

Disability Information Cards

Information cards providing brief descriptions of a number of common disabilities, the implications of those disabilities, inclusion tips and direction to websites providing additional information.

Introduction

The Disability Information Cards relate to people who may have the impairment referred to on the card.

Each card includes:

- A brief description of the impairment
- Issues to be aware of in relation to the disabled person
- Inclusion tips
- Websites for additional information

The following cards are included:

- Autism Spectrum Disorder
- Behavioural difficulties (including Attention Deficit Hyperactivity Disorder ADHD)
- Blind/ Visually Impaired
- Deaf, Deafened and Hard of Hearing
- Epilepsy
- Learning Difficulties
- Physical Impairments
- Speech, Language and Communication Needs

Please also see the 'Specific Impairments' section in the Inclusion Booklet for descriptions of some of the more common impairments which people visiting your setting may have.

For the purposes of this pack:

- The terms 'individual' and 'disabled person' includes children, young people and adults
- The term 'parents' includes guardians and carers

Things to remember when using these cards:

- Everyone is different, they are the experts on themselves. Do not make assumptions; ask them (or if this is not practicable or appropriate their parent/carer) about their disability, what they may need and like help with.
- The information on these cards is not comprehensive and should only be used as a guide.
- All impairments differ in severity and the effect they will have on the individual.
- The cards do not focus on the medical aspects of disability, rather they are more concerned with what people are functionally able to do. In your setting you should not focus on the impairment the person has, just how best to meet their specific individual needs.
- Many of these strategies are general good practice and will make you even more effective in communicating with all the people you work with.
- You should collect information about each individual person prior to their attendance. This information should be available to you and anyone else working with the individual, before and during each session.

1. Autism Spectrum Disorders

A developmental condition that affects the way a person is able to communicate with, and relate to, the people around them. The word 'spectrum' is used because the characteristics of the condition vary from one person to another.

The Triad of Impairments: The three main barriers that people with autism may experience are known as the 'triad of impairments'. They are:

1. Social communication skills (e.g. problems in recognising and understanding verbal and non-verbal language, such as gestures, facial expressions and tone of voice).
2. Social interaction (e.g. problems in recognising and understanding other people's feelings and managing their own).
3. Social imagination (e.g. problems in understanding and predicting other people's intentions and behaviour and imagining situations outside of their own routine).

Asperger's Syndrome

Autism and Asperger's Syndrome are part of the same condition, all have difficulty with the triad of impairment. However, people with Asperger's generally have more ability to communicate using language and are often of average or above average intelligence.

1.1. Issues to be aware of in relation to the disabled person:

- May have specific areas of intense interest.
- Often highly sensitive to changes in routine.
- Find it difficult to empathise with others.
- May be particularly sensitive to their surroundings and environment.
- Their senses may be intensified or underdeveloped causing them to become distracted or distressed, for example by bright light, certain textures or particular smells.
- Often have a very literal understanding of language, and difficulties interpreting facial expressions and body language.

1.2. Inclusion Tips:

- Break activities down into smaller tasks.
- Combine verbal instructions with other methods of communication e.g. diagrams, demonstrations and writing information down.
- Gain the individual's attention by saying their name first when speaking to them.
- If the individual does not respond, repeat the question, using the same words. Changing the way the request is made will only confuse them.
- Consider showing the individual a plan of the day/activity (before the day/activity if possible), possibly using pictures to help them prepare for activities.
- Find out and be aware of any triggers specific to the individual that may cause them distress or anxiety – if you are unsure then ask them or their parent/carer.
- Be mindful when using jokes, sarcasm, exaggerated language and metaphors. People with autism may take you literally.
- Consider giving individuals time away from the group to help them process what is going on.

