



ESSENTIAL KNOWLEDGE

MEADOW COURT

LEARNING DISABILITIES

COMMUNICATIONS



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18 Words that inform and signify-LEARNING DISABILITY

Definition of learning Disability

A learning disability affects the way a person understands information and how they communicate. This means they can have difficulty: understanding new or complex information, learning new skills and coping independently

LACK

EXPRESSION

AUTISM

READING

NOISE

INTROVERSION

NEEDS

GRAMMAR

DYSPRAXIA

INABILITY

SOMATIC

ASPERGERS

BEHAVIOUR

IMPAIRMENT

LEARNING

TENDANCIES

YIELDING



Learning Disability

Communication

Range and diversity of communication

1.1 Understand why it is important to find out an individual's preferred communication methods

Workers should adjust their verbal and non-verbal communication to meet the needs of the individuals. Consider the following when communicating with individuals who have a learning disability:

- Address the person by their preferred name;
- Speak slowly and don't shout;
- Use very straightforward language and don't use jargon;.
- Where appropriate the use of gestures, pictures, signs and symbols can help
- The need for extra time to facilitate understanding.
- Make sure that the individual understands what you have said before moving on to the next topic;
- Be aware that the patient may have additional hearing or visual impairments;
- Pay attention to eye contact, body language, facial expression and contact via touch.

1.2 Know how to use a range of communication methods appropriate to the individuals you support

The five good communication standards:

Standard 1: There is a detailed description of how best to communicate with individuals.

Standard 2: Services demonstrate how they support individuals with communication needs to be involved with decisions about their care and their services.

Standard 3: Staff value and use competently the best approaches to communication with each individual they support.

Standard 4: Services create opportunities, relationships and environments that make individuals want to communicate.

Standard 5: Individuals are supported to understand and express their needs in relation to their health and wellbeing.

The five good communication standards are intended as a practical resource to support families, carers, staff, professionals, providers and commissioners to make a difference to the lives of

individuals using specialist residential services. As a result of these standards, all stakeholders should be able to know:

- What good communication looks like.
- Whether good communication is happening.
- About useful resources to promote good communication.

Expressive language

Expressive language is the use of words to form sentences in order to communicate with other people. Difficulties in using expressive language to communicate can range from experiencing difficulties putting words in the right order or writing sentences, to being unable to form words in a meaningful way that others can understand. When someone is unable to make use of expressive language, this can lead to frustration at not being able to explain themselves, difficulty interacting with other people, and difficulty expressing their needs.

Receptive language

Receptive language is the understanding of expressive language. The use of receptive language is not dependent on being able to use expressive language. Some people may not be able to form words and sentences themselves, but are able to understand expressive language when it is used by others.

This can range from being able to easily understand what others say, to being able to only understand key words and phrases, and then only when they are spoken clearly and slowly. Everyone is different; some people may be able to use both receptive and expressive language to different degrees, whilst others may be able to use one or neither.

1.3 Understand what is meant by easy read information and the styles and resources available

The Office for Disability Issues (ODI) has identified some guiding principles that government departments should apply to their work to improve services and information for disabled people. These are a good starting point for anyone commissioning information for people with learning disabilities.

These guiding principles are as follows:

1. Ensure that people with learning disabilities are involved from the start.
2. Provide information through a range of channels and formats.
3. Ensure that your information meets users' needs.
4. Clearly signpost to other services.
5. Always define responsibility for information provision.

Disability Equality Duty

Public authorities should also take into consideration their Disability Equality Duty as set out in the Disability Discrimination Act 2005. For example, public authorities now have a proactive duty to promote equality and eliminate discrimination, even where that involves treating disabled people more favourably than non-disabled people. In many cases this will involve ensuring that disabled people have equal access to information.

Planning questions

Before you decide to commission a supplier to create Easy Read information, you need to answer some questions. These will help you to go about the commissioning process.

Why are you producing Easy Read information?

- Is there a document you want to make Easy Read?
- Do you want to tell a group of people with learning disabilities something?
- Who exactly is the Easy Read document for?
- Is the information for people coming to a meeting who all know each other, or is it information for a big group of people across the country?
- Do you already know the communication needs of the people it is aimed at?
- What is the Easy Read document for?
- Does it explain an idea, tell someone something new or help someone to think about something?
- How will people with learning disabilities use the information?
- Will they read it once or will they keep it for a long time?

If you are creating an alternative format of a document, you need to decide whether producing a document in Easy Read is the best way of communicating that information to people with learning disabilities.

Checks should include an understanding of the 'social model' of disability and an appreciation of the implications of the Disability Discrimination Act 2005.

Working with people with learning disabilities

It is very important to ask an organisation to set out how they work with people with learning disabilities. Key questions should include:

- How are people with learning disabilities involved in the organisation?
- How are people with learning disabilities involved in creating the Easy Read information?
- Are people with learning disabilities paid a decent wage for their involvement in the process?

1.4 Know how to find information and resources to enable you to communicate with individuals you support

- **Publications and documents:** from campaigning packs to annual reports, guides for parents and carers and advice for healthcare professionals.
- **Factsheets:** produced by various Learning Disability organisations, factsheets provide a practical introduction to a variety of topics.
- **Easy read factsheets:** easy read factsheets available on a range of topics, including, bullying, community care assessments, dating and health action plans.
- **Audio:** there are a range of audio content available
- **Radio,** such as 'Does he take sugar; programme
- **TV,** various documentaries regarding Learning Disability
- **Internet,** a vast amount of information and resources can be found

1.5 Understand how communication can be abusive or unacceptable

Abusive and unacceptable communication includes:

Neglect

A primary function of a positive relationship is to provide companionship and to meet each other's needs. When other activities, interests or preoccupations interfere with our availability, we can wind up short-changing the individual. Making adjustments in how we spend our time is the first step in correcting this problem. Treat the individual as the important person they are by spending enough time and not ignoring them, or negating their being, and maintaining the connection.

2. Deprivation (not being attentive, expressive, affectionate, supportive, caring, loving):

Being there physically is not enough. We cannot expect the individual to thrive if we withdraw emotionally for extended periods of time. In order to be fully present, we must be aware of the individual and be willing to show feeling both verbally and non-verbally. Expressing care, support love through affection and caring behaviours are crucial to keeping a relationship strong and vibrant. Small regular doses of contact will usually suffice, and the most important times of day to communicate positively are from waking, and throughout a long day, and before going to sleep.

3. Dishonesty & Betrayal (stealing, lying):

Most people are aware that the foundation of any relationship is T-R-U-S-T. Trust is more important than most other aspects, whether emotional, financial, sexual etc. Stealing and lying breaks down the basis for a relationship, which results in abuse. A problem of this nature is serious, and resolving it must be a top priority and needs immediate action.

4. Attacking (blaming, abuse – physical, emotional, sexual):

Aggressive communication is simply unacceptable, especially if the abuse is getting physical. Physical or sexual abuse are serious abuses, and should be reported urgently. Even if the help is sought and progress is made, the risk of recurrence remains high, so in most cases, the abused

individual should be sheltered from the relationship. Returning serves to reinforce the abusive behaviour, leading to increased severity and frequency of subsequent abuse. Verbally blaming, accusing, and insulting the individual are extreme forms of destructiveness.

5. Scapegoating (taking your anger or frustration out on the individual):

We all know that it's not right to kick the dog after a hard day at work, so why do it to a vulnerable individual? Being held responsible for things that are out of our control is the most stressful of conditions, and that may be done to the individual when they are scapegoated.

6. Negativism (nit-picking, nagging, criticizing):

In order to have a safe and non-abusive relationship, the positives must outweigh the negatives by a large percentage. If negativity is creeping is observed by the carer to the individual, it is like water seeping into walls, eventually weakening the structure. People usually feel good around others who are upbeat and positive, as well as those who help them to feel good about themselves. Bringing a negative spirit to the individual crowds out the positive. However,

7. Gossiping (telling family or friends about your problems but not addressing them with the individual):

If someone talks about the individual's problems with friends or relatives without the permission of the individual, that amounts to gossip. Gossip is not a productive way to handle problems, and can result in additional problems.

8. Controlling ("my way" or else, perfectionism, trying to change your partner, possessiveness):

Wanting things to be a certain way and having preferences are completely natural and even healthy. However, when this tendency becomes extreme and starts to encroach on the individual's rights, needs and desires of others, it can cause major havoc. Freedom of will and self-determination are basic needs, and when these are being threatened, negative reactions may include anger, resentment, and/or rebellion. If the need to control is a problem, the worker should identify the motivations behind it and work towards dealing with those issues.

