

Caring for someone with a learning disability who is self-isolating/social distancing due to risks associated with Coronavirus

Unexpected change and loss at this time can be a traumatic experience for anyone, however individual's with a learning disability are particularly vulnerable. Some people may adapt quicker than others, however the uncertainty and ongoing change surrounding community support will impact on many individuals that rely on structure and routine.

Key principles when supporting someone to adjust and adapt to change is to promote safety, trust and predictability in their new routines.

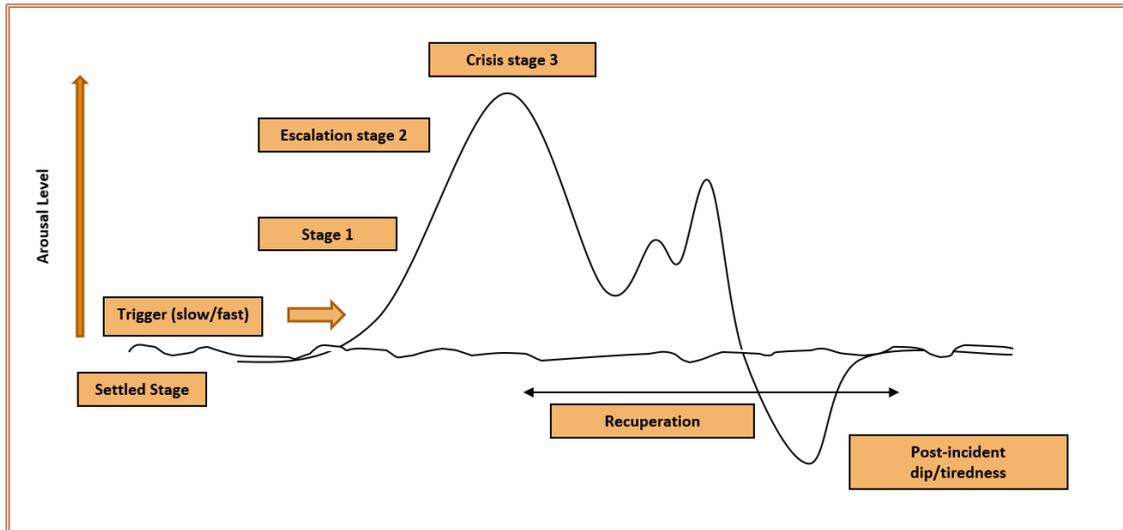
Enhancing wellbeing

- There are a number of accessible information guides on the internet to support people with a learning disability to understand the current situation (see www.sclid.co.uk). For others, this will be too much information and they may respond better to a short, concrete visual explanation, .e.g. essentially communicating "No day centre, home today".
- When there are multiple carers supporting one person, 'scripted responses' from everyone for key issues causing the person a level of distress, can support an individual to feel more secure e.g. "at home today" rather than variations each time.
- Develop anchor points within the person's day to support them to develop a predictable consistent routine. Natural anchor points within a day are mealtimes.
- Make a plan for what to do in between mealtimes. A person's day might be structured by a mixture of activities of daily living (e.g. morning and bedtime routines), domestic activities (cooking, cleaning), leisure (arts and crafts, books/magazines).
- If the person is not self-isolating (and health and levels of support allow), plan to go for a walk or incorporate some movement activities at home.
- If the person has a communication aid such as a visual timetable, use this to support them to understand what is happening in their day, or if they can read, write a list (e.g. 3-4 activities at a time). Others may only cope with 2 activities at a time, communicate (now and next) and some will only be able to predict what is happening next by showing them an object associated with a particular routine .e.g. colouring pens for colouring in, wooden spoon for baking.
- Some people have particular sensory needs that are difficult to meet whilst isolating at home. If you know what their needs are, try to build some sensory activities into their day such as movement and exercise at home, walking around the garden area, kicking a ball, hand massage, playing with materials/soft toys etc
- Be mindful of the conversations you are having around the person. They may not fully understand and picking up key words within a sentence may cause them further distress. This also applies to television programmes e.g. news

Responding to episodes of distress

Some people you support may need help to contain their distress. If they already have a reactive strategy developed by a professional, please refer to this.

Distress comes in many forms, and is different for everyone. When someone is showing signs of distress, they may show more subtle signs to start with which escalate over a period of time. This is a diagram of how distress and behaviours can escalate over time. There are general principles which you can apply when supporting an individual to de-escalate safely.



Stage 1 and 2 – is about creating a calm, low stimulating environment.

- Try to remain calm and model calm. This can be difficult to do when you are experiencing a level of stress yourself. Slow down your movements and speech
- Limit verbal communication with the individual. Do not try to reason with them, as their understanding will be significantly impaired.
- Say the person’s name to gain their attention before directing them to a low arousal/calming activity (something they enjoy that is not going to be too stimulating or exciting)
- Some people need space others like to be close to their carers. This is individual to the person you are supporting
- For people that can tolerate close contact, it can help to sit down with the person and write down their thoughts and worries. Even if you don’t have any answers for them, it shows you are taking time to listen to them.
- Some people may respond to consistent use of positive phrases such as “David is safe”, “David is okay”.
- Start to think about making the environment safe e.g. cooker off, ornaments/sharp objects tidied away, direct other service users or the person you are supporting to a different area of the house
- If the person is prescribed ‘as required’ medication, it is helpful to administer before the levels of distress become unmanageable. Please refer to person’s prn protocol/administer as per medical professional’s advice.

Stage 2 – 3

- As the person is escalating in distress and behaviours become more difficult to manage, it can help to give the person space to calm down

Stage 3 – is about establishing and maintaining safety

- Do not speak
- Keep yourself safe, give space. Monitor person's safety

Recovery/Recuperation/Post-incident

- It can take a long time to fully recover from high levels of arousal due to the stress hormones in the person's body
- Keep this period as low demand as possible to prevent the person from re-escalating
- The person may be tired and need to rest
- It can be unhelpful to 'debrief' the individual afterwards
- The person may seek a lot of reassurance

Self-care for carers

Caring for someone with a learning disability who is experiencing episodes of distress can have an impact on your own mental and physical wellbeing, particularly so at this current time, as you may also have a range of other stressors in your life e.g. worries about the wellbeing of your own/other family members, finances etc

There is some information on the NHS 24 website on tips for self-care at this difficult time.