For more information please see:

National Autistic Society

www.autism.org.uk

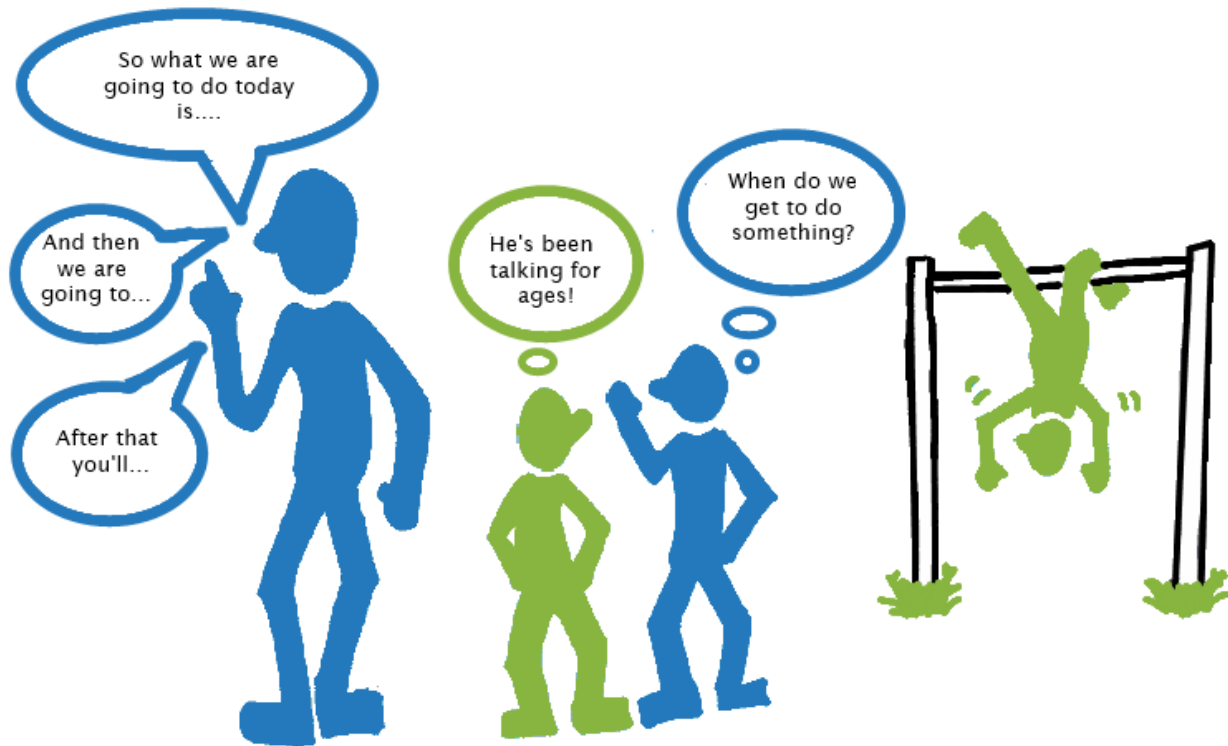
Autism Initiatives UK

www.autisminitiatives.org

2. Behavioural Difficulties

(including Attention Deficit Hyperactivity Disorder ADHD)

A range of challenging, disruptive and inappropriate behaviours caused by a variety of biological, psychological and social factors.



2.1. Issues to be aware of in relation to the disabled person:

- Will often put a lot of effort and enthusiasm into well designed and appropriate activities. Can be disruptive and exhibit challenging behaviours during activities that do not engage them.
- Can be impulsive, hyperactive and have mood swings.
- May appear to be very self-confident but this may cover a lack of self-esteem.
- Often respond well one to one.

2.2. Inclusion tips:

- Design activities so that there is a minimum amount of waiting. Keep people occupied and positively engaged.
- Try to incorporate physical activity/movement into an activity. If doing a more sedate activity, consider having regular breaks in which individuals can move around.
- Break activities down into smaller tasks.
- Praise good behaviour immediately.
- Give individuals a particular task or responsibility.
- Find out what behaviour management methods are used with the individual, e.g. by their school or parents, and implement them if possible.