9. Putting Yourself First (self-centredness, selfishness, entitlement):

It's not "all about me," Letting one's self interests take priority in an unbalanced way can be toxic to the individual. The abuser usually winds up feeling deprived, resentful, and unimportant. Furthermore, the more self-involved they are, the more they take the individual for granted, the less appreciation of the individual, and the more alone and abandoned the individual becomes.

10. Putting Yourself Last (self-neglect, passivity, self-sacrifice):

Martyrs are seldom happy. More often, they are angry, bitter, resentful, depressed and burned out. This is not to say that the carer should not consider others and be thoughtful in meeting the individual's needs. But having a healthy relationship involves factoring the carers own needs and desires into the equation.

What was wrong can often be made right:

Problems can be used as lessons; we can choose to learn from them, and find a better way. Each of these issues is related to one or more incidents, which are maladaptive patterns of thinking and feeling that are outwardly expressed in negative coping behaviours. When the issues are understood, the issues can be resolved.

2. Effective Communication

2.1 Understand the importance of communicating in a way which is appropriate and respectful to the individuals you support

When you communicate well with the individual, it helps eliminate misunderstandings and can encourage a healthy and peaceful social environment. Efficient communication with the individual will also let you get work done quickly and professionally.

The moment you get the lines of communication open with the individual, the process of carrying out tasks and duties will most likely go by smoothly.

Ways to Communicate Effectively with the individual

1. Open Meeting

It is easier to communicate your feelings and how you feel to the individual in mutual settings. In this kind of situation, they will not only hear what you are saying, they will also see and feel it. This approach still remains one of the best approaches to communicate effectively.

2. Emails

In some settings, communication via email remains potent. It will enable you to pass messages to the individual without having to be at the same venue when there needs to be questions asked or things done.

3. One on One

Often, individuals understand better when they are taken aside and talk to them on a one-on-one basis. Ensuring eye contact with them to enable the message be delivered and understood.

4. Use Easy Read

Some individuals grasp messages easily when pictures and sounds are involved. Using Easy Read factsheets and documents help the individual understand the issues involved.

5. Communication Training

The carer may need some communication training to enable communicating certain information to you're the individual and/or team members. Terminology and processes are enhanced when the carer knows what is going on and what to expect

6. Display Confidence and Seriousness

Bothe workers and carers must ensure that they display confidence and seriousness to ensure that the input will not be mistaken or misunderstood.. When team members notice any uncertainty and lack of seriousness when you're communicating with them, they may treat the information with disdain or disregard.

7. Use Simple Words

The truth is that everybody cannot be on same page when it comes to vocabulary. Therefore, to be effective in communications with the individual, use words that can be easily understood. When ambiguous words are used, it can be misunderstood and/or waste precious time having to explain what was stated.

8. Use Visuals

Place visuals at strategic positions around the setting. The individual should not just hear the message, they should also see it. This gives room for better comprehension.

9. Listen to the appropriate professional

Communication is intended to be a two way street. Discussion whether from the carer, individual worker to the appropriate professional is very important. The appropriate professional should encourage others to speak to them to clarify or to pass on relevant information and seek feedback.

10. Use Body Language

Body language will pass a message without the person really noticing, or can be used to amplify a meaning. Using the art of using body language when communicating can inform other of the context of what is being said, such as stand/sit up straight, use smiles, handshakes and eye contact.

11. Use The Appropriate Tone of Voice

One word can mean a different thing when said in a different tone of voice. Making sure the appropriate tone of voice to communicate a message so that you won't be misunderstood and discourage or demotivate people or cause them to shut down completely out of fear.

12. Create a Receptive Atmosphere

To effectively communicate, it is best to create a receptive atmosphere. Avoid a tense environment because when communication in an overly intense manner, the messages might not be well understood or retained.

15. Be Humorous

Using appropriate friendly remarks and sometimes jokes when communicating will help pass your message along in a more relaxed way. This method of communication has been proven to be a highly effective way of dousing tension. When the atmosphere is unfriendly and intense, being humorous can ease the situation.

16. Be Articulate

Communication is indeed a skill that must be learned by all. Being articulate in communication to makes it easier for people to understand your message.

17. Avoid Mumbling

People should be able to hear you clearly. When communicating, it is best to speak clearly and not mumble words. When mumbled words happen, or speaking too quickly, it may be that people assume that there is no clarity on the subject. But the truth is, they might not be. It also shows a lack of confidence on the person's part.

18. Encourage Feedback

Don't just talk and walk away. Give room for feedback so that others can measure the effectiveness of the style of communication. It will also afford the speaker the privilege of knowing if the message was well understood.

19. Gesticulate

Use of hands may demonstrate a message. Making hand motions and signals to establish the seriousness of the subject matter when communicating.. This shows that the speaker understands what they are trying to relay. Body movement must not become too exaggerated and intense.

20. Be Appreciative

After every communication session, via whatever means being used, always remember to thank the listeners for their time. It costs nothing and it's a simple courtesy.. When communication is hampered, it can side-track the entire effort. Using communication appropriately and creating ground rules to keep everyone abreast of situations, which helps avoid confusion and ensure the completion issues involved.

2.2 Understand how to create opportunities for the individuals you support to communicate effectively

In order to create opportunities to support communications these principles apply:

There is a need to identify the different reasons people communicate, and explain how communication affects relationships in the work setting. Be able to meet the communication and language needs, wishes and preferences of individuals and demonstrate how to establish the communication and language needs, wishes and preferences of individuals.

There is a need to describe the factors to consider when promoting effective communication, demonstrate a range of communication methods and styles to meet individual needs and show how to respond to an individual's reactions when communicating.

There is a need to explain how people from different backgrounds may use and/or interpret communication methods in different ways and identify barriers to effective communication, as

well as being able to demonstrate ways to overcome barriers to communication and show the strategies that can be used to clarify misunderstandings

There is a need to explain how to access extra support or services to enable individuals to communicate effectively, and explain the meaning of the term confidentiality, whilst demonstrating ways to maintain confidentiality in day to day communication and describing the potential tension between maintaining an individual's confidentiality and disclosing concern

2.3 Understand the importance of consistency within communication by everyone supporting an individual

Consistency – we must be consistent in the way we communicate with individuals. It is important to all use the same form of communication when communicating with certain individuals.

Consistency encompasses keeping clarity and consistency in what we think, say and do, and everything remains constant to ensure this is so.

How it works

The same thought, word and deed

If someone states that X is a nice person and then act unpleasantly towards others, then they are breaking the law of consistency. This will, of course, not endear them to other people who might socially ostracise them for their transgressions.

This can have strange effects, for example where people who bet on horses increase their estimation of a horse's chance of winning after they have placed bet on it. It is also an important principle for persuasion.

Social pressure

When words and actions disagree, people will assume that a person's intentions are more closely aligned with what they do rather than what they say. An effect of this is that when X acts inconsistently with their declarations, other people will see X as being untrustworthy, and hence will at best not believe X in future, and at worst will reject X as worthy of their attention.

This creates significant external pressures that will cause individuals to be careful about aligning our words and our actions.

Self-image

We judge ourselves in the same way that we judge others. In fact our judgment is more harsh, as we intimately know our intent, beliefs and value behind our thoughts and actions. When the map and the territory differ, we thus need to change something so they line up again.

Rationalisation

When our actions differ from our beliefs or values, we need to explain this to ourselves. As we do not really want to change our beliefs or values, our first move is to seek external reasons for the different.

For example, if we have hurt someone, rather than accept ourselves as being unkind, we will rationalize our behaviour. Thus the enemies are de-humanised and we tell ourselves that our victims were asking for the punishments we meted out to them.

Another common rationalization is to claim that we were forced to act as we did. This is one of the uses of having someone else as an authority we can blame.

Inner change

If there is insufficient evidence to give a rational external explanation, we are forced to change on the inside. We can thus be led to change even deeply held beliefs and values.

This is why coercion and many persuasion techniques either fail or fail to make permanent changes to the target person. If you want them to *really* change, then you must let them do it 'all by themselves.'

Feeling it

The effect of inconsistency is to create feelings of tension. This then provides the motivating force that propels people into action. The greater the inconsistency, the greater the tension and the greater the motivation.

Other words that describe feelings associated with inconsistency include: confusion, uncertainty, dissonance, denial and irritation. On the other hand, consistency feels calm, smooth, right, valid and even.

So what

Get people to speak and act outside their normal belief boundaries, preferably in a public way. Then encourages them to change their beliefs to be consistent with their actions. This is how Brainwashing works.

Make it easy for them to do. Charities who get you to sign petitions know that petitions seldom have a significant effect. The real effect is on you, as you now will have to strengthen your belief in the charity's cause in order to support your putting your name (a significant symbol of your identity) on the line.

When getting them to act, do it such that they break their beliefs a little bit at a time, otherwise they will rationalise their actions, blaming the situation (or you!).

