

Reasonable ADJUSTMENT



The Problem

- DESP [Diabetic Eye Screening] clinics are high volume and fast-paced to accommodate our large and rising patient populations.
- Patients who have additional needs such as neurodiversity, learning disabilities, cognitive issues or mobility difficulties may struggle with pre-screening and photography.
- Inadequate time and resources in the clinic may lead to patients leaving unscreened, unassessable images or even exclusion from DESP.



The Project

SELDESP created a new 'Reasonable Adjustment' pathway for patients with additional needs. The aim was to keep including patients, rather than considering exclusion.

32 patients were invited to attend a reasonable adjustment session, and the outcomes of these 32 invitations were analysed.

The Process

1. Patients identified as having additional needs either ahead of their first appointment, or having attended a typical clinic where screening could not be completed.
2. Patients or their NOK/carers are contacted so that we can find out more about their needs and what adjustments are required. Easy read and video resources are provided in advance of the session to help familiarise patients with what to expect.
3. Patients are booked into clinic on a day that no other DESP patients are being seen, to maximise the amount of time that can be offered, and create a calmer environment for patients and staff.
4. Screeners are briefed on the patient and their needs ahead of the session and are encouraged to be creative in their approach, for example demonstrating the camera on a trusted adult first, engaging in conversation about the patients favourite TV programme as a distraction, playing music, enabling the patient to take breaks between photographs.

“**90.6%** of patients invited attended their adjustment session”

The Payoff

- 90.6% of patients invited attended their reasonable adjustment session.
- 78.13% of patients who attended had assessable images captured (they had all been unsuccessfully screened in a typical busy clinic prior to attending).
- 3.13% had urgently referral pathology and were referred and treated.

In Summary

- In maximising our resources to provide capacity for our general patient population we may create health inequalities for patients that have additional needs.
- By identifying patients who require additional support we can make reasonable adjustments and provide a DESP screening environment that enables patients to remain included in the programme, rather than being excluded and deepening the health inequalities they face.



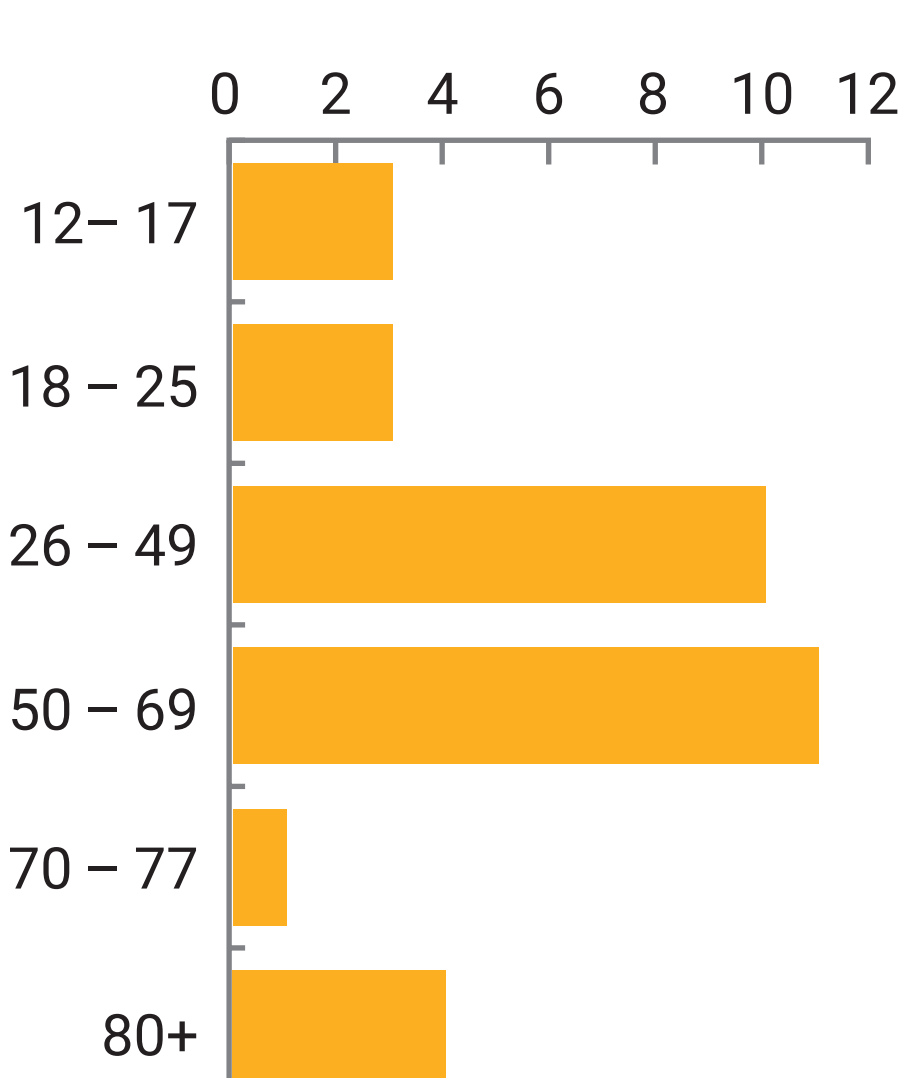
Statistics

“78.13% of the patients who attended had assessable images...”

