

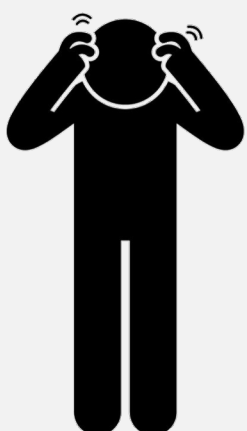


Emergency Medical Response for Individuals with Developmental Disabilities in Crisis

Maria Hannoush, BS, EMT-B, TCNJ Department of Public Health, NJLEND Public Health Fellow
John S. Palatucci, PhD, MPA, CPH, Rutgers Center for State Health Policy, The Boggs Center on Disability and Human Development

Background

- People with intellectual and developmental disabilities (IDDs) are more likely to encounter emergency responders
 - About **37%** of people with autism spectrum disorder (ASD) had **at least one** emergency department (ED) visit **in 12 months**¹
 - Children with IDD are **1.8 times more likely** to use ED and inpatient care²
 - Adolescents with ASD accessed ED services **4 times more often** than peers without ASD³
- Mental health crises are a leading cause of ED visits for people with ASD¹
 - Children with ASD are **9 times more likely** to visit the ED for psychiatric reasons⁴
- Poorer treatment, health outcomes, and satisfaction^{5,8} are seen among individuals with IDD
 - Children with ASD are **4 times more likely** to experience delays or disruptions to care plans⁶
 - People with IDD are **more likely** to^{1,7}:
 - Board in the ED or “cycle”
 - Board for longer durations in the ED
 - Be subjected to seclusion and restraints



Barriers to Care

- People with IDDs often experience specific challenges and barriers to care during crises, including^{1,9}:
 - Co-occurring conditions
 - Sensory sensitivities
 - Communication barriers or misunderstandings
- EMS professionals often receive **little or no training** on assessing and treating patients with IDDs, especially those experiencing a mental or behavioral health crisis¹⁰
 - A 1-hour training on DD awareness is mandatory in NJ but inconsistently enforced and online



Key Strategies for Responders¹¹⁻¹³

P Provider awareness	The number of individuals diagnosed with an IDD is increasing, with one of the most prevalent being ASD (1 in 31 children in the US)
R Recognize signs of IDD	E.g., individuals with ASD may engage in repetitive motions called “stimming”, or may not feel pain, cold, or heat in a typical manner
O Operate a sensory-friendly ambulance	Add a sensory kit to your ambulance, e.g. with noise cancelling headphones and hand fidgets
S Sensory needs	Reduce bright lights and flashing lights, limit sirens and noise, avoid unnecessary touch and ask first
O Operate as a team, with one main communicator	To avoid causing confusion or stress, have one main communicator with the patient
C Calm and confident communication	Use empathy, active listening, and supportive words; be mindful of using literal language; avoid wordiness; maintain neutral nonverbal communication
I Interests as tools	Consider how interests can be used as tools to build rapport or deescalate situations
A Advocate involvement	Talk to the patient’s caregiver or advocate to ensure an accurate medical history; support their role in calming distress
L Loop back with the person, family, and agencies	Consider how care could be improved if this patient was seen again; evaluate outcomes

Objectives

1. Increase awareness among first responders – specifically EMTs and Paramedics – of IDDs, and how to address the unique barriers to care in this population
2. Improve EMS provider skills and confidence, enabling and empowering them to de-escalate situations and respond effectively to people with IDD in crisis
3. Demystify relationships between EMS providers, individuals with IDD, and caregivers, to facilitate increased care satisfaction and improved outcomes

Methods

- Literature review on EMS response for individuals with IDDs experiencing mental or behavioral health crisis
 - Using PubMed and Google
- Attend NJ EMS Council District 20 Meeting
 - Includes 17 volunteer EMS squads
- Complete 3 existing topical CEU trainings
 - Including NJ state’s “Do No Harm” training

Next Steps

- Health education material development
 - Goal: meet “objectives”
- Key informant interviews
 - Goal 1: evaluate the health education materials
 - Goal 2: contribute to knowledge gained from the literature review
- **Audience**: EMS professionals, family members to people with IDD, people with IDD



References