2.4 Understand what is meant by 'active listening'

Active listening is a communication technique used in counselling, training and conflict resolution, which requires the listener to feed back what they hear to the speaker, by way of re-stating or paraphrasing what they have heard in their own words, to confirm what they have heard and moreover, to confirm the understanding of both parties.

Active, effective listening is a habit, as well as the foundation of effective communication. Active listening intentionally focuses on who you are listening to, whether in a group or one-on-one , in

order to understand what he or she is saying. As the listener, you should then be able to repeat back in your own words what they have said to their satisfaction. This does not mean you agree with, but rather understand, what they are saying.

Purpose

When interacting, people often are not listening attentively to one another. They may be distracted, thinking about other things, or thinking about what they are going to say next, (the latter case is particularly true in conflict situations or disagreements).

Active listening is a structured way of listening and responding to others. It focuses attention on the speaker. Suspending one's own frame of reference and suspending judgment, are important in order to fully attend to the speaker.

Tactics

It is important to observe the other person's behaviour and body language. Having heard, the listener may then paraphrase the speaker's words. It is important to note that the listener is not necessarily agreeing with the speaker—simply stating what was said. In emotionally charged communications, the listener may listen for feelings. Thus, rather than merely repeating what the speaker has said, the active listener might describe the underlying emotion (“you seem to feel angry” or “you seem to feel frustrated, is that because...?”). Individuals in conflict often contradict one another. This has the effect of denying the validity of the other person's position. This can make one defensive, and they may either lash out, or withdraw. On the other hand, if one finds that the other partly understands, an atmosphere of cooperation can be created. This increases the possibility of collaborating and resolving the conflict.

Use

Active listening is used in a wide variety of situations, including tutoring, medical workers talking to patients, HIV counselling, helping suicidal persons, management, counselling and journalistic settings. In groups it may aid in reaching consensus. It may also be used in casual conversation to build understanding, though this can be interpreted as condescending. The benefits of active listening include getting people to open up, avoiding misunderstandings, resolving conflict and building trust. In a medical context, benefits may include increased patient satisfaction,[2] improving cross-cultural communication, improved outcomes, or decreased litigation.

2.5 Know what active listening techniques are effective with and preferred by the individuals you support

Active Listening makes our loved ones feel worthy, appreciated, interesting, and respected. Ordinary conversations emerge on a deeper level, as do our relationships. When we listen, we foster the skill in others by acting as a model for positive and effective communication.

In our relationships, greater communication brings greater intimacy. Parents listening to their kids helps build their self-esteem. In the business world, listening saves time and money by preventing misunderstandings. And we always learn more when we listen than when we talk.

Listening skills fuel our social, emotional and professional success, and studies prove that listening is a skill we can learn.

The Technique. Active listening is really an extension of the Golden Rule. To know how to listen to someone else, think about how you would want to be listened to.

While the ideas are largely intuitive, it might take some practice to develop (or re-develop) the skills. Here's what good listeners know — and you should, too:

- 1. Face the speaker.** Sit up straight or lean forward slightly to show your attentiveness through body language.
- 2. Maintain eye contact,** to the degree that you all remain comfortable.
- 3. Minimize external distractions.** Turn off the TV. Put down your book or magazine, and ask the speaker and other listeners to do the same.
- 4. Respond appropriately** to show that you understand. Murmur (“uh-huh” and “um-hmm”) and nod. Raise your eyebrows. Say words such as “Really,” “Interesting,” as well as more direct prompts: “What did you do then?” and “What did she say?”
- 5. Focus solely on what the speaker is saying.** Try not to think about what you are going to say next. The conversation will follow a logical flow after the speaker makes her point.
- 6. Minimise internal distractions.** If your own thoughts keep horning in, simply let them go and continuously re-focus your attention on the speaker, much as you would during meditation.
- 7. Keep an open mind.** Wait until the speaker is finished before deciding that you disagree. Try not to make assumptions about what the speaker is thinking.
- 8. Avoid letting the speaker know how you handled a similar situation.** Unless they specifically ask for advice, assume they just need to talk it out.

9. Even if the speaker is launching a complaint against you, wait until they finish to defend yourself. The speaker will feel as though their point had been made. They won't feel the need to repeat it, and you'll know the whole argument before you respond. Research shows that, on average, we can hear four times faster than we can talk, so we have the ability to sort ideas as they come in...and be ready for more.

10. Engage yourself. Ask questions for clarification, but, once again, wait until the speaker has finished. That way, you won't interrupt their train of thought. After you ask questions, paraphrase their point to make sure you didn't misunderstand. Start with: "So you're saying..."

As you work on developing your listening skills, you may feel a bit panicky when there is a natural pause in the conversation. What should you say next? Learn to settle into the silence and use it to better understand all points of view.

Ironically, as your listening skills improve, so will your aptitude for conversation. A friend of my partner once complimented me on my conversational skills. I hadn't said more than four words, but I had listened to him for 25 minutes.

2.6 Understand the additional barriers faced by people with communication differences

Communicating with people with a learning disability

Working with someone with a learning disability may challenge your idea of what communication is, and how you make yourself understood.

It may make you think about your tone of voice and your body language as well as the words you use, and remind you that communication is not just about talking but also about listening.

This information is designed to provide a brief introduction to communication, and the problems faced by someone with a learning disability. It also contains tips on how you can be a better communicator, and how you can help someone with a learning disability to get their message across.

Communication is really important because that's the way of expressing yourself. If we don't communicate clearly with each other, there's no point in communicating at all.

What is communication?

Everyone can communicate and everyone is an individual in the way they communicate.

You may be surprised to know that we get most of our information across through our body language. The way people communicate is made up of:

- **Body language = 55%**
- **Tone of voice = 38%**
- **Words = 7%**

Having a communication difficulty

The problems faced by people with a communication difficulty.

- not being able to read this
- not being able to tell someone else about it
- not being able to find the words you wanted to say
- opening your mouth and no sound coming out
- words coming out jumbled up
- not getting the sounds right
- words getting stuck, someone jumping in, saying words for you
- people assuming what you want, without checking with you
- not hearing the questions
- not being able to see, or not being able to understand, the signs and symbols around you
- not understanding the words, phrases or expressions
- not being able to write down your ideas
- being unable to join a conversation
- people ignoring what you are trying to say, feeling embarrassed, and moving away
- people not waiting long enough for you to respond in some way, assuming you have nothing to say, and moving away

Being a good communication partner

Our advice on how to become a good communication partner for people with a learning disability.

Making communication work

Whatever way you are trying to communicate with someone with a learning disability, there are some simple rules you can follow for good communication.

It is important to always use accessible language, and to avoid jargon or long words that might be hard to understand. You should also take into account any physical disabilities the person may have that could make communication difficult for them.

- **In person:** many people with a learning disability have stated that the best way to communicate with them is face-to-face and one-to-one.
- **In writing:** in writing, it is a good idea to use bigger text and bullet points, and to keep writing at a minimum of 16 point. It is also important to remember that too much colour can make reading harder for some people.
- **On the phone:** the best way to talk to someone with a learning disability on the phone is slowly and clearly, using easily understandable words.

Top tips for communication

Our list of top tips to aid communication with people with a communication difficulty.

Find a good place to communicate in – somewhere quiet without distractions. If you are talking to a large group be aware that some people may find this difficult.

Ask open questions – questions that don't have a simple yes or no answer.

Check with the person that you understand what they are saying – "the TV isn't working? Is that right?"

If the person wants to take you to show you something, go with them.

Watch the person – they may tell you things by their body language and facial expressions.

Learn from experience – you will need to be more observant and don't feel awkward about asking parents or carers for their help.

Try drawing – even if your drawing is not great it might still be helpful.

Take your time, don't rush your communication.

Use gestures and facial expressions. If you are asking if someone is unhappy make your facial expression unhappy to reinforce what you are saying.

Be aware that some people find it easier to use real objects to communicate but photos and pictures can really help too.

Remember, all communication is meaningful, but you may need to work harder to understand.

3. The link between poor communication and behaviour that challenges

3.1 Understand ways to promote positive relationships through communication

Some individuals are recognised very early on as being likely to have a learning disability because they have the signs of a particular syndrome (such as Down's Syndrome) which is known to affect global development and learning skills.

As learning disability persists throughout a person's life, communication problems may also occur for adults. These can be very significant in certain scenarios such as medical treatment, crime (either as perpetrator or victim), and social situations. In relationships, it can be difficult in

working with adults with learning disability aim to promote communication skills for independence, choice, inclusion and rights.

