

Dispatcher Protocol for calls regarding a person with AUTISM

WANDERING/MISSING PERSON

Is the person verbal or non-verbal? _____

If non-verbal, mode of communication _____

Have they wandered before? _____

Where have they been located? _____

Nearby water sources (pools, pond/lake/river, quarry) _____

Sensory Issues? _____ Touch Yes/No Sound Yes/No

Fear of Dogs? Yes/No

Will they respond to their name? _____

Do they have a tracking device? _____

Are they wearing any form of identification? Yes/No Where? _____

Favorite objects/topic _____

Specific calming techniques _____

Fears/dislikes _____

Other pertinent information _____

POLICE/LAW ENFORCEMENT CONTACT

Is the person verbal or non-verbal? _____
Mode of communication _____
Is someone present who can assist with communication? _____
Sensory Issues- Touch Yes/No Sound Yes/No Lights Yes/No Other _____
Do they trust/like Police? _____
Prior law enforcement contacts _____
Any violent tendencies? _____
Favorite object/topic/likes _____
Fears/dislikes _____
Calming techniques _____

IF POSSIBLE, FORWARD “COPS” GUIDE TO RESPONDING OFFICERS

Communication
Overload
Processing
Sensory

Communication- Persons with ASD experience difficulty effectively communicating and interacting with others. These challenges are especially evident when the person is under stress, or in crisis. They may be non-verbal, or display “Echolalia”, where their use of language is repetitive. It helps to know how the person you are interacting with communicates. They may make use of an augmented communication device, sign language, or they may be accompanied by someone who is able to communicate with them.

Overload- Persons with ASD can easily become “overloaded” when they are in crisis mode- if they become frustrated by their inability to effectively communicate with you; if they experience more sensory input than they can tolerate, or if they are unable to process information, questions or commands. A person with ASD in overload may shut down, flee, or may meltdown and become combative. It is imperative that officers have the tools to prevent, recognize and respond to potential overload.

Processing- Persons with ASD are not typically able to process information, questions or commands at the same rate as their neurotypical peers. Officers need to remember that a delay in response is more likely due to the processing challenges, rather than a purposeful refusal or inability to answer their questions, or respond to their commands.

Sensory- Persons with ASD frequently underreact, or overreact, to sensory stimuli. It could be touch, sounds, certain tastes and textures, and is highly dependent on the individual. Officers should always be aware of their surroundings, and attempt as best they can to minimize sensory stimuli- shut down lights, siren, radios, etc.

FIRE/RECUE/EMS CONTACT

Is the person verbal or non-verbal? _____

Mode of communication _____

Is someone present who can assist with communication? _____

Sensory Issues- Touch Yes/No Sound Yes/No Lights Yes/No Other _____

Prior EMS contacts _____

Any violent tendencies? _____

Favorite object/topic/likes _____

Fears/dislikes _____

Can someone who knows them that they trust be on scene to assist _____

Calming techniques _____

In case of house fire, is the person out of the dwelling? _____

IF SO, ENSURE THAT SOMEONE REMAINS WITH THEM SO THEY DO NOT RE-ENTER DWELLING

If still inside, what is their likely location _____

Are there bars/other security devices on windows/doors? _____

Favorite room and hiding places? _____

IF POSSIBLE, PASS ALONG “SOLES” PATIENT ASSESSMENT TECHNIQUES:

EMS Patient Assessment- SOLES

Sensory

Overload

Locate someone familiar to the person with ASD

Explain everything you are doing

Support and reassure the patient throughout the process

Sensory Overload- The patient with ASD will often be extremely sensitive to being touched, and may have hypersensitivity to loud noises, or even to certain textures and tastes. Each patient will have the ability to deal with only so much sensory input, and then will become “overloaded”, causing them to shut down, flee, or become combative. EMS personnel need to constantly assess and reassess the scene to minimize the chance of the patient experiencing sensory overload.

Locate- It will be extremely helpful if EMS personnel are able to locate a family member, neighbor, friend, or care provider who is familiar with the patient. Those people will most likely be experienced at communicating with the patient, and be of great help as you conduct your assessment of the patient and deliver treatment.

Explain- For patients with ASD, the unknown can be nothing short of terrifying. They will likely be dealing with excessive sensory and cognitive stimuli, and may be very anxious about what is happening to them. EMS personnel should explain exactly what they are doing and why at every stage of the patient assessment and subsequent treatment and transport process.

Support- EMS personnel should also take the time to reassure and support the patient with ASD. Use simple language, a gentle tone of voice, and repeat their name and that they are doing a great job.