For more information please see:

ADDISS (Attention Deficit Disorder Information and Support Service)

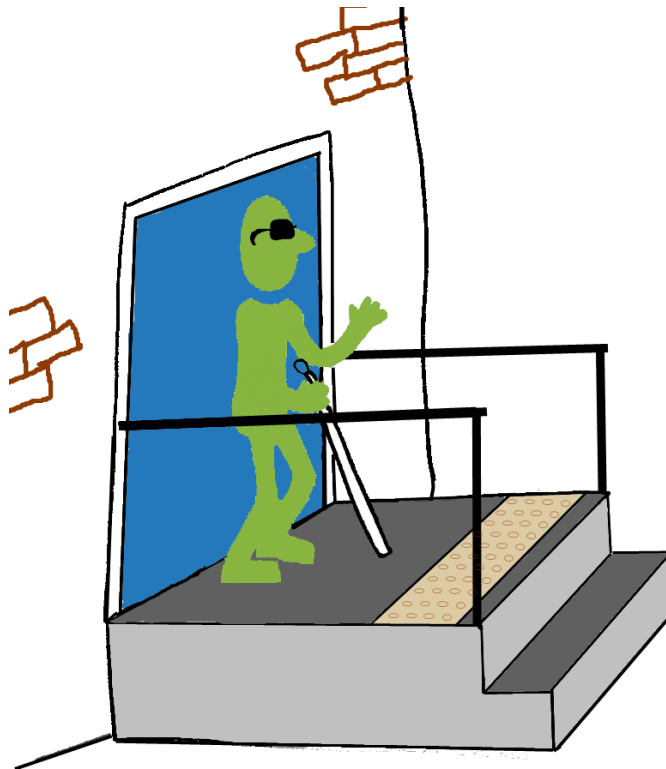
www.addis.org.uk

SEBDA (Social, Emotional and Behavioural Difficulties Association)

www.sebda.org

3. Blind/ Visually Impaired

A degree of impairment of visual capacity, including low vision or no vision.



This may include:

- Blind (no vision)
- Blurred vision (see things less focused and less able to see small details)
- Colour blindness (certain colours, often red and green, cannot be distinguished)
- Long sighted (see things better further away than closer)
- Night blindness (difficulty seeing in poor light)
- Short sighted (see things better closer than further away)
- Tunnel vision (see things better directly in front than to the side)

3.1. Issues to be aware of in relation to the disabled person:

- May use various forms of mobility/supporting aids, for example a white cane.
- Different lighting conditions will affect people in different ways.
- Circumstances may depend on whether a person has been blind from birth or become blind through an illness or trauma.

3.2. Inclusion tips:

- Find out which light conditions enable a person to see best.
- To engage an individual in conversation, use their name and touching them lightly on the arm.
- Tell people about their surroundings including layout. Be ready to describe things (who, what, where, anything unusual).
- Allow time for people to become familiar with their new activities and new equipment.
- Introduce yourself when first meeting the individual and don't forget to let them know when you are leaving.
- When leaving the individual, consider the social implications so they are not isolated from the group or unable to connect with their general surroundings.
- If an individual has a guide dog avoid the temptation to pet or stroke it. Remember that this dog is responsible for leading someone who cannot see. The dog should never be distracted from that duty. A person's safety may depend on their dog's alertness and concentration.