Some characteristics of learning disability: that affect relationships are:

- a genetic or developmental problem, which may occur with additional health and/or sensory problems
- significantly delayed milestones in early development
- short attention span and weak short-term auditory memory skills
- slow speech and language development
- slow cognitive development and a need for structured teaching
- difficulty understanding and learning new skills
- a reduced ability to cope independently (impaired social functioning)

Speech and language are issues that are often involved in relationships with someone with a learning disability. Relationships in family terms, may begin well before school entry and continue into the school years. The children may attend mainstream nurseries and schools, or specialist units. Some will have a Statement of Special Educational Needs. The following may form part of the speech and language that affect relationships and affect individuals with learning disability:

- eye-contact, early listening and attention skills
- play and activity skills
- alternative or additional ways of communicating (e.g. Makaton signing, pictures, or symbol support for the written word)
- work on speech sounds
- understanding and using language
- work on early concepts and cognitive development
- management of eating and drinking difficulties

Some points that may affect relationships:

- The carer's knowledge in the area of learning disability.
- Some carer's will have undertaken special training courses e.g. Makaton signing, using Symbol resources, special teaching techniques for use with children with learning disabilities, or feeding management.)
- How much experience the carer has with learning disability.
- Where the carer is involved with assessment and lifelong support.

FRIENDSHIPS

One of the main concerns for any carer is that the individual will be able to make friends and get fully involved in activities both inside and outside of the home.

However, many worry that the individual will be bullied or left out because of their learning disability.

Spotting the signs of bullying can be difficult, so it is important to keep talking to the individual about their time at school and how they are getting on. You might want to take some time to explain to them what bullying is, why it is wrong, and who they can speak to if they ever have any problems.

It is also a good idea to keep in close contact with their friends, support workers and acquaintances, so any problems can be picked up early and dealt with straight away.

SEX AND RELATIONSHIPS

It can be very hard to know how to or when to discuss and advise individuals how and why they may get involved in an adult relationship, at any level – and if the individual has a learning disability, there may be special concern about how they will cope with the emotional and physical aspects of a romantic relationship.

If the individual meets someone and decides to have a relationship, there are many issues needed to be discussed with them, such as sexual health and emotional well-being, contraception and pregnancy.

However, even with support, many people with a learning disability will face obstacles in their relationships. Things other couples take for granted, such as going out on dates, spending time alone and living together may be difficult, therefore individuals may require extra help from the people that support them.

MARRIAGE AND CHILDREN

Someone with a learning disability who has met someone they care about, or been involved in a long-term relationship, may want to consider getting married and having a family at some stage in their life.

Legally, someone with a learning disability has the same rights as anyone else to live with someone and get married, provided they are over 16, able to give their consent and understand what marriage is.

Married life can bring with it lots of happiness, companionship and shared experiences. However, it can also bring a lot of pressure for someone with a learning disability. Couples may need extra support if they decide to live together, and getting married may have a financial impact on the benefits they receive.

They may also need extra emotional support and advice, particularly to do with issues surrounding contraception and pregnancy, and starting a family. Many people with a learning disability are capable of raising children and becoming good parents, providing they receive the right help and advice.

3.2 Understand ways the individuals you support may communicate distress

Some young people will show others their distress by changes in their behaviour, their communication or their reactions to people and events. These behaviours are very similar to those exhibited by anyone with emotional problems, not just people with a learning disability.

Identifying distress in individuals with learning disabilities

These are some of the things that might happen:

- changes in eating habits
- shouting, crying or throwing things
- staying in bed, and not wanting to get up and do the usual things
- refusing to go to the usual places, like school or college
- going back to ways of behaving that were typical of the person when younger (e.g. bed-wetting).

These are the common ways in which emotional distress can show itself:

Depression

- loss of interest in usual activities
- feeling irritable and impatient
- lack of energy
- consistently feeling 'low'
- changes in sleep pattern
- not wanting to communicate with others

Anxiety

- needing extra reassurance
- being clingy to people they feel safe with
- having pain or discomfort – often caused by muscular tension
- feeling sick or having an upset stomach
- being restless
- difficulty in concentrating
- sleep disturbance

These are some of the more common symptoms if a person is experiencing severe distress:

- Unusual Symptoms and Short Fuses
- Unexplained physical symptoms.
- Difficulty managing anger or controlling your temper.
- Obsessive, Tired, or Forgetful?
- Chronic, tiredness, and lack of energy.
- Memory problems. "
- Social Activity, Sex, and Mood
- Shunning social activity
- Sexual dysfunction
- Mood swings and erratic behaviour noticed by more than one person

3.3 Know how to respond to the individuals you support if they are distressed

Below are generic statements, but can help minimise distress:

Not all stress can be avoided, and it's not healthy to avoid a situation that needs to be addressed. You may be surprised, however, by the number of stressors in your life that you can eliminate.

- Learn how to say "no" .
- Avoid people who stress you out –
- Take control of your environment –
- Avoid hot-button topics –.

If you can't avoid a stressful situation, try to alter it. Figure out what you can do to change things so the problem doesn't present itself in the future. Often, this involves changing the way you communicate and operate in your daily life.

- Express your feelings instead of bottling them up.
- Be willing to compromise. Be more assertive. Manage your time better.

If you can't change the stressor, change yourself. You can adapt to stressful situations and regain your sense of control by changing your expectations and attitude.

- Reframe problems.
- Look at the big picture.

- Adjust your standards.
- Focus on the positive.

Some sources of stress are unavoidable. You can't prevent or change stressors such as the death of a loved one, a serious illness, or a national recession. In such cases, the best way to cope with stress is to accept things as they are. Acceptance may be difficult, but in the long run, it's easier than railing against a situation you can't change.

- Don't try to control the uncontrollable.
- Look for the upside.
- Share your feelings.
- Learn to forgive.

Don't get so caught up in the hustle and bustle of life that you forget to take care of your own needs. Nurturing yourself is a necessity, not a luxury.

- Set aside relaxation time.
- Connect with others.
- Do something you enjoy every day.
- Keep your sense of humour.
- Exercise regularly.
- Eat a healthy diet.
- Reduce caffeine and sugar.
- Avoid alcohol, cigarettes, and drugs.
- Get enough sleep.

Controlling emotional distress is a process for learning coping mechanisms, including how to deal with oneself, others and relationships, and work in an effective manner. In dealing with oneself, it helps in recognising our emotions and learning how to manage those feelings. In dealing with others, and helps with developing sympathy and empathy for others, and maintaining positive relationships. It also focuses on dealing with a variety of situations in a constructive and ethical manner.

1. "Recognising emotions in self and others"
2. "Regulating and managing strong emotions (positive and negative)"
3. "Recognising strengths and areas of need"
4. "Listening and communicating accurately and clearly"
5. "Taking others' perspectives and sensing their emotions"
6. "Respecting others and self and appreciating differences"
7. "Identifying problems correctly"
8. "Setting positive and realistic goals"

9. "Problem solving, decision making, and planning"
10. "Approaching others and building positive relationships"
11. "Resisting negative peer pressure"
12. "Cooperating, negotiating, and managing conflict non-violently"
13. "Working effectively in groups"
14. "Help-seeking and help-giving"
15. "Showing ethical and social responsibility"

4. Outside factors affecting communication

4.1 Understand how the setting and social context can affect communication

The setting incorporates the following:

The exchange of information (a message) between two or more people. These are many different models of the interpersonal communication process, but here are some of the key elements:

- the sender or communicator (the person who initiates a message)
- the receiver or interpreter (the person to whom a message is directed)
- the message (the verbal and/or nonverbal content that must be encoded by the sender and decoded by the receiver)
- the channel (the medium by which the message is delivered and received)
- the context (the setting and situation in which communication takes place)
- noise (anything that interferes with the accurate expression or reception of a message)
- What Is Communication
- Punctuation
- Definition
- Mass Media Communication
- Process of Communication
- feedback (a response from the receiver indicating whether a message has been received in its intended form)

Effective communication takes place when a sender's message is fully understood by the receiver.

A conversation in which one person (the interviewer) elicits information from another person (the subject or interviewee). A transcript or account of such a conversation is also called an interview.

SETTING AND CONTEXT

Different situations may require a variety of strategies in order to achieve the required outcome. Most situations may be really uncomplicated and relatively simple to carry out, the individual and Communicator have an agreed time, date and venue to meet and a conversation takes place.

It may be that the session is not too formal, with tea and biscuits as a sign of a relaxed interview.

It may be necessary to include a box of Kleenex if an issue raised causes an emotional reaction. Occasionally, conversations are not that easy, and as such tension rises as the need to resolve a situation becomes urgent. It may be necessary to take statements from themselves and/or other persons and / or the families. This may take time due to the individual being off stressed, depressed, anxious and/or sick.

The full weight of information must be in available or able to be discussed before the session commences. The date and time of meeting may be decided and it may be made well in advance, in a written letter, setting out the situation, the issues, the individual's rights and any other relevant information, together with the date to meet.

