# Communication for people with sensory loss, people with a learning disability and/or on the autism spectrum during the COVID-19 pandemic: advice for health and social care staff

People with sensory loss or with a learning disability and/or on the autism spectrum face extra barriers to accessing healthcare which can put them at risk of missing out on the care they need, and avoidable death. In addition, due to the increased risk of adverse outcomes from respiratory conditions for many disabled people, they may be more likely to need to access healthcare services. At this time, it is **vital** that health and social care workers can still make the reasonable adjustments required by law that these patients need – this document will help you identify the most important things you need to do to communicate effectively with your patient to support their health needs.

Communicating effectively can help your patient to:

* Understand advice about how to deal with the symptoms of COVID-19 and keep themselves, and others safe;
* Comply with treatment such as medicine dosage;
* Keep to appointments and engage with healthcare professionals;
* Give you the information you need about their symptoms;
* Recall the information you have given them;
* Make their own decisions and give valid consent to treatment;

Remember communication is both about giving **and** receiving information.

* Where possible, always talk directly to the patient;
* Always ask for the patient’s preferred communication method;
* Remember that noisy and busy environments can make communication difficult for many disabled people;
* Patients may have more than one disability;
* Do not assume just because someone has a mobile number that they can receive important communications via text;
* National and local charities, and self-advocacy groups, or companies like [www.a2i.co.uk](http://www.a2i.co.uk/) and [www.ecomdda.com](http://www.ecomdda.com/), can provide communication support and solutions.

## Patients who are blind or partially sighted

* Let the patient know you are there or if you are leaving the room;
* Make sure you have large print, electronic, audio version and Braille versions of information available;
* If the patient is in a hospital bed, have you told them when and where you have placed food or drink near them (e.g. 12 o’clock, 3 o’clock etc) so they do not go hungry or thirsty? Have you told them about the location of important items such as the emergency call button and checked that they have understood and can reach them?
* More communication tips can be found here: <https://www.rnib.org.uk/sites/default/files/10%20tips%20sight%20loss%20Communication_0.pdf>

## Patients who are Deaf or who have hearing loss

* Many people with hearing loss rely on visual cues such as lipreading and facial expressions. Communication can become more difficult or impossible on the telephone or when you are wearing a mask. When wearing a mask, speak clearly, check understanding by asking them to repeat, speak to a friend or relative if absolutely necessary.
* Older people are at higher risk of becoming severely ill due to coronavirus and more than 70% of people over the age of 70 have hearing loss.
* Telephone based services are inaccessible. Do you provide email, SMS text, Text Relay, textphones or British Sign Language (BSL) video relay?
* For patients in a hospital bed, have you checked if they have hearing aids and that they are working? If they do not have hearing aids but need them, check with audiology locally to see if a personal listener can be supplied.
* Are your hearing loop systems working? Are they regularly tested?
* More communication tips can be found here: <https://www.actiononhearingloss.org.uk/how-we-help/health-and-social-care-professionals/communication-tips-for-health-professionals/>

## Patients who are deafblind

* There is no single way that someone who is deafblind will communicate – it depends on their levels of sight and hearing as well as when acquired.
* People who are deafblind may communicate using clear speech, adapted forms of sign language or other methods such as [deafblind manual](http://deafblind.org.uk/wp-content/uploads/2019/03/Deafblind-UK-Deafblind-Manual-Poster-2.pdf).
* People who are deafblind may also need information available in different formats such as Braille or BSL video dependent on their individual needs.
* More communication tips can be found here: <https://www.sense.org.uk/get-support/information-and-advice/communication/> and here<https://deafblind.org.uk/information-advice/living-with-deafblindness/communication/>

## Patients with a learning disability and/or on the autism spectrum

* **Multiple conditions.** A person may have a learning disability and also be on the autism spectrum. They may also have sensory loss too.
* **People with a learning disability and/or on the autism spectrum may need support to communicate**. Many people communicate using speech and words, but may need support to understand information or get their point across. Others will need intensive support to communicate, and may require someone else to advocate on their behalf.
* **Find out how the person normally communicates**, and what support they need to do so. Always check to see if a patient has a hospital passport or communication book. Pass on this information to others who may be involved in their care.
* **Allow time to process information and answer questions**. People with a learning disability and/or on the autism spectrum may take longer to process information they are being told, or to answer a question (e.g. about their symptoms). Give them time to answer and don’t rush to rephrase or re-ask the question straight away; that might lead to information overload. This can be overwhelming at times of increased anxiety.
* **Families and supporters may be able to help you to get to know a person,** communicate with them, and pass on valuable information. They may also be able to support the person to understand what is happening. Ensure the person can have their supporter with them as much as is possible, and as much as they want. Also be aware that supporters or family may not be able to stay – if this is the case, get as much information as you can, while you can. Ensure you have the key contact details you need.
* **Comply with the Mental Capacity Act.** Always assume the person can make decisions for themselves, even if they need support with their communication. If, despite supporting the person to make the decision, a capacity assessment shows they are not able to make the particular decision, at the particular time, then the decision should be decided in the person’s best interest. Ensure the person and those relevant others are involved in any best interest decision. Having the person’s support network contact details will help save time later.
* **Include the patient in communication** no matter who else is involved.
* **Listen** **to your patient**. People with a learning disability and/or on the autism spectrum may present differently to other patients, including how they express pain, or show that they are feeling unwell. Changes in behaviour can often be a way of communicating that something is wrong. Listen to the people that know the patient best.
* **Adapt your communication** to the needs of the patient. Useful changes can include slowing down, using short and easy words, breaking information down, giving easy read information, and using pictures or objects to explain. Seek a calm and quiet environment where possible.
* **Seek advice** from the learning disability nurse in your Trust, or the community learning disability team in your area.
* **The learning disability and/or autism guidance** from NHSE will help you meet the needs of the patient: [www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/C0031\_Specialty-guide\_LD-and-coronavirus-v1\_-24-March.pdf](https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/C0031_Specialty-guide_LD-and-coronavirus-v1_-24-March.pdf)

This communication guidance has been produced by the following organisations. We are extremely grateful for all that health and social care staff are doing in these unprecedented times. We hope that this information is valuable for staff in supporting their patients.

   

   

  

  