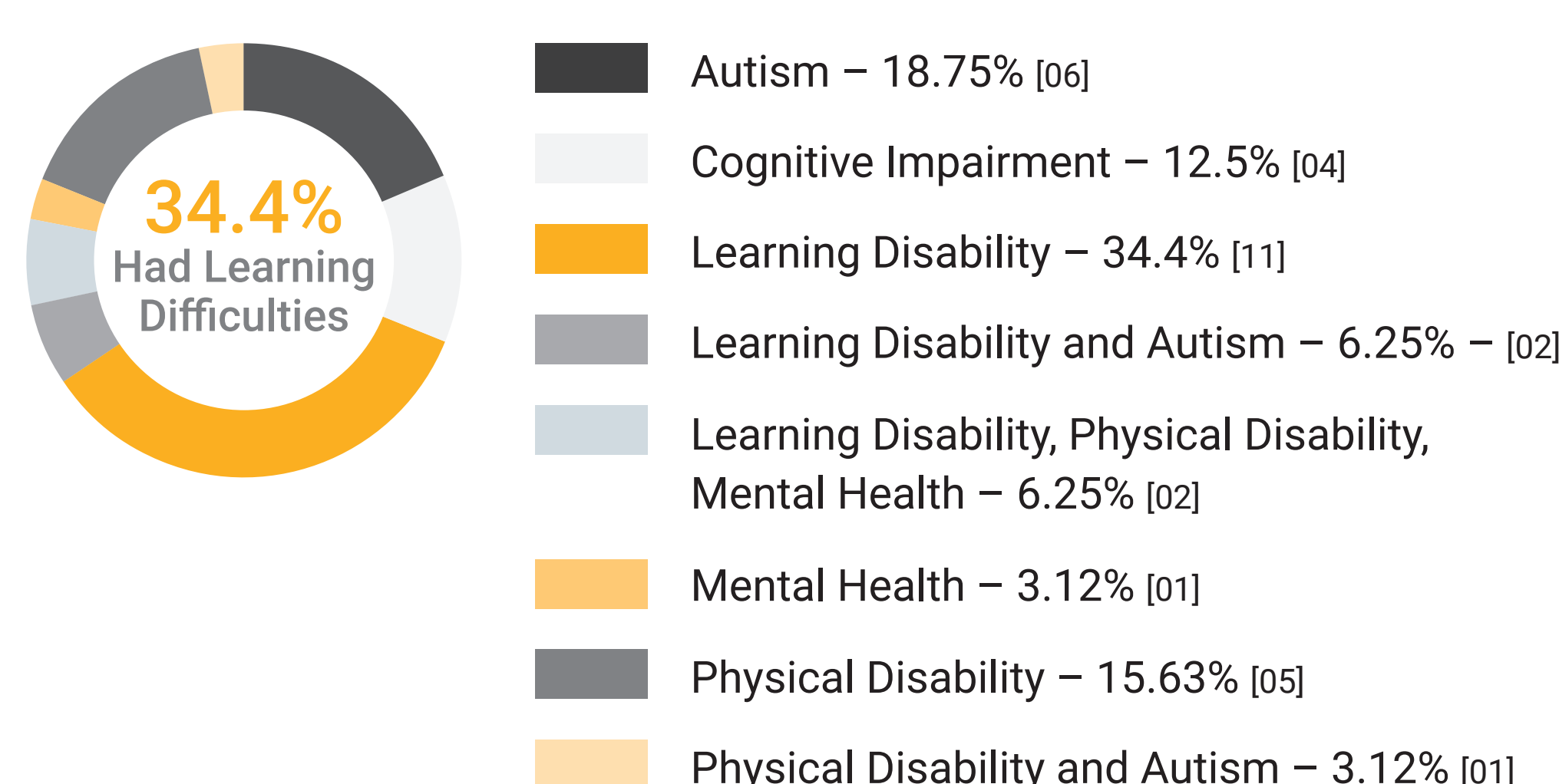
Attendance/Non Attendance



Age of Those Invited



Reason for Adjusted Appointment



Screening Outcome

