

**Quality Hospital Care**

**for People with Intellectual Disabilities**

**Learning Resource**

**Suggested Responses to Activities**

**Hospital Staff Pathway (Group)**

 

https://www.hospitalinclusion.au



Hospital Staff Pathway: Waiting in Emergency

These activities are designed for groups of 4-5 staff who have worked in any part of a hospital:

1. Individually identify and then share how communication difficulties affect how readily you can determine why the person is presenting to hospital and complete the triage process.

**Some examples are:**

* **The person did not show any obvious signs of illness or injury**
* **The person did not respond to questions**
* **I couldn’t understand what the person was saying.**
	+ **The person with them did not seem to know much about how long the person had been unwell, or what seemed to be the problem**
* **The person was crying or screaming, but not hearing what I was asking**
1. Discuss strategies to obtain this information in ways that include the patient.
* **Give them time to respond to questions**
* **When asking questions, use concrete language**
* **Ask them if they understand your question**
* **Ask them to show rather than tell you**
* **Ask for their permission to direct your questions to the person with them**
1. List ways of accommodating the needs of people with intellectual disabilities who need to wait for extended periods.

**Some examples are:**

* **Provide regular updates on wait times**
	+ **Check if they would like a quieter or alternative place to wait, or offer the possibility to wait outside ED**
	+ **Ask accompanying person to let you know if the patient is becoming more anxious, or if they notice their condition is worsening**
1. Using a scale of 1 (difficult to implement) to 5 (easy to implement), discuss and rate each of these strategies.

**Consider opportunities and limitations related to time constraints, staffing, resources, etc. You may also want to note the extent to which the practicality of implementing each accommodation might vary and according to what factors (e.g., how the person expresses distress, whether they are alone or with someone, how busy the ED is, if there is more than one person requiring accommodations).**

1. Discuss what would need to happen to implement each of the strategies listed in terms of
* information you would need
* who you would need to collaborate with, including other hospital staff

**Think about what you need to know about the person and the person with them. What is the physical layout of the ED waiting room. How many staff are on duty and who is able to leave their station.**



Hospital Staff Pathway: Emergency Department /

Transitions to a Ward

******

***As a group, watch the video*** [***Getting Medical History Information***](https://youtu.be/gdMzxqJly-4)***, then use the questions below as discussion points***

1. Explain the reason for the doctor phoning Lynne.

**The doctor wanted to know if Jeff had had x-rays done recently. This could reduce the need for unnecessary tests and possible distress for Jeff.**

1. Describe the collaboration that occurred between Sonia, the doctor, and Amelia, and then between Sonia and Lynne.

**Sonia demonstrated that she valued Amelia’s role and input by appreciating what she knew and asking her who would have the further information needed. They worked together to access the information needed and share what they each knew.**

1. Think about how this scenario applies to your experiences
	1. Have one person in the group describe having a patient in a ward with limited spoken communication.​

**To help with this task, consider what they said, their use of their voice – did it convey any information about how they were feeling, how comfortable they were in being in hospital, what behaviours did you observe and what, if anything, did they seem to express. How did they respond to what you said, when you looked at them directly, your tone of voice?**

* 1. Discuss the knowledge needed about people with intellectual disabilities who don't use speech.

**Check the factsheets on how people with intellectual disability communicate and Augmentative and Alternative Communication. This will help you locate specific strategies to use according to their communication, and also how AAC may be used.**

* 1. Identify potential people who could have informed you about their communication, current medical needs and history.

**These could include family members, friends, disability support staff (e.g. group home supervisor).**

* 1. Explain how you could support a person who does not seem to understand what you tell them to prepare for a transition.

**Most important is to include the person in the conversation, even if you are unsure what they might understand. Take time to explain, and use pauses and watch for their responses. Use of gestures or pictures can also help. Reassure them through your tone of voice and reference to the person who is accompanying them, stating that the person can come along also, if this is the case.**



Hospital Staff Pathway: Ward Stays

As a group,

1. List challenges faced by hospital ward staff in providing quality care to a patient with intellectual disabilities.

**Some of these challenges include:**

* **Knowing how they communicate and how to support their communication (both understanding and expression)**
* **Ensuring you have information about health conditions that may not be the reason for their hospital stay.**
* **Knowing what personal assistance they require**
* **Providing personal assistance, particularly when the ward is busy**
* **Being unprepared for difficult behaviours**
* **Ensuring compliance with requirements when a person has limited ability to understand – e.g., to stay in bed, to not pull out catheters**
* **Reducing potential to disrupt or distress other patients**
1. Share your experiences in meeting these challenges.

**In this exercise it is important to be solution-focused. The next activity will assist.**

1. Discuss how applying the framework of Knowing, Informing, Collaborating and Supporting could be applied to these challenges.

**Consider what you need to know, who might have information that you need, who could you collaborate with to solve problems, how can you best support the patient.**



Hospital Staff Pathway: Discharge

In groups of 4-5 participants, prepare for a role-play of a discharge meeting for a woman, Hanna, aged 52 years, who communicates with speech, but is often very shy in a group, especially if there are people she doesn't know. She has spent 5 days in hospital recovering from a fractured right arm (she is right-handed). Before being in hospital, she had lived in a group home with 2 other women. Her house supervisor has indicated that at this time, she can't return to this home, at least not until she regains full function of her arm and hand. The meeting has been called by someone in the hospital to decide if Hanna can be discharged and to where. To prepare for the role play:

1. Identify who should attend the meeting.

**Think about who should be involved from the hospital, Hanna’s group home, family members or carers.**

1. List the information that would be needed by each person at the meeting.

**For example: what are Hanna’s preferences and wishes?**

**What type of support exists at her current group home?**

**What alternative accommodation options exist?**

**What support can her family/house supervisor provide?**

**Does Hanna have NDIS or other funding source that could include additional supports at home?**

1. Is there a short term option that would allow Hanna to receive the care in hospital – i.e., is a delayed discharge an option? Identify who would provide this information.

**Looking at the information areas you identified in the previous question, think about who would be best positioned to provide this information (it could be more than one person).**

**Examples include – Hanna, family, staff from her home, a manager from her group home, NDIS representatives, members of her rehabilitation team.**

1. Explain how support would be provided to Hanna to ensure her preference and will is expressed and considered in the decision.

**Consider how she will be included in the conversation, and how you will ensure that she is able to express her preferences. It would be important to make sure her preference takes a priority in terms of the options generated at the meeting.**

1. Following your role-play, each participant describes the application of each of Knowing, Informing, Collaborating and Supporting to the scenario. This step can also be completed by having one member of the group act as an observer, who then describes how each element of the framework was applied.

**Knowing – what did each participant need to know about how hospitals or disability services work?**

**Information – what specific information was needed about Hanna, where she lived, and who supported her?**

**Collaborating – how participants demonstrate their willingness to listen and contribute ideas, and be willing to adjust them?**

**Supporting – what final outcome do you think would be most supportive on Hanna such as being able to return to her home, either in the short or medium term, with appropriate medial and personal supports?**