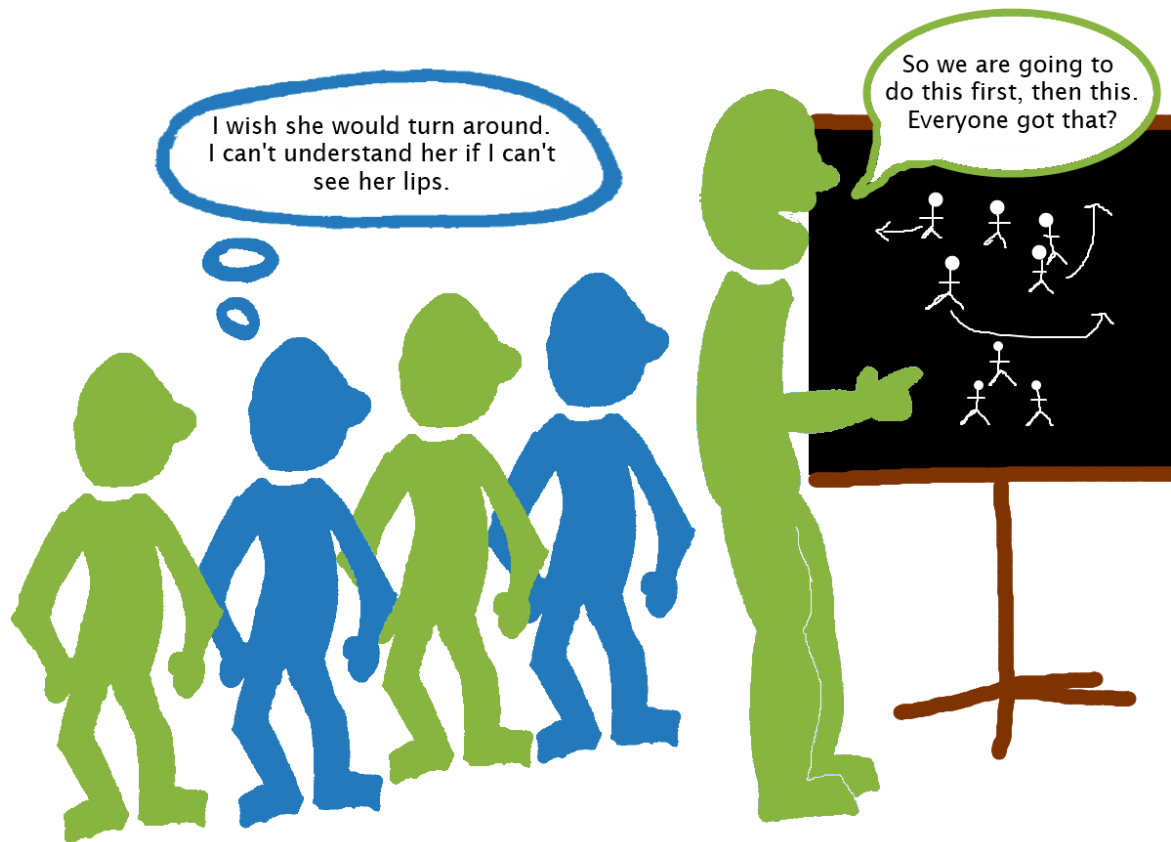
For more information please see:

[RNIB \(Royal National Institute for the Blind\)](https://www.rnib.org.uk)

www.rnib.org.uk

4. Deaf, Deafened and Hard of Hearing

A degree of impairment in the ability to detect or understand sound.



4.1. Issues to be aware of in relation to the disabled person:

- May have assistance in the form of a signer or hearing aid.
- The individual may have an associated speech impediment.
- Can feel isolated in group situations as it may be difficult to follow conversations.
- Lip reading and sign language are often important aspects of communication.

4.2. Inclusion tips:

- Find out how much the individual can hear and their preferred method of communication.
- If people are lip reading make sure they can see your face and use normal speech and mouth patterns. Consider your position in relation to the light source.
- Match your facial expressions to the message you are trying to convey.
- Try to limit ambient noise.
- If you do not know sign language, you can still use basic signs such as thumbs up for 'OK' and simple miming of actions to aid with communication.
- If the individual is accompanied by an interpreter, ensure you make eye contact and speak to the individual not the interpreter.

For more information please see:

Action on Hearing Loss

www.actiononhearingloss.org.uk

5. Epilepsy

A tendency for a person to have recurrent seizures. A seizure is a surge in brain activity that affects how a person feels or acts for a short time.



5.1. Issues to be aware of in relation to the disabled person:

- There are different types and severity of seizure; some of the symptoms include convulsions, confusion, change in level of consciousness, absences and breathing difficulties.
- People can become disorientated during a seizure and may not remember anything about it afterwards.
- Recovery from a seizure can range from minutes to many hours.
- Seizures may be triggered by a variety of internal or external factors and cannot be stopped without medical intervention once started.
- Seizures rarely cause permanent damage.

5.2. Inclusion tips:

- Plan for extra supervision to be available in certain activities if required (e.g. swimming).
- Find out and be aware of the triggers of a seizure specific to the individual (e.g. bright lights or heat).
- Find out from the individual and their parents as much as you can about the type of epilepsy and how the person feels and acts before, during and after a seizure.
- In the event of a seizure, clear the area of any objects which may cause injury.
- Find out what impact the seizure will have on the person. Does the individual require emergency medication? Will they go to sleep, need to go to hospital (often not required) or need time to recover? It is worth planning how this will impact the rest of the activity.
- Avoid flashing lights and bright lights to reduce the likelihood of individuals experiencing seizures.

