



Covid-19 Guidelines

**for Emergency Medical Services, Hospital & Health
Care Providers**

for Patients with Disabilities and the Elderly



Important to know



- People with disabilities and elderly people are the largest minority in the world
- These people have a variety of disabilities – including but not limited to physical, visual, hearing, autism, mental, communication, verbal etc.
- Some of these disabilities are visible and some are hidden/not visible. Disabilities can be severe or minor.
- When coming to provide care. it is important to follow these guideline on how to identify, communicate and properly assist people with disabilities and the elderly in an accessible and sensitive manner. Especially those who live alone or have a severe disability.

These Guidelines are here to assist you in your noble mission



Stress and Anxiety during the Corona Crisis



The unique challenges of People with disabilities and the elderly during these times:

- People with disabilities and the elderly are often in the risk groups due to pre-existing conditions, illnesses, injuries etc.
- There is a need for medicine and medical equipment according to their disability and anxiety can come when fearing when and if such necessities will be available for them
- People with disabilities and the elderly experience loneliness more than the average person, these feelings are enhanced during the Corona Crisis.
- Dependency on care-givers and family members for daily existential
- The transition to remote service is difficult for them due to a technological gap or lack of accessibility
- Their regular visits to doctors and treatments are not taking place.
- Due to absence of support systems (including family and friends) added concern and care will be needed



General guidelines for an accessible and sensitive service

1. The basics for an accessible service are: sensitivity, patience and kindness
2. Introduce yourself and offer your assistance.
3. Don't force your help on someone. It is important to ask the patient if they need help and if so - how he/she want to be helped.
4. A Patient with a disability or an elder patient do not look for special treatment but for consideration for his/her needs.
5. Talk to the Patient directly and at eye level, as equals.
6. Listen to the request/desire of the Patient and try to fulfill them within your protocols
7. Remember some of these disabilities are visible and some are hidden/not visible. Disabilities can be severe or minor.
8. A patient with a disability or an elder patient may have a care-giver. Talk to the patient and not to his/her care-giver. A care-giver is there to assist but should not be your initial source of information.
9. Common aids like wheelchairs, walkers, crutches, canes, guide-dog, glasses, hearing aids and others are part of the patient's personal space. Don't touch them, lean on them or move them without his/her permission.



This guide will focus on the following interfaces between a patient and health service provider in hospitals and healthcare centers during the COVID-19 (Corona) crisis:

- Receiving the patient in the hospital/healthcare center – Reception/ Triage area
- Check-up and treatment of the patient
- Remote healthcare at home

This guide provides tips and guidelines on how to communicate and treat people with various disabilities including the elderly.



General Guidelines For Approaching And Dialogue

With A Patient With A Visual Disability

- Introduce yourself and your position.
- Describe how many people are present and who they are
- Offer your help but don't force your help on someone. Ask them if they want help and if so, how can you help them
- Listen to the request/desire of the patient and try to fulfil them within your protocols
- Verbally describe your actions and every step of the process
- Guide dogs may enter the treatment room
- Avoid touching accessibility aids (such as white cane, guidance dog)



Guidelines For Approaching And Dialogue With A Patient With A Visual Disability

Reception Area:

- The patient needs to be asked how he/she prefers to be guided without the need to touch (for example with verbal guidance)
- Assist the patient verbally to keep distance from you and others in the room.
- Allow the patient to have a care-giver/family member present if he/she so requests
- Make sure that the passageways are clear of all obstacles
- If possible, offer the patient to be registered without having to stand in line
- Explain to the patient about the process he/she is about to go through including estimated time for the process and any other relevant information. If there is written information, offer to read it to him/her.
- If possible, have the written information in an accessible copy with enlarged fonts.
- Assist in filling out information if needed
- If the patient requests to receive written information in Braille, large fonts or to have it read to him/her – kindly do so.



Guidelines For Approaching And Dialogue With A Patient With A Visual Disability

In the Treatment room / during medical procedures

- Verbally describe the entire process – describe what you are about to do. Remember the patient cannot see you, your hand motions or your diagrams
- If the patient needs evacuation and hospitalization – verbally describe the process and update the facility that the patient arriving is visually impaired so they can prepare accordingly. For example – to place his bed next to manned nurses desk, toilets etc. is he assisted by a guide dog or a care-giver.
- At the end of the visit check with the patient which accessible format is preferred by him. For example – accessible print, reading information, recorded information etc.
- The patient should be escorted to the exit of the medical center.
- If possible medically – enable the patient to be accompanied by their care-giver if needed.



