

**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 \_\_\_\_\_

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**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.

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For more information contact the Autism Society of Maine 1-800-273-5200 or visit our website [asm@asmonline.org](mailto:asm@asmonline.org) or visit [www.aset911.com](http://www.aset911.com)

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, LOCATED ON NEXT PAGE**

## **EMS Patient Assessment- SOLES**

**S**ensory

**O**verload

**L**ocate someone familiar to the person with ASD

**E**xplain everything you are doing

**S**upport 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.