There may be an air of tension and concern. Generally it is better to resolve issues as soon as possible, and gain an agreed solution. A positive and negative approach may be required in some situations (Carrot and Stick). The control of the interview must remain with the individual and guided by the communicator, otherwise the authority of what is to be said and done will be diminished, and the resolution of the issue may not take place.

4.2 Understand why effective verbal and written communication between those supporting an individual is essential

UNDERSTANDING

Effective communication can be a problem in environment, but when the individuals have limited or no language, the challenges increase greatly.

For workers with people with a understanding and comprehension issues, this is a continuous problem. Some use picture or symbol communication, while staff in others find objects of reference and gesturing are the only way to get needs met.

There are several approaches that can be taken, by using creative approaches to communication, and learning non-verbal communication skills which can come across through all the arts, you can help people to increase their confidence, develop relationships and social interactions, and also to communicate their needs and desires through non-verbal means.'

By using a range of creative techniques, both parties can develop their social interactions and communication.

It can be empowering for those people without speech to be in control, or leading possibly for the first time in a long while.'

What do we mean by creative communication?

Using music, drama, movement, sensory exploration, visual art or new media, carers can encourage people to interact and communicate non-verbally. This type of work is also beneficial to people with speech in working more effectively as a team or to communicate more expressively.

Becoming comfortable with non-verbal interactions

For many staff, quiet and still spaces are daunting and there can be a tendency to fill the space with activity. Some suggestions for the following activities to start off the process:

Movement

- a) Put on a relaxing sound, alter the lighting, make sure that you won't be disturbed.
- b) Use different textures, sizes and colours of cloth.
- c) Allow the client to begin movement
- d) Minor their actions.
- e) Develop this idea by complementing it.
- f) Develop this movement interaction until the client is ready to make a change.
- g) Offer something different to try to stimulate the client's attention.
- h) Try changing the type of music playing.
- i) When the focus is waning, have a closing gesture such as touching hands or fingers to signify that this section is finished.

Explore the reaction of the client to the music at different times of the day. What you like when you are feeling upbeat is very different to what you like when you are feeling low, and this is true of everyone.

Drama

- a) Bring a story alive using props and objects. If you are working with adults, it is important to be aware of age appropriateness.

b) Choose stories from people's own experience, tales from around the world, or make them up to cover pertinent issues.

c) Break the story into five or six key stages.

WRITTEN COMMUNICATION

Easy read turns information into cut-down, plain English with helpful illustrations. It's designed for people with learning difficulties or those who struggle to read.

The concept was originally developed as an accessible way of getting need-to-know public information to people with learning difficulties. However, easy read is becoming more and more popular and can now be found in leaflets on all sorts of topics and as an alternative to the

There are people engaging with current affairs for the first time after reading Easy News, and of others having conversations with their families about the world..

It is generally acknowledged that the best way to make an easy-read document is with help from people with learning difficulties themselves, Easy News are better at using short words than she is – "particularly non-readers" – who can cut through jargon and find fewer words to use instead.

4.3 Know practical ways to develop and maintain effective communication with those supporting an individual

THINKING ABOUT PEOPLE

The person at the centre

- Good communication depends on
 - How well you can hear
 - How well you can see
 - How comfortable you are feeling
 - How alert and attentive you are
 - How well you can understand what is happening
 - How well you can express yourself to someone else
 - How interested and motivated you are to communicate.

People with learning disabilities often:-

- Have unidentified health needs that affect communication e.g. hearing, vision, epilepsy; pain; physical difficulties that make communication effortful; medication affecting attention.
- Do not understand everything that is said to them

They may appear to understand, but actually be responding to your tone of voice, or familiar cues in the situation. They may misunderstand, forget or not catch some of what you say. They may often say "yes" in answering questions, even if they do not fully understand – partly because they do not want to make difficulties. They may not be able to contradict you if you have misunderstood what they mean or want. They may be bilingual, and have greater skills in one language than another.

- Use many different ways of communicating – Facial expressions, eye gaze, "body language", gestures, signs, communication books and charts with pictures or symbols, objects, electronic aids
- Need time to understand and respond to you.

Some people take longer to process what you are saying. Others may find physical movement or speech effortful, so that it will take longer to respond.

- Interactive partners often overestimate the understanding of people with learning disabilities, and make their language too complicated. This puts too many demands on the person, who may withdraw, show challenging behaviour, or fail to do what is asked. Challenging behaviour is often caused by a person's failure to understand what is going on, or inappropriate demands from others.
- Interactive partners often do not use all the ways of communicating that are appropriate to the person. This means that a person's own communication system is not valued, and may deter them from using all their skills effectively

Make sure the person can hear, see and is comfortable

- Check when the last hearing or vision test happened; get an up to date assessment
- Make sure hearing aids or glasses are used if necessary, and that they work properly!
- Make sure you talk clearly and allow the person to read your lips if necessary
- Use sign /gesture and pictures to back up your speech
- Make sure you present information clearly for people to see
- Make sure people are positioned for good communication – seating is key
- Make sure the environment is quiet and there are not too many distractions
- Check out general health and comfort– pain, physical difficulties, effects of medication.
- Make sure you keep your language simple and clear
- Gain a person's attention before starting to talk
- Show that you respect a person's way of communicating by using it to them
- Make sure communication books/aids are available to the person when they need them – not stuck in a cupboard!
- Be a good observer, and respond to all communicative signals
- Make sure the person can see your hands and face if you are signing and talking.
- Give enough time for the person to listen to you and respond

- Check that you have understood – by talking to others, helping the person to tell you when you have got it wrong. Don't pretend you can understand if you really can't!
- Speech and language therapists can help you to decide the best way of communicating with people with learning difficulties – have you got contact details?

4.4 Understand how legislation, policy and good practice affects your role in relation to communication

All the below are relevant to communicating rights to people with learning disability.

The **Equality Act 2010** is an Act of Parliament of the United Kingdom, and has the same goals as the four major EU Equal Treatment Directives, whose provisions it mirrors and implements.

The primary purpose of the Act is to codify the complicated and numerous array of Acts and Regulations, which formed the basis of anti-discrimination law in Great Britain. This was, primarily, the Equal Pay Act 1970, the Sex Discrimination Act 1975, the Race Relations Act 1976, the Disability Discrimination Act 1995 and three major statutory instruments protecting discrimination in employment on grounds of religion or belief, sexual orientation and age. It requires equal treatment in access to employment as well as private and public services, regardless of the protected characteristics of age, disability, gender reassignment, marriage and civil partnership, race, religion or belief, sex, and sexual orientation. In the case of gender, there are special protections for pregnant women. However, the Act allows transsexual people to be barred from gender-specific services if that is "a proportionate means of achieving a legitimate aim".^[3] In the case of disability, employers and service providers are under a duty to make reasonable adjustments to their workplaces to overcome barriers experienced by disabled people. In this regard, the Equality Act 2010 did not change the law. Under s.217, with limited exceptions the Act does not apply to Northern Ireland.

HUMAN RIGHTS ACT 1998

What are human rights?

The Human Rights Act says everyone has the same human rights. That is the law.

Government, councils, health services and the police are all public organisations. It is usually against the law for a public organisation to ignore your human rights.

- you have the right to life
- you have the right not to be treated badly or punished in a cruel way
- you have the right to freedom
- you have the right to a fair trial in court if
- the police think you have broken the law
- you have the right to respect for your own private life
- people should respect your family life.

Person-centred planning (PCP) is a set of approaches designed to assist someone to plan their life and supports.^[1] It is used most often as a life planning model to enable individuals with disabilities or otherwise requiring support to increase their personal self-determination and improve their own independence.

PCP is accepted as evidence based practice in many countries throughout the world.^l It is most often used for life planning with people with learning and developmental disabilities, though recently it has been advocated as a method of planning personalised support with many other sections of society who find themselves disempowered by traditional methods of service delivery, including children, people with physical disabilities, people with mental health issues and older people.

Person-centred planning was adopted as government policy in the United Kingdom through the 'Valuing People' White Paper in 2001, and as part of 'Valuing People Now', the 'refresh' of this white paper in 2009. It is promoted as a key method for delivering the personalisation objectives of the UK government's '**Putting People First**' programme for social care.

4.5 Know who is available to help you with communication and how to contact them

Summary

Communication is a basic human right, through which we control our existence, make friends and build relationships. Estimates suggest that 50% to 90% of people with learning disabilities have communication difficulties. Assessment is vital to ensure the most effective means of communication for each individual across all environments, with Speech and Language Therapists being key professionals, although there is a national shortage of specialists in learning disability. People with learning disabilities do not have one recognised tool for communication, and are often dependent on professional intervention to develop an individually tailored communication plan

Communication is a basic human right.