Guidelines For Approaching And Dialogue With A Patient With A Visual Disability

Remote Healthcare Guidelines

- It is important to remember that the patient does not see. Therefore –
- Explain ahead of time what actions you are taking
- It is crucial to verbally explain to the patient what may be illustrated on screen, paper etc.
- Even if the patient has a care-giver – make sure you are addressing the patient directly.
- At the end of the visit check with the patient which accessible format is preferred by him for the summary of the visit and instructions for treatment. For example – accessible print, reading information, recorded information, digital letter etc.
- Understand from the patient whether he wants to receive the information by email or regular mail.



General Guidelines For Approaching And Dialogue With A Patient With A Hearing Disability

- Hearing disabilities are usually non-visible – if the patient does not immediately advise you of his disability and does not respond to you addressing him it is possible he cannot hear you. Place yourself in front of him, make a gesture with your hand so he will see you are looking for his attention and try to make eye contact.
- A patient with hearing disability generally reads lips of the person he is speaking to.
- If you are using a mask try to communicate with him in the following ways:
 - Speak clearly and slowly and if needed raise your voice (but do not shout) – using gestures with your hands can help.
 - If possible, use a transparent mask through which your lips can be seen and still you are protected.
 - Use writing on paper or on your phone and show the patient.
 - You can use "real-time captioning" application on your phone or computer or contact a captioning or sign-language service.



General Guidelines For Approaching And Dialogue With A Patient With A Hearing Disability

Reception Area

- Make sure there is written relevant information available for the patient.
- It is better to have written material ahead of time.
- A PA system is often used. In case this system does not enable any visual announcement on a screen it is not accessible for patients with hearing disabilities. The patient with a hearing disability will need to be called/instructed with a hand gesture to inform them of next steps and when it is their turn.
- Make sure that auditory aid systems (such as hearing loop system / induction loop) are switched on and are operating – make sure you use it upon request of a patient with hearing disabilities.
- Try to keep the surrounding quite or move to talk to the patient with hearing disability in a more quite place.



General Guidelines For Approaching And Dialogue With A Patient With A Hearing Disability

In the Treatment room / during medical procedures

- Remember the patient does not necessarily understand you (he might hear you are speaking but doesn't necessarily understand fully what you are saying) especially if you are wearing a mask.
- When communicating with the patient in the treatment room, it is recommended that you use writing as a means of communication. If possible, suggest the use a live captioning application or relay centres with captioning and sign-language.
- Make sure instructions and follow-up treatment is given in writing (via – sms, messaging, emails)
- Enable a sign language interpreter to enter the treatment room or enable the use of live captioning applications or relay centers as mentioned above



General Guidelines For Approaching And Dialogue With A Patient With A Hearing Disability

Remote Healthcare Guidelines

- Speak without a mask and look directly to the camera at a distance that will enable the patient looking at the screen to see your face and read your lips.
- If the communication system you are using enables sending written messages such as chats or captioning – use these options.
- If the speech of the patient is not clear – request that they or their caretaker write via chat.
- Additional options for communications are using the cell phone – email, WhatsApp, SMS etc
- If possible, in the communication system you are using, share your screen – make sure you mark the area in the screen that you would like the patient to focus on



Guidelines For Accessible Service For Patients With Mental, Cognitive, Communicative Disabilities (i.e. autism, speech disability)



These disabilities are usually not visible, during crisis people with these disabilities and the elderly tend to feel more stress, confusion, pressure, anxiety and added panic. Any deviation from their routine exacerbates these feelings and creates added **difficulty** to function

- How sensitivity, tolerance and patience when addressing the patient who seems stressed, confused, anxious or behaving in a strange way.
- Introduce yourself and try to calm the patient.
- Address the patient first and not the escort/care-givers
- Be aware that a person using protective gear can be seen as dangerous, unknown and intimidating
- Speak to the patient precisely and in short sentences
- If possible, offer patients with these disabilities to move ahead in the que (in Israel it is possible to ask for the "que-free pass")
- The patient can ask multiple and repetitive questions, answer with patience with confidence, care and give them a feeling of security

