#)
 - [For NGOs](#)
 - [For NSW Health Staff](#)

Resources

- The Department of Developmental Disability Neuropsychiatry
 - ID MH e-learning
- Therapeutic Guidelines Developmental Disability Handbook (*via CIAP*)
- ACI ID Network
- Council for Intellectual Disability
- People with Disability Australia
- NSW Ombudsman Reports
- Capacity/consent- NCAT Guardianship division
- Family Planning NSW
- Disability Information Helpline
 - Info for PWD about COVID-19
 - 1800 643 787



Thank you

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