For more information please see:

Epilepsy Action

www.epilepsy.org.uk

6. Learning Difficulties

An inability to learn a certain task or in a certain way. Usually associated with lower cognitive function.



6.1. Issues to be aware of in relation to the disabled person:

- Increased time needed for carrying out tasks and processing information.
- Skills may be hidden by the individual's lack of confidence.
- May have a lack of social awareness.
- Often associated with speech, language and communication needs.

6.2. Inclusion tips:

- If communication is difficult, consider using communication aids such as picture cards.
- After giving a demonstration/explanation take time to properly check understanding. An affirmative answer to the question 'Do you understand?' is often the easiest answer to give but may not be indicative of actual understanding. Consider questions such as 'What have I asked you to do?' or specific questions such as 'Can you tell me which colour we are using?'
- Allow extra time for cognitive processing.
- Break information and activity down into small chunks.
- Be patient, allow people to finish.
- Engage as many senses as possible (hearing, sight, smell, taste and touch).

Also see the 'Speech Language and Communication Needs' card

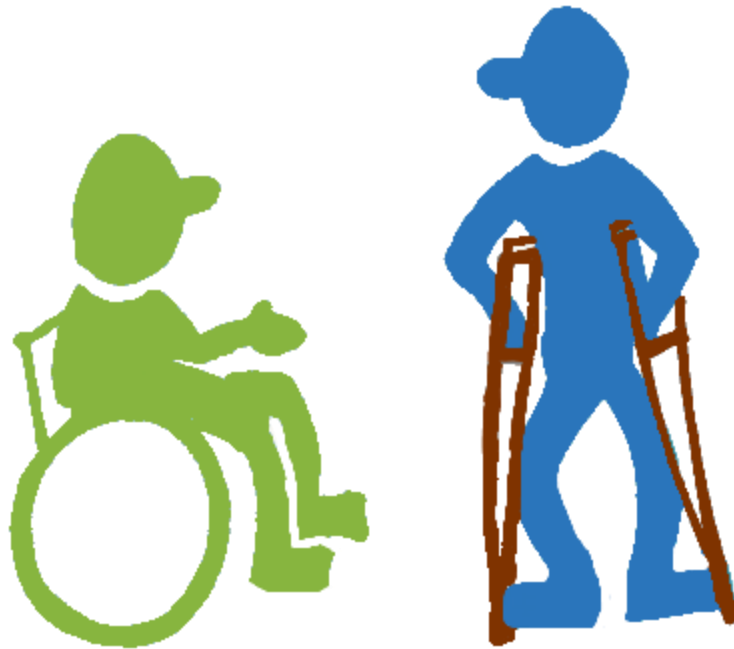
For more information please see:

Mencap

www.mencap.org.uk

7. Physical Impairment

A limitation on a person's physical functioning, mobility, dexterity or stamina.



7.1. Issues to be aware of in relation to the disabled person:

- May be associated with another disability.
- May tire and fatigue quickly.
- May require support with personal care.
- May require the assistance of mobility aids to assist them, for example a wheelchair, mobility scooter, crutches, walking stick or walking frame.

Wheelchair users

- Disabled people may need to use a wheelchair to get around, be it permanently or for short periods of time.
- Some wheelchair users may need little assistance over the majority of surfaces/slopes, others may need help with pushing or guidance and some may need no help at all.

7.2. Inclusion tips:

- Do not assume the individual has any impairment other than physical.
- Find out what the individual **can** do and if there is anything they would like support with e.g. ask a wheelchair user if they need assistance before pushing their wheelchair, some people can manage independently.
- Consider adapting the activity, venue or equipment to allow a person to participate more fully.
- Allow time for rest breaks away from the activity.
- Consider mobility aids as part of an individual's personal space e.g. do not lean on a person's wheelchair, this is part of their personal space.

Wheelchair users:

- When talking to a chair user, try to position yourself so that you are at a similar eye level. If standing and talking to a person in a wheelchair, do not stand too close so they have to look straight up at you.
- Consider access for wheelchairs before working with a chair user. Will rough or uneven ground be difficult for a chair to move over? Are there steps, narrow gaps or other obstacles that will prevent a chair from passing? Are toilets accessible to chair users?
- Find out about an individual's additional mobility and personal care needs. Will they require the use of a hoist or changing table? If your setting does not own these, can they be hired or borrowed?