Communication is the means through which we control our existence. It is the way we make friends and build relationships. It is the way we become independent and make choices. It is the way we learn. It is the way we express our feelings, thoughts and emotions. It is the way we make sense of the world around us. Communication works through a two-way process by which messages are sent and understood between individuals or groups of people.

People in societies have developed common languages so that they can live together with a shared means of communication. Shared communication is fundamental to being included in a society. Spoken and written language is the most highly valued means of communication in our society.

People who cannot speak, understand words, read or write very well, or at all, are undervalued in their societies. They are automatically excluded unless the people around them are prepared to change. Everyone has the right to control their existence through the recognition and meeting of their communication needs. Different ways of communicating should be equally valued and accepted.

The Government White Paper 'Valuing People' says that people with learning disabilities should have: Independence, Choice, Rights and Inclusion. Effective communication is fundamental in achieving these principles. The white paper also states that 'The Government expects organisations working with people who have learning disabilities to develop communication policies and produce and disseminate information in accessible formats. For those with severe disabilities this may require individual communication techniques and effective use of new technology.' To meet individual communication needs require the need for a 'common language'.

Our society currently expects everyone to speak, understand, read and write as their main form of communication. Individuals are judged on their success or failure through language based criteria. People who cannot adequately use spoken and written language are not able to access society or participate fully in life activities unless significant changes are made in the skills, knowledge and attitudes of everyone with whom they come into contact.

This applies equally at all ages and stages in life. Living in a community, people expect those around them to speak and write the same language– at home, at work and in all community activities. Lack of a common language leads to misunderstanding, mistrust and segregation. This applies not only to people with learning disabilities, but to anyone who is not able to speak the language of their community.

4.6 Know how to identify an appropriate and unbiased advocate or interpreter

Advocacy means to speak up for someone. Most of us at sometime in our lives speak up for others or hope that someone will speak up for us when we need support.

There are some groups of people who may need more help than others. This is particularly the case for people with learning disabilities because they are at risk of being ignored. Sometimes we have lots of problems understanding what they are trying to tell us if they do not use words.

Advocacy is about making things change because people's voices are heard and listened to. It's about making sure that people can make their own choices in life and have the chance to be as independent as they want to be. With professional or representational advocacy it is about another person (an advocate) making sure that a person with a learning disability is not being ignored because they need some help to make sure that they are heard. Advocacy is about putting a person back in control of their own life.

What an advocate does:

- An advocate works to make things happen and change
- An advocate helps people to make choices and take more control of their own life
- An advocate works for everyone to have equal rights
- An advocate tries to make sure that people with a learning disability are not left out and lonely. They should have the same chances as everybody else to be included in their community
- An advocate helps people to say what they want and makes sure that the voice is listened to and answered

What an advocate does not do:

- An advocate is not a referee in a dispute or argument
- An advocate does not take the control away from the person they are advocating for by persuading them into his/her way of thinking
- An advocate does not take over the role of a Social worker or a nurse or a care worker either, or make up for gaps in services that should be provided. There is no right kind of advocacy and there are many different ways it can be offered

People are very different and may need different types of advocacy at different times in their lives. We need to make sure that there is choice that suits the differences of the people who want what advocacy has to offer. In that way they will gain the most from it

What is common to all types of advocacy is that the person who it is for (in this instance the person with a learning disability) is always at the centre of the advocacy process. It is all about what that person wants, and finding the best way of getting that across to the people who need to know.

Advocacy can be like tools in a tool box, the different types can be used together or separately depending on the job that needs to be done.

4.7 Understand the importance of giving and providing accurate information as part of effective communication

Having the right information recorded that correctly identifies an individual is essential as it is key to ensuring that each person receives the right care at the right time. This information is also vital for health and social care professionals so that they can make the right decisions about your care, while at the same time ensuring the privacy and confidentiality of your information.

There are two essential elements to ensuring correct identification of individuals: a unique number and an associated standard set of information, such as name, date of birth, and gender,

The benefits for people are safer, better care for patients from having accurate, complete information available when it is needed; the removal of the need to provide demographic details again and again on each visit to the health or social care service provider and reduced time wasting as the information will only be collected once.

The benefits for learning disabilities will include enabling the collection of more accurate and consistent demographic data and improved reliability of information; it will assist in more complete patient identification, therefore preventing duplication or misidentification errors, and less duplication of testing/prescribing and will allow information to be exchanged between information systems, therefore reducing administrative tasks.

Professionals will also benefit from having more complete and accurate information on which to base potentially life-critical clinical decisions; reductions in significant levels of duplication of administrative effort, less wasting of individuals' time and resources and hence greater efficiencies, and more accountability and improved communications.

Having information that is complete and accurate about each person will reduce duplication in medical records, appointments, testing and prescribing. This results in time-saving for the patient and administration and cost savings for the system,

5. Supporting communication between individuals, other people and services

There are five good communication standards:

- 1: There is a detailed description of how best to communicate with individuals.
 - 2: Services demonstrate how they support individuals with communication needs to be involved with decisions about their care and their services.
 - 3: Staff value and use competently the best approaches to communication with each individual they support.
 - 4: Services create opportunities, relationships and environments that make individuals want to communicate.
- Standard 5: Individuals are supported to understand and express their needs in relation to their health and wellbeing.

- Communication is a significant risk factor contributing to increased mental health issues and behaviour described as challenging. This is because:
- Up to 90% of people with learning disabilities have communication difficulties.
- Around half have significant difficulties with both expressing themselves and understanding what others say.
- The incidence of additional sensory impairments, including sight and hearing, is much greater than in the general population. Up to 40% of people with learning disabilities having a hearing loss that is often missed or undiagnosed.

- People with autism have lifelong communication impairments around social communication, social interaction and social imagination.
- As communication difficulties increase, behaviours that are considered challenging typically increase in frequency, intensity or duration.

The individual risk of having a communication difficulty means individuals are misunderstood, experience failure and exclusion from events, activities and relationships. However, communication is also an environmental risk factor. Evidence shows staff do not generally interact with the people they support in a way that enables individuals to achieve greater levels of independence, participation or integration¹⁰. This indicates that providers of specialist hospital and residential services need to develop their expertise to provide meaningful interaction and good communication environments. Staff need the skills to make reasonable adjustments to maximise engagement, involvement and inclusion.

Good communication only exists as part of positive everyday relationships, boosting self-esteem and success. Good communication crosses all dimensions of care, support and enablement. Without good communication individuals struggle to learn, achieve, make friends and interact – all fundamental for citizenship and humanity and central to improving quality of life. Without good communication people may be at risk of:

- A lack of choices and involvement in everyday decisions.
- Limited relationships.
- Increased vulnerability to abuse and hate crime.
- Low mood, anxiety and depression, and withdrawal from community life.
- Reduced employment and housing opportunities; increased placement breakdowns.
- Lower standard of healthcare, diagnostic overshadowing, and more inpatient admissions. Nursing staff unable to over reliance by staff on restrictive approaches and interventions.
- Overuse of specialist learning disability services and ‘out of county’ placements.
- Increase use of behaviour which challenges, mental health distress or offending.
- Poor access to verbally-mediated therapeutic input focused on criminal offences.
- Staff teams consistently overestimating an individual’s abilities, impacting negatively on staff perceptions and affecting the individual’s overall care.
- Poor compliance with the legal requirements of the Mental Capacity Act¹³, Adults with Incapacity (Scotland) Act¹⁴, Human Rights Act¹⁵, Disability Discrimination Act¹⁶ and Equality Act¹⁷.

Good communication reduces these risks. It enables inclusive relationships, supporting individuals to have choice, control, greater independence and improved health outcomes. Sustainable improvements in communication can only be achieved through a ‘whole systems approach’ to reasonable adjustments, including:

- A range of learning opportunities for staff.
- Ongoing supervision that is psychologically minded and considers the staff's own thoughts about the individuals they work with and how this impacts on their relationship and the therapeutic environment.
- Access to resources, skills and knowledge to support communication.
- Effective communication strategies, guidelines and standards.
- Referral to specialist speech and language therapists for specific assessment and treatment.
- Broader access to multidisciplinary specialist services to empower and help providers of specialist hospital and residential services to communicate well across the whole system.

5.1 Understand why effective communication is fundamental to a person-centred approach

We all have our own values that have developed as a result of our family and childhood experiences, and as a result of our friendships and relationships. Our values are also influenced by people in our local community, as well as by national figures and the media. Support workers in social care are expected to promote particular values.

There are two important points to note. First, the idea that learning disability workers are supporting a person. It is not a question of being in charge or in control, because choice and decision-making should lie with the person, as far as possible. Second, it is very important that these principles are part of your everyday work. There should be nothing special about them, they should be part of day-to-day life.

