Behavior in IDD Case IPE Facilitator Guide

Color key for using this guide: Black ink- general information, background and/or directions Red color- Important information Red color with yellow highlight: Some possible answers to the questions

Dear Volunteer Faculty,

Thank you for participating in our IPE small group discussion. Your role as the small group facilitator is to 1) lead the learners through an interdisciplinary patient case, 2) promote discussion among the group, and 3) obtain student evaluations at the end of the case.

Supplies:

Facilitator Guide

Screen Share Document

IPEC Core Competencies:

VE 2: Advocate for social justice and health equity of persons and populations across the life span. VE 5: Value the expertise of health professionals and its impacts on team functions and health outcomes RR 3: Incorporate complementary expertise to meet health needs including the determinants of health. RR 4: Differentiate each team member's role, scope of practice, and responsibility in promoting health outcomes.

C5: Practice active listening that encourages ideas and opinions of other team members.

TT3: Practice team reasoning, problem-solving, and decision-making.

TT2: Appreciate team members' diverse experiences, expertise, cultures, positions, power, and roles towards improving team function.

Learning Objectives:

Recognize that patients have different communication abilities and styles. Organize an office visit that utilizes the skills of multiple medical providers to provide high quality care. Collaborate with care givers to take a history from a nonverbal patient.

Administrative:

At each session we may have a variety of healthcare learners present. This may include medical students, residents, fellows, PA students, nursing students, medical assistant students, social work students.

Agenda:

10 mins Intro and Icebreaker35 mins Case discussion10 Evaluation, attendance and wrap up and dismiss.

I. Introduction and Icebreaker: Approximate time 10 minutes

1. Introduce yourselves and the overall goal of the session. You can read the statement below or state it in your own words.

The overarching goal is to prepare learners to work as a team in a clinical encounter with a patient that has an intellectual disability and may have different communication styles and needs in their visit.

- 2. Ask students to introduce themselves to the group by sharing the following:
 - a. Name and school (type of training), where they grew up, and why they chose their field.

II. Case Discussion: Approximate time for case 35 minutes

A. Facilitators may read this case or they may ask a student to volunteer to read the following paragraphs:

Chandan is a 25 year-old male who presents to your primary care office to establish care. He has diagnoses of autism, moderate intellectual disability (IQ 54), expressive speech delay, and eczema. He uses a communication device and gets very anxious in medical settings, especially new ones. During rooming, the patient starts yelling when asked to get on the scale to weigh himself. Once in the exam room, Chandan jumps up and down a few times while the medical assistant is trying to put the blood pressure cuff on. At that time the medical assistant stops trying to get vitals and asks the woman accompanying Chandan why they came to see the doctor. The woman states "it's just for a regular checkup."

Discussion: Before moving to the discussion, invite students to ask questions if they have questions about anything. Encourage students to answer any of the questions that arise, but if no one responds, provide the answers.

Questions for Discussion with answers highlighted in yellow:

- 1. How do you feel after hearing the initial part of this case?
 - a. Lots of answers possible afraid, not sure what to do, unhappy that there were no vitals done, etc
- 2. What did the medical assistant forget to do/not do in rooming this patient?
 - a. Medication reconciliation (ask about medications)
 - b. Vitals didn't get done including weight
 - c. Any other history that may be taken in a particular clinic by the MA/RN
 - d. Ask who the woman was and how she was related in the patient's care (it's his mom!)
 - Try talking directly to the patient Chandan and if he doesn't respond ask mom how she typically communicates with Chandan
- 3. If you were the medical assistant, can you think of any ideas of how you could help the patient weigh or get vitals done?
 - a. Ask the caregiver if there are certain things that help Chandan to calm down or certain processes to get vitals done that make it easier for him
 - b. Take a break and move on to another part of the rooming process (med rec, history) and come back to vitals either at the end of rooming or later in the visit
 - Demonstrate doing vitals on mom first or yourself as an MA/RN to show Chandan what to expect next

- d. Do some of the vitals even if you can't get all of the vitals
- 4. Is there anything you can think of that you would want to know ahead of time, before Chandan ever comes to your office? (It's ok if some of the answers are similar to the answers above)
 - a. Who will bring him to the office, how he communicates, anything that scares him or frightens him, anything that may help him feel more comfortable, anything that he really likes, etc

The provider goes into the exam room and finds Chandan standing in the corner clapping his hands and rocking some on his toes. Chandan appears very anxious. The woman with Chandan explains that he is afraid of medical visits because he is afraid of needles. She states she is his mother and long-term caregiver. Mom reports that Chandan really likes Band-Aids. The provider gets a Band-Aid and hands it to Chandan who smiles and sits down next to his mom. Chandan's mom then gets an iPad out of her purse and hands it to Chandan who opens an app with pictures and words. He touches the picture for "thank you" and the device says "thank you" out loud.