Also see the following 'Specific Impairments' in the Inclusion Booklet for a description of the following:

- Cerebral Palsy (CP)
- Cystic Fibrosis
- Down's Syndrome
- Multiple Sclerosis (MS)
- Spina Bifida and Hydrocephalus

For more information please see:

Cerebral Palsy

www.scope.org.uk

Cystic Fibrosis

www.cftrust.org.uk

Down's Syndrome

www.downs-syndrome.org.uk

Multiple Sclerosis

www.mssociety.org.uk

Spinal Cord Injuries

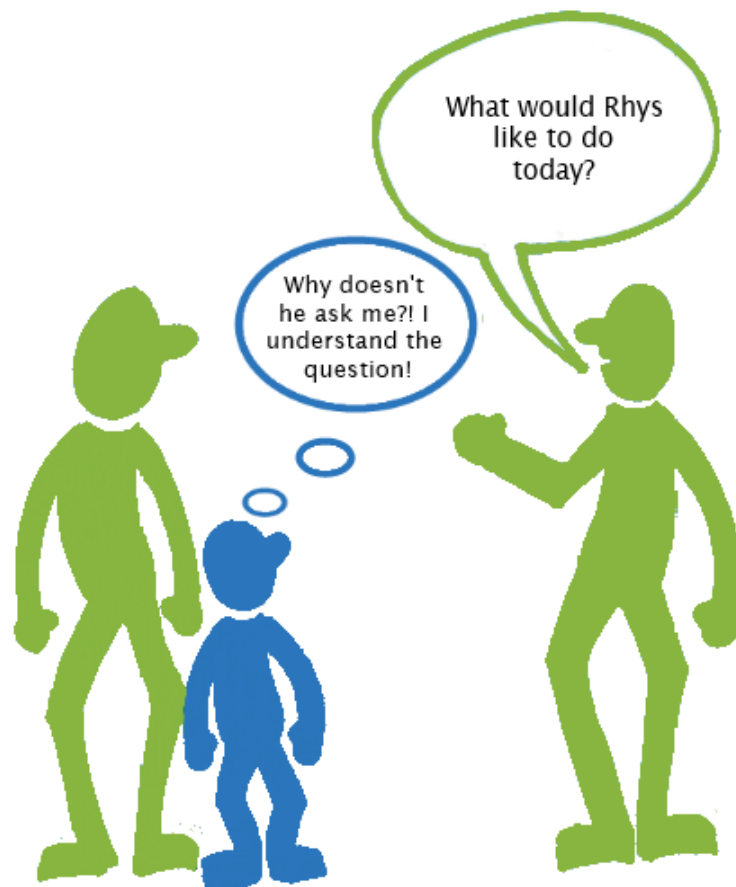
www.apparelyzed.com

Spina Bifida & Hydrocephalus

www.asbah.org

8. Speech, Language and Communication Needs

A difficulty in communication which can be due to a number of physiological, cognitive or psychological reasons.



8.1. Issues to be aware of in relation to the disabled person:

- May become frustrated if people do not take the time to properly understand them.
- Many individuals will understand a lot more language than they use.
- Some people may use communication aids such as symbol cards, signs or audio-electronic devices able to convert text to speech.

8.2. Inclusion tips:

- Communicate directly to the individual and not to an advocate, ensuring you use eye contact. Even though the individual may not respond to you verbally, it is likely they understand everything you say.
- Find out the individual's preferred method of communication and how you can adapt to meet their communication needs.
- If speech is difficult, consider asking questions with a one word answer or give the individual a choice of short answers.
- Limit outside noise so you are more likely to hear and understand any verbal communication.
- Be patient, allow people time to finish.
- If you do not understand what someone is saying, never pretend that you do. Ask them to repeat what they have said as many times as you need to.
- Do not worry if people are initially difficult to understand. Take time to build a rapport and 'tune in' to how someone speaks.

For more information please see:

Talking point

www.ican.org.uk/talkingpoint



This toolkit is based upon one produced by Hampshire County Council; as such Denbighshire County Council would like to thank Hampshire County Council for their significant contribution to this pack and for allowing us to adapt it for our use.