

Communication Tips for patients with Developmental Disabilities

General Strategies:

- Familiarity helps: seek out someone who the patient knows, and is comfortable with. Do inquire about caregiver stress/burnout.
- Ask for strategies and tips - what do they find helpful? Should I write things down? Use technology?
- Encourage the use of 'comforters' - items or activities they find soothing (favourite item, music, phone, doll, food/snack, etc.)
- Try to find a quiet spot without too many distractions (isolation room?) (vision and hearing deficits)
- Use simple words, and speak slowly. Give pauses and allow extra time for processing. Do not shout.
- Use a **Tell**, then **Show**, then **Do** approach - pausing in between each step to help build readiness.
- Be extra mindful of your non-verbals and body language. Many people with DD have experiences of trauma - they could be very afraid of the hospital, so extra sensitivity can help.
- Use visuals - gestures, or drawings, when possible.
- Give ongoing positive praise and encouragement, after even the smallest of steps.

Behavioural Concerns?

- What is the behavior trying to tell us? (Pain? Unmet need? Attention? Sensory loss? Avoidance?)
- How is today's presentation (*behavior) different from baseline? How long has this been going on for? What has helped in the past? What are you currently trying?
 - Pain: How do we know when the person is in pain?
 - Commonly missed medical causes:
 - Dental Pain;
 - Constipation/obstruction;
 - Infection;
 - Cerumen impaction;
 - Abdominal sepsis
 - Environment: Have there been any changes to supports? Occupational issues?
 - Emotional needs: Recent life changes/losses? Bullying? Vulnerabilities? Triggering anniversary?
 - Is there a known psychiatric disorder?

Maximizing Comprehension, Optimizing Discharge

- Ask the patient to rephrase in their own words to assess their understanding
- Give simple written information, with concrete next steps to help summarize and improve follow-up