Connection with Your Diverse Patient Population

- Limited English Proficient (LEP) Patients
- Patients with Visible and Hidden Disabilities
- Senior Patients
Connecting with Your Diverse Patient Population

Part I
Seniors and Persons with Disabilities (SPD)
Seniors & Persons with Disabilities (SPD)

OBJECTIVES:

1) Examine how disabilities affect most of us at some point in our lives.

2) Recognize different types of disabilities that may be visible or hidden.

3) Explain how disabilities affect the senior population.

4) Discuss appropriate ways to interact with seniors and people with disabilities.

5) List several ways in which access to health care can be improved for seniors and persons with disabilities.
VIDEO: Who Are Seniors and Persons with Disabilities (SPD)?
Americans with Disabilities Act (ADA)

- Federal Civil Rights Law passed in 1990
- Protects persons with disabilities, similar to protections on the basis of race, color, sex, national origin, age, and religion
- Ensures equal access to employment, public services, public accommodations, transportation, and telecommunications
Main Areas Covered Under the ADA

**Employment:**
- Any employer with 15 or more employees

**Public Services:**
- Public schools
- State parks
- Public transportation

**Public Accommodations:**
- Medical offices
- Hotels
- Movie theatres
“Disability" is Defined by the ADA as:

- Physical or mental impairment that substantially limits one or more major life activities; or
- Record of a physical or mental impairment that substantially limited a major life activity; or
- Being regarded as having such an impairment.
Examples of Covered Disabilities:

- spinal cord injury
- blindness
- cancer
- multiple sclerosis
- epilepsy
- HIV infection and AIDS
- diabetes
- hearing impairment
- dyslexia
- major depression
- stroke
- cognitive impairment
- muscular dystrophy
- emphysema

Which if these disabilities could be visible?

Which could be hidden?
What is Not Covered under the ADA?

- **Certain temporary conditions**
  - Sprain, flu, minor gastrointestinal disorder

- **Active illegal use of drugs**
  - Someone in rehab or post-rehab would be covered

- **Behavioral disorders**
  - Kleptomania, pyromania, compulsive gambling
# Interacting with Persons with Disabilities

<table>
<thead>
<tr>
<th>Acceptable – Neutral*</th>
<th>Unacceptable - Offensive</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>She</strong> has a disability; she is a person <strong>with</strong> a disability</td>
<td>She is disabled; handicapped; crippled</td>
</tr>
<tr>
<td><strong>He</strong> has cerebral palsy</td>
<td>He is afflicted with; stricken with; suffers from; a victim of cerebral palsy</td>
</tr>
<tr>
<td><strong>She</strong> has a congenital disability</td>
<td>She has a birth defect</td>
</tr>
<tr>
<td><strong>He</strong> uses a wheelchair; has a wheelchair</td>
<td>He is confined to a wheelchair; wheelchair bound</td>
</tr>
<tr>
<td><strong>She</strong> has a developmental disability; intellectual disability</td>
<td>She is retarded; slow</td>
</tr>
<tr>
<td><strong>She is an older person</strong> with <strong>a disability</strong></td>
<td>She is frail</td>
</tr>
<tr>
<td><strong>He doesn’t have</strong> a disability</td>
<td>He is normal; whole; healthy; able-bodied</td>
</tr>
</tbody>
</table>

*Always subject to change and continuing debate ~ Harris Family Center for Disability and Health Policy

**See attachment in packet**
Interacting with Persons with Disabilities

* **First of all, relax**
  * If you’re not sure what to do, just ask.
  * Don’t be embarrassed if you use common terms like “See you later,” or “Did you hear about that?”

* **Focus on the person, not the disability**
  * Disabilities do not define a person.
  * Assume that a person CAN do something, rather than assuming they CAN’T. They will let you know.

* **Always ask before helping**
  * Offer your arm for balance, if needed.
  * Do not grab the person’s arm (or other body parts).
What’s wrong with this picture?
Interacting with Persons with Disabilities

* Speak directly to the person
  * Face the person when using an interpreter.
  * Talk directly to the person, not to their family member or caregiver.

* Listen attentively
  * Do not finish the person’s sentence.
  * Do not pretend to understand if you do not.

* Be on the same level
  * Sit in a chair or kneel when speaking to a person in a wheelchair or scooter for more than a few minutes.
  * Instead of leaning over a counter that is too high for someone, step around the counter to provide service.
Interacting with Seniors

* Address the person formally
  * Use “Mr.” or “Mrs.”
  * Do not use “Dear” or “Sweetheart.”

* Step away from busy areas
  * Background noise and activities can be distracting.

* Be mindful of your volume and rate of speech
  * Enunciate and make eye contact.
  * Talk louder only when you are asked.
  * If you are a fast talker, slow down a bit.

* Be Patient
  * Be patient, be patient, be patient.
Interacting with Seniors

- **Always ask before helping**
  - Offer your arm for balance, if needed.
  - *Do not* grab the person’s arm.

- **Use the “teach back” method**
  - “If you were to explain to your husband what we talked about today, what would you say?”

- **Use reminders**
  - Write things down - neatly!
  - Seniors may need more than one appointment reminder.

- **Be patient**
  - Be patient, be patient, be patient.
Get your free copy from the National Institute on Aging

Improving Access for SPD Patients

1) Wheelchair ramps, curb cuts
2) Automatic doors, hand rails, wide doorways
3) Lowered counters, clear hallways
4) Height adjustable exam tables
5) Wheelchair accessible weight scales

획득 - Federal tax credits and deductions are available to private business to help offset costs!
http://www.eeoc.gov/facts/fs-disab.html
Improving Communication with SPD Patients

1) Interpreter services
2) Assistive Listening Devices
3) Text messaging
4) California Relay Service
5) Patient materials
   - English and other languages
   - Easy to understand
   - Large print
   - Audio
   - Video

Easy-to-Read Materials:
- Standard fonts
- 2-syllable words
- 10-15 words/sentence
- 3-4 sentences/paragraph
- Headings
- Bullets
- Action-oriented
Most Disabilities Are Acquired as we Age

“Disability is a part of life. Some of us are going to get it young, and some of us are going to get it old.”

~Ed Roberts (1939-1995)

Ed Roberts acquired polio in 1954 at age 14 and became paralyzed from the neck down. The attending physician told his mother, “You should hope he dies.”

Known as “The Father of the Independent Living Movement,” he co-founded the World Institute on Disability in Berkeley, CA. Mr. Roberts started the first independent living center in the US in the 70’s... there are now about 500 across the U.S.
Questions?

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Your feedback is important to us...

Please remember to complete an evaluation!