

Improving Inclusive Communication in Learning Disability Psychiatry: A Quality Improvement Project (Cardiff West)

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Objectives

- Evaluate current communication practices during psychiatric assessments and follow-up appointments for adults with LDs
- Explore the roles of SaLT and psychiatry in facilitating effective communication
- Identify strengths and barriers within current verbal and non-verbal communication strategies
- Use these findings to develop a practical, strengths-based communication toolbox to support engagement, reduce anxiety, and promote meaningful participation in clinical consultations.

Introduction

- Communication barriers are common for people with learning disabilities during psychiatric consultations (1)
- Ineffective communication can reduce patient understanding, inclusion and participation.
- Few standardised communication resources are routinely available within Learning Disability Psychiatry.
- This project explored current communication practices and developed practical resources to support more inclusive care.

Methods

This was conducted as a Quality Improvement (QI) Project, using the Plan-Do-Study-Act (PDSA) cycle (4)

- 1) Research – literature review
- 2) Plan – continuous observations are assessing current barriers and methods used to communicate
 - Speech and Language Therapy Collaboration
 - Clinical observations
 - Staff questionnaire
 - Fishbone analysis

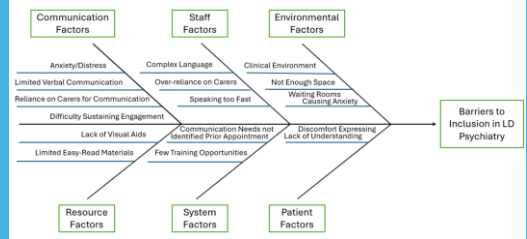


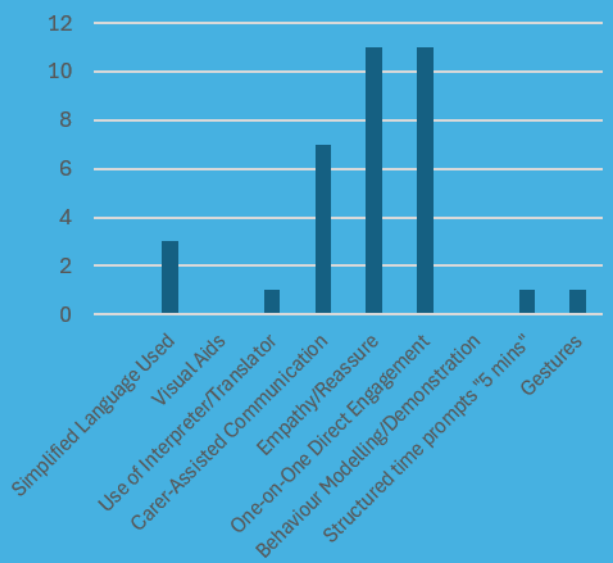
Figure 1: Fishbone diagram for barriers to inclusion in LD psychiatry

- 3) Do – Toolbox creation
- 4) Act – Future implement, gather feedback & refine. Trial the toolbox within clinic, gather feedback on its use and acceptability, and use findings to refine the resources and inform the next PDSA cycle.

Results

Figure 2: Bar chart showing clinical observation of communication strategies

Communication Strategies Observed in Practice



Key findings

- Visual supports are valued but underused
 - Highlighted in clinical observations and staff questionnaire
- Individualised communication is essential
 - Highlighted in literature review and staff questionnaire
- Anxiety was the most common barrier
 - Highlighted in the clinical observations

My Passport

To Patient/Carer - please fill out as much as possible, and present to anybody who you would like to share with and understand you better. (2)

Preferred name (surname): _____

Communication Method

Non-Verbal

Digital ☐ Sign ☐ Visual ☐ Written ☐

Verbal

Information is easiest for me when:
Simple language is used ☐
Information is repeated ☐
Pictures are used ☐
Demonstrations are used ☐
Other ☐

Additional Processing Time Needed?
Yes ☐ No ☐ Sometimes ☐

Clinician Prompt Card

Before Consultation:

☐ Review any communication needs noted

☐ Check availability for visual supports

During Consultation:

☐ Introduce yourself directly to patient

☐ Check communication passport if available

☐ Use simple language

☐ Allow additional processing time

☐ Use visual supports where helpful

☐ Speak to the patient BEFORE carers

☐ Check understanding regularly

After Consultation:

☐ Summarise key points

☐ Explain next steps clearly

☐ Provide easy-read written information if needed

☐ Confirm understanding

How are You Feeling?

Very Happy Happy Okay Worried Sad Frustrated Angry Scared

I feel amazing! I feel good and positive I feel okay I feel uneasy or concerned I feel sad or down I feel frustrated or annoyed I feel angry or mad I feel scared or frightened

How Much? 1 2 3 4 5

A little ☐ Somewhat ☐ Quite a lot ☐ Very much ☐

References

- 1 - Garcia, J.C., Ato, E., Crespo, M. and Kennedy, C.H. 2020. Communication support needs in adults with intellectual disabilities and its relation to quality of life. *International Journal of Environmental Research and Public Health* 17(20), 7374. doi: 10.3390/ijerph17207374.
- 2 - Boardman, L. 2008. Communicating with people with intellectual disabilities: a guide for general psychiatrists. *Advances in Psychiatric Treatment* 14(1), pp. 48-56. doi: 10.1192/apt.bp.106.
- 3 - Murphy J, Tester S, Hubbard G, Downs M, MacDonald C. Perceptions of communication between people with communication disability and general practice staff. *Health Expect*. 2006;9(1):49-59. doi:10.1111/j.1369-7625.2006.00366.x.
- 4 - NHS England. *Plan, Do, Study, Act (PDSA) cycles and the Model for Improvement* [Internet]. NHS England; 2023 [cited 2026 Jun 26]. Available from: <https://www.nhs.uk/wp-content/uploads/2023/07/pdsa-cycles-model-for-improvement.pdf>

Figure 1 and Figure 2: Created by the author

Declaration of interest – Nil