First we need to explore what each of the following terms means in practice in your everyday work when supporting people who have learning disabilities. As you go through these explanations, notice how these values do not stand alone, for example, choice and independence and respect, individuality and dignity are closely related to each other. You can think of these values as a network of support for a person with a learning disability.

Individuality

Within a few days of starting work with people with learning disabilities, it should be clear to you that everyone you work with is an individual, with their own particular likes, dislikes, strengths and personality. Services and support workers should always focus on the individuals they are working with, rather than the needs of a group of people. You and your colleagues should have the hopes, dreams, interests and needs of each person you support as a top priority in your daily work.

Rights

As citizens, the rights of people with learning disabilities are protected by law, and in particular by the Human Rights Act 1998. Most people with learning disabilities who are supported by health and social care organisations are protected by the rights included in this Act. Sixteen basic

human rights have been incorporated into UK law. These rights protect everyone from harm, and set out what we can say and do, as well as our right to a fair trial and other basic entitlements.

In addition to the Human Rights Act, there are a number of laws that have been put in place to protect all of us. They are there to ensure we are treated fairly and not discriminated against, for example because of our sex, race or because we have a disability.

There are five key features of person centred planning. For many self-advocates, families and friends leading person centred planning, they will happen naturally. For example, if someone is organising their own planning, it will be difficult for them not to be at the centre, which is the first key feature of person centred planning

1) The person is at the centre

'Person centred planning begins when people decide to listen carefully and in ways that can strengthen the voice of people who have been or are at risk of being silenced.'

Person centred planning is rooted in the principles of shared power and self-determination. Power is an issue because many people are limited in their power in comparison to others. Others control their lives. The outcome is to help the person to get a better life on her own terms.

The person is consulted throughout the planning process

If the person has been involved in planning before then it makes sense to talk to her about how s/he wants to plan, if s/he wants a meeting, and if so, what kind of meeting, and how she wants to be involved.

The person chooses who to involve in the process

Unlike traditional models of planning, it is for the person to decide who she wants to include in the planning process, and how. A good starting-point is 'people who know and care about the person'.

The person chooses the setting and timing of meetings

If a meeting does take place it is at a time convenient to the individual and those she wishes to invite and it is in a place where she feels at home. The planning is carried out in a way that is accessible to the individual as far as possible

Family members and friends are partners in planning

'Person-centred planning celebrates, relies on, and finds its sober hope in people's interdependence. At its core, it is a vehicle for people to make worthwhile, and sometimes life changing, promises to one another.'

Person centred planning puts people in the context of their family and their community. It is therefore not just the person themselves that we seek to share power with, but family, friends and other people from the community who the person has invited to become involved

The plan reflects what is important to the person, their capacities, and what support they require.

Person centred planning seeks to develop a better, shared understanding of the person and her situation. A person centred plan will describe the balance between what is important to the person, their aspirations and the supports that they require.

Focus on capacities

The focus of professional effort in the lives of people has traditionally been on the person's impairment. Professionals then set goals for people to try and overcome deficits.

Identifying supports

Professionals have been training people towards `independence` for years. A person centred plan clearly records what support someone requires, on their own terms.

The plan results in ongoing listening, learning, and further action.

Person centred planning should not be a one off event. It assumes that people have futures; that their aspirations will change and grow with their experiences, and therefore the pattern of supports and services that are agreed now will not work forever. It is often described as a promise to people. To fulfil this promise we need to reflect on successes and failures, try new things and learn from them and negotiate and resolve conflict together. Acknowledging and resolving conflict is important if people are to really work together to make change. Person centred planning is based on learning through shared action, about finding creative solutions rather than fitting people into boxes and about problem solving and working together over time to create change in the person's life, in the community and in organisations.

5.2 Understand your role in enabling individuals you support to communicate with other people

Learning disability workers support people with learning disabilities and their families, carers and friends. They help patients to maintain their health and wellbeing and to live their lives as fully and independently as possible.

This includes helping people with their daily activities, teaching them the skills to look after themselves or find work. They also support them in making decisions about going to college, going on holiday or carrying out leisure activities with friends.

Learning disability nurses draw up care plans and monitor the implementation of recommendations. Their work is carried out in multidisciplinary teams with other nurses and health and social welfare professionals.

As well as helping individuals to stay healthy and making sure they get any medical care that they need, learning disability nurses also support their carer's and families, helping them to take breaks when necessary.

Typical work activities

Learning disability workers have the knowledge, skills, attitudes and abilities to work in partnership with people of all ages who have learning disabilities. They work with their

individuals, families and carers, in order to help them to develop individually and fulfil their potential in all aspects of their lives, irrespective of their disabilities.

The work is mainly based in community or supported living settings and can be very varied.

Tasks can include:

- using expert communication skills to engage with vulnerable people;
- interpreting and understanding behaviour and evidence-based outcomes to develop individual care packages;
- coordinating healthcare reviews/care plans with other health and social welfare professionals, and completing appropriate paperwork;
- organising home visits and attending GP clinic appointments to monitor and discuss progress with service users, their carer's and their GP;
- planning activities, social events and holidays with service users (in supported living settings);
- liaising with hospital admissions staff to plan patients' care needs on admission and discharge (e.g. housing and medication);
- advocating on behalf of people with learning disabilities and encouraging self-advocacy;
- carrying out group work with service users and patients on issues such as problem-solving, anxiety management, healthy living and behaviour management;
- supporting staff and carers in the community;
- organising emergency admissions;
- completing management plans and reports;
- assisting with tests, evaluations and observations;
- teaching students and/or training health and social care colleagues;
- maintaining awareness of local community activities and opportunities;
- supporting the agenda for equality and equal access to all community and public services;
- campaigning to ensure better outcomes and services for people with learning disabilities.

5.3 Understand how your role may differ when supporting an individual to communicate with

Support workers role on good practice in working with people with learning disabilities

Learning disabilities jobs can be among the most rewarding of careers in support work. Generally speaking there are no formal qualifications required to undertake them, which makes them a good way to move into the care sector for the first time, but having a qualification in a related subject like social care is very helpful.

New support workers have to undergo a two week basic training course before they are ready to start working with the public.

Day to day duties

Support workers engage with people with learning disabilities in a variety of settings. The most common of these are clinics, day care or drop in centres, but they may also be asked to help out with people in hospitals or to visit clients in their homes. School visits designed to enable disabled children to access learning can also be involved. Some positions involve shift work so that people in residential care can be provided with round the clock support.

The duties of a learning disability support worker break down into two main areas: promoting health and promoting well-being. The former involves working with clients to make sure they can eat well and get enough exercise as well as helping them to deal with hygiene issues. The latter involves advocacy, and support workers must be capable of identifying barriers that can be stopping their clients from leading fulfilling lives as well as asserting themselves to make sure that, wherever possible, such barriers are removed.

Personal qualities

Support workers undertaking this kind of role will need a lot of patience. Sometimes they will have to teach the same task to the same client every day for months until it is remembered, but experience in the role will make every small success intensely rewarding.

They need to be caring people who enjoy helping others and are able to connect emotionally even with people who think very differently. They also need to be able to calm down clients who get upset and know when to step back from difficult situations, and they need to have sufficient strength of character to stand up for clients who face discrimination.

Types of clients

The people support workers can end up helping vary a great deal. They can include adults with Asperger's syndrome who lead independent lives and are generally good at coping but just need help with one or two issues.

They can also include working with people who struggle to communicate at all, or who are very withdrawn and don't want to interact with others. In every case the focus is on responding to the client's needs and treating them with respect, helping them to live as independently as possible even in a care home setting.

Although a support worker will generally be under the supervision of others, they will need to be able to make decisions independently when clients need immediate help, and they will need to make the effort to get to know them as people so a relationship of trust can be built. This can be a very fulfilling job for people who enjoy empowering others.

Key areas covered include

- The importance of the human rights of the service user
- Promoting quality of life in addition to preventing harm
- The importance of 'whistle-blowing' on instances of harmful practice
- The importance of good liaison with expert colleagues to seek further advice on cases where appropriate.
- The importance of good communication with families or those important to the person being supported

The advice also points out that working with people who are distressed, and supporting their carers or families, can be emotionally draining and that support workers should have access to good support and supervision.

- They also support Family, Friends, Partner, Other professionals, Wider community in maintaining and improving the life and welfare of the individuals in their care.

5.4 Know how to enable individuals you support to contribute to discussions and decisions about their health

It is essential for those who use learning disability services to have the opportunity to influence what type of services we commission. Our objective is to expand the range of options available to service users and to enable them to make decisions and take control.

This includes maximising the options available at the top of the ladder of participation.

Participation Ladder

- Full Control – service users control decision making at the highest level
- Sharing power –service users share decisions and responsibility, influencing and determining outcomes
- Participation – Service users can make suggestions and influence outcomes
- Consultation – service users are asked about what they think but have limited influence
- Information – service users are told what is happening but have limited influence
- No control – service users are passive consumers of service.