Guidelines For Accessible Service For Patients With Mental, Cognitive, Communicative Disabilities (i.e. autism, speech disability)



- Explain in a clear way to the patient what he/she needs to do, what will happen and how long it will take.
- It is recommended to prepare ahead written material with simple explanations and guidelines.
- Enable the patient to use a guide animal, or a calming object (i.e. comfort blanket, teddy bear) - something that calms him/her down.
- When transferring him/her to another service provider at the health-care facility try to help, accompany him/her, make an introduction and explain the situation/need.
- When the patient seems “lost”, offer help – speaking and accompanying will help.
- Offer the patient to get in touch with someone that can help - therapist or a family member and update them if needed.
- Avoid making assumptions, pressure him/her or finish his/her sentences.
- Remember your actions have significant and ongoing influence on people with these disabilities

Guidelines for an accessible service for a person with physical mobility/elderly

- Address the patient and not the care-giver/escort
- Every step of the process ask the patient if he needs help and how can you help him?
- Enable the patient to enter with a service dog
- Avoid touching accessible aids such as the wheelchair/walker etc.

Reception Area

- Use an accessible registration counter or an accessible room.
- Make sure that the accessible bathrooms are open and that they and the passageways are free of any objects and obstacles.
- Offer the patient to accompany/assist them throughout the process.
- If possible offer patients with these disabilities to move ahead in the queue.
- To a patient with a manual disability offer to help filling out documents.
- Enable the patient to be accompanied by a caregiver if needed.
- Common aids like wheelchairs, crutches, canes, guide-dog and others are part of the patient's personal space. Don't touch them, lean on them or move them without his/her permission.
- Offer and organize an accessible chair with handles for elderly patients and those with walking disability.



Guidelines for an accessible service for a person with physical mobility/elderly



In the Treatment room / during medical procedures

- Ask the patient where they prefer to be examined, for example in their wheelchair or to move to regular chair.
- If the process requires the patient to lay down make sure that the process is done in a room with an accessible bed. Such a bed can be adjusted to the accessible height needed.
- Offer the patient assistance when moving from chair to bed and vice-versa
- Enable the patient to have their care-giver or family member present and helping during the process if needed.
- If hospitalization is required – it is important to make sure the facility has an accessible room and assistive devices and permits the presence of the care-giver or family member
- If possible, before hospitalization, insure that patient arrives with necessary personal medical equipment needed, otherwise inform facility what is needed.

Guidelines for an accessible service for a person with physical mobility/elderly



Remote Healthcare Guidelines

- Remember that the patient might have difficulties operating the remote communication system if they are manually disabled or if he is lying in bed.
- Explain to the patient what you are doing before you begin each step.
- Even if the patient has an escort/care-giver – address the patient first.
- Ask the patient if they prefer receiving materials (follow-up treatment, summary of the visit etc.) by email or by regular mail.





During these challenging times please make sure to provide service which is -

Professional, accessible, patient and sensitive

If you encounter a problem that has to do with accessibility, which this guide doesn't answer, please contact the Healthcare Organizational Accessibility Coordinator





Access Israel

About Access Israel

Access Israel is the leading non-profit organization in Israel whose main mission is to promote accessibility and inclusion to improve the quality of life of people with all types of disabilities and the elderly.

Since 2016 Access Israel is a Special Advisor to UN-ECOSOC on accessibility and inclusion.

Access Israel's projects have been awarded as Best Practices in various international platforms.

Access Israel is very active globally encouraging sharing of information and expertise in order to make sure we promote the UN SDGs and the basic concept of leaving no one behind.

The contents of this Presentation were developed by Access Israel as a resource tool.

The contents of this Presentation do not represent or constitute full emergency protocols, but are provided to serve as a resource tool to assist you in working with, assisting and saving the lives of persons with disabilities and the elderly.

This resource presentation does not, and is not intended to, constitute legal advice; instead, all information, content, and materials available in this presentation is for informational purposes only.

SUSTAINABLE DEVELOPMENT GOALS

