

Checklist of Best Practices to Provide Health Care to Adults with Disabilities

The purpose of this checklist is to recommend specific actions to doctors, nurses, and other health care providers to provide quality health care to adults with disabilities. As disability is a complex and individual experience, the checklist focuses on specific types of needs and how to meet them, rather than on specific types of disabilities. This checklist is not meant to be comprehensive. It does not take the place of on-going continuing education. The guiding principles include core values that should frame all interactions with persons with disabilities.

Guiding Principles

- ❖ Persons with disabilities are experts in their own lives, needs, and supports.
- ❖ Presume competence: Do not make assumptions about a person's abilities, preferences, expectations, or desires.
- ❖ Use inclusive, non-stigmatizing language. This includes person-first language (person with a disability vs. disabled person). However, each person may use different terminology.
- ❖ Communicate with each person with respect – talk to adults like adults.
- ❖ Speak directly to the person with a disability (patient) and position yourself to face them at eye level (not facing others in the room such as an interpreter, direct support staff, caregivers, family members; not facing a computer screen or other devices, etc.).
- ❖ Ask permission before touching or moving a person's belongings (i.e., clothing, glasses, wheelchairs or other mobility devices, communication devices, etc.).
- ❖ Abide by service animal etiquette. Always ask the handler before interacting with a service animal.

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Communication

Do I communicate effectively by...	Yes	No
Using concrete terms (avoiding figures of speech)?		
Using short, simple sentences (using action verbs)?		
Using plain language (avoiding medical jargon)?		
Using a normal volume, tone, and tempo of speech?		
Using specific estimates of time for how long each part of the visit will take?		
Using visual aids or pictures as needed to help explain things?		
Asking the patient to repeat themselves if I didn't understand?		
Taking pause to allow the patient to communicate?		

Preparation

Do I prepare for visits by...	Yes	No
Reviewing the patient's chart in advance?		
Determining the patient's mode of communication? <i>This can include spoken language, sign language, a device, pictures, and other modes.</i>		
Determining the patient's receptive communication skills and abilities? <ul style="list-style-type: none"> • What is the patient's primary language? • Does the patient have an intellectual disability? 		
Securing the necessary auxiliary aids and/or services for the visit? <i>This includes qualified American or other Sign Language interpreting, tactile signing, and spoken language interpreting.</i>		
Identifying any accommodation that needs and securing appropriate equipment? This may include: <ul style="list-style-type: none"> • Larger exam room • Accessible diagnostic medical equipment <ul style="list-style-type: none"> • Height-adjustable exam tables • Accessible weight scales • Lifts to transfer patients • Accessible imaging equipment 		

At the Start of the Visit

Do I engage in best practices by...	Yes	No
Identifying the people in the room and their roles?		
Introducing myself to the patient?		
Introducing any medical staff?		
Identifying anyone else with the patient and their roles? This may include direct support staff, caregivers, family members, and others. <ul style="list-style-type: none"> • Will they stay in the room for the visit? • Will they share patient history and needs? • Will they support the patient to understand during the visit? After the visit? • Do they have permission to know person or private health information? 		
Identifying the reason for the visit?		
Setting an agenda for the visit with the patient?		
Clarifying any expectations for what will occur during the visit?		
Addressing any other questions or priorities before the exam?		

During the Visit

Do I engage in best practices by...	Yes	No
Including all parts of the history and physical exam? <ul style="list-style-type: none"> • For a complete medical history, asking for details and history of disability is important. • For an acute care visit, focusing on the chief complaint is appropriate. 		
Explaining each step of the exam before it happens?		
Showing/demonstrating any equipment or maneuver before using it?		

At the End of the Visit

Do I engage in best practices by...	Yes	No
Explaining exam findings and plan for next steps using plain language?		
Allowing time for the patient to ask questions?		
Checking for patient understanding?		
Providing a visit summary and any other materials to the patient in their preferred mode(s) to receive information such as print versions, electronic versions, etc.?		

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Resources to Learn More

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