The provider asks how she can help and mom states that they used to see a pediatrician but that physician just retired and so they need a new primary care doctor for Chandan. He lives with his mom. His dad passed away (at age 53) a little over a year ago from a heart attack. He used to go to a day program but now he just stays home with his mom all day since his dad's passing. Mom is currently working from home. She has noticed that he is more irritable and cries sometimes. When she asks him about his feelings, he touches the words for friend and dad on his iPad.

- 5. How do you feel after hearing this part of this case?
 - Multiple responses possible, glad that he has a communication device, sad that he lost his dad.
- 6. What medical conditions are more common in individuals with autism?
 - Constipation and other GI issues, aggressive behavior, seizure disorder, intellectual disability, anxiety, depression, adhd, ocd, restrictive eating/feeding issues, disrupted sleep, Down syndrome, schizophrenia, bipolar disorder
- 7. After hearing some of the history and learning what conditions are more common in individuals with autism, what further questions do you want to ask the mom?
 - c. How often does he have a bowel movement? What do they do if he doesn't have a bowel movement?
 - d. Is he aggressive to himself or others (including mom)
 - e. Family history, including dad's heart history
 - f. When was the last time he had blood work
 - g. Depression screening questions (ask more questions about appetite, sleep, anhedonia)

The medical assistant comes back in and gives the patient a Band-Aid and then shows him how she will take vitals on his mom first. Chandan is able to do all of the vitals!

Vital signs: blood pressure 145/92 mm Hg, heart rate of 82beats/minute, O2 saturations 99%, respiratory rate 16, and temperature of 98.1°F. His BMI is 36 kg/m².

The provider then completes a physical exam and follows the medical assistant's lead by first showing what exam steps he will do on mom before doing them on Chandan. His exam is unremarkable except for some acanthosis nigricans on the back of his neck. Chandan is only able to cooperate with parts of the neurological exam, but it appears grossly normal.

Questions for Discussion with answers highlighted in yellow:

- 8. As the physician, are there any diagnoses you are considering in this case
 - a. Insomnia/disrupted sleep, obesity, hypertension, diabetes mellitus, depression, OSA
- 9. Is there any lab work or further testing that you would want to do now? (or receive results from?)
 - a. Hgb a1c given acanthosis and BMI >35 and strong family history
 - b. Lipids given family history and BMI >35
 - c. Bmp given htn
 - d. Other considerations could be made going forward (echo, sleep study)
- 10. What would you do next regarding his blood pressure?
 - a. Recheck again at the end of the visit
 - b. Ask them to start doing a log of blood pressure at home
 - c. Discuss diet modification for weight loss

The provider orders a hemoglobin A1C and lipid testing as the mom is sure that has not been done before. The provider asks the nursing staff to provide some diet education for weight loss as well as basic information on diabetes and lower carbohydrate diet.

- 11. The medical assistant and the nurse are looking for handouts to provide to Chandan and his mom. What types of handouts may be most helpful for Chandan? What would you consider in looking for handouts in this situation?
 - Consider both Chandan and mom's communication styles, consider their culture and foods they like to eat
 - b. Handouts with mostly visuals may be the most helpful for Chandan
 - c. You could bring multiple options to show to mom and see what she thinks would work best – she may want some handouts for her review and a separate style for Chandan

The social work team goes in to meet the family and discovers that they have been struggling to make ends meet since dad passed away.

- 12. If you were the social workers, what further questions could you ask? What resources would you consider to help this family?
 - a. Food stamps (SNAP as it is called in Texas)
 - b. Exploring their insurance -- does Chandan have medicaid? Does he have SSI? Does he have a waiver or on the waiting list for one?
 - c. Local charities or resources for parents of children with autism or individuals with autism

Invite any additional questions or comments from students.

III. Evaluation, Attendance and Wrap-Up Approximate time 10 minutes

*When the session is over (please end promptly), before leaving, ask the students to complete the online evaluations. The student QR code is included in the screen share document.

Student Survey of the IPE Activity

**** link and QR code

During that time, please finalize the attendance by noting who came late, left early, or had any other concerns. Also please complete the faculty assessment of the activity using the URL or QR Code below. You will need to enter the student's names and disciplines into the form so keep that information handy.

Facilitators should complete this form and submit it.

*** link and QR code

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