Meadow Court recognises that resources are finite and increases in resources and finance is unlikely over the next few years.

We believe that encouraging service user involvement can result in greater efficiencies, better quality and choice about services. Bringing service users into our planning process has the added advantage of opening up the service and achieving a high degree of transparency.

We recognise values and wants to harness the variety of skills, experience and knowledge held by service users. As an integral part of involvement, we want to add to this by providing genuine work and up skilling opportunities. This will benefit the service further and create real opportunities for service users.

Why is involvement Important?

- There are many reasons why individuals have their say.
- Rights – They have a right to tell us what services you need and how they should be delivered.
- Decisions–They can provide the facts and opinions to inform our decision making, so that we can make the right decisions
- Voice – Their views are important and we want to listen and respond
- Resources _ resources are limited and we want to ensure that we are doing our best to meet individuals needs
- Change _ Individuals can make a difference
- Confidence – we can work together so individuals have more confidence in what our learning disability service does

5.5 Understand the boundaries of your role in relation to communicating on behalf of the individuals you support

Role Definition and Limits

Role: The function assumed or part played by a person or thing in a particular situation.

Boundary: A line that marks the limits of an area; a dividing line; a limit of a subject or a sphere of activity. (The New Oxford English Dictionary)

Each job title entails particular duties and responsibilities. Within each position there are routine tasks and activities and expectations. Individuals are specifically trained to perform the responsibilities of their role. And each role involves limits. Every worker is expected to limit herself or himself to the usual and customary activities involved in the fulfilment of their role.

Types and amounts of education, training, salary, supervision, clothing, scheduling, authority, and responsibility define roles. Different roles contribute to the functioning of the facility as a whole. An individual's performance of his or her role is observed and evaluated by residents and their family members, by peers, by supervisors and colleagues, by administrators, by citizens and organizations in the community in which one works, and by certifying or licensing boards, by State and Federal authorities, and by other regulatory agencies.

It is important that one consistently adhere to the established tasks and activities and expectations of one's role. It can be disruptive or even harmful to take actions outside of the limits or boundaries of one's role. Certain limits are obvious, such as restrictions against sexual

contact with residents. But other actions can blur the essential line between staff and resident but be less apparent. This paper will discuss a variety of areas in which boundary blurring or boundary violations could occur. Hopefully, this discussion will shine some helpful light on these important but sometimes subtle issues.

As professional helpers we can contribute significantly to the wellbeing of residents in the long-term care setting. But if we act in ways that violate the boundaries of our role we can cause potential harm to our residents, our employers, and ourselves. Professional care giving can be powerfully helpful or powerfully harmful. Electricity is a powerful force, but needs to be control and focused in order to perform helpfully. The rubber insulation around an electrical cord protects and directs the force of the electricity. If a cord is damaged or frayed the energy can be less effectively delivered, or could become a danger. Role boundaries provide a type of insulating and directing function. The results of our work will be more effective to the degree in which we adhere to the limits of our role. If we act outside of our role the powerful emotional forces involved in care giving can go awry and can cause harm.

Sharing Personal Information

Use caution when talking to a resident about your personal life. Do not share information because you need to talk, or to help you feel better. Only share limited and general information about your life outside of work. And only do so if you are thinking of a reason why it may be useful to the resident, such as a teaching example, or an encouragement.

Emotional Reactions

The actions of residents will trigger emotional reactions in staff persons. A resident's behaviour can stir anger or pity, disgust or endearment, impatience or curiosity. It is normal that a worker might feel sadness, annoyance, fear, repulsion, attraction, protectiveness, hostility, bewilderment, or sympathy in reaction to a resident's behaviour. It is normal to feel such emotions but it is not helpful to express or act on all of our emotional reactions.

Emotional reactions can interfere with the functioning of our role. One could become overly attached to certain residents, and create feelings of hurt or rejection for other residents under one's care. One could be overly fearful of or annoyed by some other residents and deprive them of the equal care they deserve. Our job is to act with an equal degree of energy, thoughtfulness, and commitment to each of the individuals under our care. Intense and unexamined emotional reactions can disrupt or distort one's role. Too often we may react to a resident's behaviour as bothersome and disruptive without looking thoughtfully at how it is reflecting that individual's problems and limitations. It requires skill to learn to view a resident's behaviour as symptomatic, as reflective of underlying disorder. All staff can develop and refine this skill. This skill requires practice, as do all skills. It takes practice to see the emotions that are stirred in us by the actions of the resident(s). It takes practice to step aside from our immediate reactions so that we can see our feeling rather than be it.

We need to practice this skill of stepping back, or stepping aside from our emotions. This does not mean ignoring or discounting our feelings; it means gaining a new point of view on them. It is similar to adjusting a telephoto or telescopic lens. Sometimes we want a very close and detailed look at something, and other times we need a more distant look so we can put the thing in perspective. Being able to delay our reaction and adjust our view allows us to respond with more thought and more choices. It is a mental and emotional skill to both react and notice our reactions in the moment. This allows us to more precisely notice exactly what the resident is doing that provokes our reaction. Too often we are too close, too immediate, and too personal in our reactions. At these times we sometimes do not even notice our own emotions. In the intensity of the moment we might react like a pinball machine instead of observing, considering, and choosing how to respond as paid, trained professional helpers.

Endearments/Nicknames

It is a good practice to avoid using endearments and nicknames. These informal terms blur the clarity of your professional role in the life of the resident. You might feel uncomfortable if your doctor refers to you as 'darling' during an exam. You might feel patronized if your attorney called you 'dear'.

Touch

Touch can be healing. It can be comforting, reassuring, encouraging, affirming, or uplifting. Touch can also be confusing, or hurtful, or frightening, or unpleasant, or simply unwelcome. Touch is a powerful tool. It should be used sparingly, and thoughtfully. It should be used for deliberate purposes, and in limited fashion. Touch can serve a good purpose only if you have a clear and good purpose for its use. Residents have different needs and tolerances for touch. When using touch be clear about using it to serve the residents need and not your own. Be mindful about how touch will be experienced and interpreted by the person being touched and the others observing.

Tone of Voice

Take a moment during your workday and listen to the sounds of the voices around you. Do you hear sounds of annoyance, frustration, exasperation, anxiety, and impatience? Are those sounds coming from the voices of your co-workers? Even our frail and confused residents can understand the emotional qualities conveyed in the sounds of voices. You will also hear sounds that are consoling, encouraging, uplifting, cheering, and reassuring. These comforting tones of voice are helpful and powerful tools to use in the care of residents. We can contribute to an atmosphere of fear or one of caring through the sound of our voice. It is a choice we make every time we speak.

Clothing

Clothes help to define the boundaries of one's role. Clothes communicate messages about how a staff person feels about herself or himself, and about how she or he feels about their role. Certain clothing choices reinforce one's role, or undermine it. It is important to think about what message you are communicating with your choice of clothing. Outside of work one dresses to highlight personal attractiveness. But at work one should dress to show professional sincerity.

Scheduled Time

A professional helping relationship differs from a personal relationship. Personal relationships involve two-way helping. A friend or family member is often expected to be available when needed. But a paid helper is scheduled for particular times. Activities or involvements with a resident outside of scheduled times are an indicator of a blurred boundary.

No Romantic/Sexual Relationships

It is never permissible for a professional helper to have a romantic/sexual relationship with a resident.

Secrets

Do not keep secrets with residents. Do not share secrets or ask a resident to keep a secret. Do not agree to keep a secret. Secrets are different from confidentiality. Confidential information is shared with a few others members of a team providing care to a resident. Personal secrets compromise role boundaries. If you avoid charting certain information, or you screen or colour information differently for a particular resident, this might be a signal of an existing boundary problem.

A Therapeutic Environment

Acting within role boundaries helps create a therapeutic environment, or what is called a therapeutic milieu. Actions that are appropriate to the function of each person's role help create an atmosphere where all interactions are potentially therapeutic, and in which all persons flourish.

5.6 Understand how to support other people and services to communicate effectively with the individuals you support.

The first step in finding learning disabilities support about is to ensure you have a good understanding of the individual's needs. These needs may range from occasional support in achieving increasing independence to more intensive or around the clock support and care.

There are many government organisations, charities and independent organisations that can help people understand what type of support is right for each situation. We provide user friendly sources of advice and support, but the GP or local social services department is often the best place to start. They will assist with a full assessment to help individuals understand what local support options are available and may make recommendations about the type of service needed.

Whatever these recommendations, it is still important for people to research to make sure individuals feel comfortable and make the right choice. All support services are closely monitored by independent regulators who undertake regular reviews to ensure customers are treated with dignity and respect.

