Supporting individuals with face coverings and other COVID-19 related challenges.

In partnership with East Sussex County Council, Adult Social Care Training Team
Introduction

COVID-19 is a challenge to everyone. We have all had to change the way we live our day to day lives in order to protect our health. While most people can adapt to new ways of living, the challenges for some individuals can be greater and may cause anxieties that limit their lives even further.

Anxieties around COVID-19 challenges can include:

- Understanding COVID-19
- Wearing a face covering
- Seeing others wearing face coverings
- Social distancing / isolating
- Hand washing / using hand sanitiser
- COVID-19 swab testing
- Pulse Oximetry (a painless test that measures your oxygen saturation level, or the oxygen levels in your blood)
- Vaccinations

The purpose of this framework is to help support these individuals to feel more comfortable with new ways of living, such as wearing face coverings while out.

The main part of this framework focuses on desensitisation techniques to support someone get used to face coverings, and a short section on desensitisation for swab testing.

Acknowledgements

East Sussex County Council (ESCC), Adult Social Care Training Team, funded by Skills for Care, have developed this framework along with a sample training session and an additional resource list.

We would like to thank the ‘Involvement Matters Team’, a group of self advocates who have learning disabilities, and members of the East Sussex Learning Disability Partnership Board. They find out the views and experiences of people with learning disabilities and represent these views to people who can bring about change.

We would also like to thank the Skills for Care’s ‘workforce expert advisory group’, an expert group of people with a learning disability, autistic people and family members and/or carers, and the ‘Workforce autism group for England’, a group of professional and autistic advocates”.

Terminology

Face coverings: We’ve used the term ‘face coverings’ throughout the framework. This is in line with the government who have been careful to use the term ‘face covering’ rather than ‘face mask’ with surgical masks kept for medical use.

Desensitisation: Familiarisation, getting used to something, feeling comfortable, adapting.
Who is this framework for?

This framework is aimed at anyone involved in the care and support of individuals who may be struggling to adapt during these difficult times (such as individuals who have learning disabilities, and autistic people, and people with dementia).

This may include health professionals, care/support workers, personal assistants (PA's) and family carers.

The framework also includes a sample training plan and resources that may be helpful for individuals with learning disabilities and autistic people.

Training materials

A sample training session has been designed by ESCC adult social care training team, for services that support people with a learning disability and autistic people.

It may also be useful for family carers and personal assistants.

The pack includes a session plan, PowerPoint, activities and facilitator notes. You can adapt and build on the content to tailor it to your organisation and the people you support.

It's important that the trainer or facilitator has a good understanding of person-centred approaches and can explain the Mental Capacity Act 2005 as and when it's appropriate in group discussions.

You can deliver it as a training session or print and use as an information pack and activities along with this framework.

Additional resources

Since the start of the COVID-19 pandemic, different organisations have worked hard to produce some excellent COVID-19 related resources to help individuals with learning disabilities, autistic people, and their family, carers and support workers. These include government guidance, information, advice, easy read documents and you tube videos.

We've collated a selection of these in one document, with a brief overview and link, using the following headings -

About COVID-19
Face coverings and other PPE
Testing for coronavirus
Vaccinations
Coming out of lockdown
Going to hospital
Other health checks

Communication
Well-being and activities
Handwashing
Social distancing and self-isolating
Travel during coronavirus pandemic
Bereavement and loss.

Note: resources availability and content may change over time
Why use face coverings?

Coronavirus (COVID-19) usually spreads by droplets from coughs, sneezes and speaking.

These droplets can also be picked up from surfaces, if you touch a surface and then your face without washing your hands first.

This is why social distancing, regular hand hygiene, and covering coughs and sneezes is so important in controlling the spread of the virus.

Face coverings are largely intended to protect others, not the wearer, against the spread of infection because they cover the nose and mouth, which are the main confirmed sources of transmission of the coronavirus.

You can use a scarf, bandana, religious garment, hand-made cloth covering or disposable mask, but these must securely fit round the side of the face.

It is important to follow all the other government advice on coronavirus (COVID-19).

Exemption

The Government has produced advice on when individuals do not need to wear a face covering.

Things to know

Government guidance on exemption

The Government has produced advice on when individuals do not need to wear a face covering, which includes:

Children under the age of 11 (Public Health England do not recommend face coverings for children under the age of 3 for health and safety reasons).

People who cannot put on, wear or remove a face covering because of a physical or mental illness or impairment, or disability

Where putting on, wearing or removing a face covering will cause you severe distress.

If you are speaking to or providing assistance to someone who relies on lip reading, clear sound or facial expressions to communicate.
Exemption cards

Those who have an age, health or disability reason for not wearing a face covering should not be routinely asked to give any written evidence of this, this includes exemption cards.

No person needs to seek advice or request a letter from a medical professional about their reason for not wearing a face covering.

Some people may feel more comfortable showing something that says they do not have to wear a face covering. This could be in the form of an exemption card, lanyard, badge or even a home-made.

But remember, this is a personal choice and not necessary in law.

Why might someone not tolerate face coverings?

- They may not understand the reasons for the face covering.
- They may find it difficult to recognise people.
- They may rely on seeing people’s faces to help with communication and understanding.
- They may have difficulty with making eye contact.
- They may experience sensory challenges which make it hard to tolerate wearing a face covering; the new feelings of elastic over your ears, material across your face, or the heat caused by the mask can be uncomfortable and overstimulating.
- Wearing a face covering can make it feel like your airflow is being restricted, and for some individuals this could cause feelings of increased anxiety or claustrophobia.
- They may find the smell of the covering difficult to tolerate.
- Wearing a mask can reduce peripheral vision and be distracting when looking down (increases the risk of falls).
- Normal social routines may feel disrupted by the need to wear coverings.
- Seeing people covering their faces might make them feel uneasy or scared.

Why should we try and support someone to wear a face covering?

There are a number of reasons why someone may find it difficult to tolerate face coverings. However, some people may be able to learn to tolerate wearing a face covering, and in that way, it may mean that they are able to return to activities and routines they enjoy sooner. Supporting someone to get used to seeing people wearing face coverings or wearing one themselves may make life less stressful for them.

Care providers might feel more confident in supporting people in the community and to have contact with family if they can wear a face covering.
What is desensitisation?

Desensitisation is a method to teach a person to associate feelings of relaxation with something they previously felt anxious about. Another word for it is ‘familiarisation’.

A common example is where a therapist will help someone who has a fear of spiders, often using relaxation and breathing exercises. Slowly building up from talking about fears, introducing pictures of spiders, being in a room with a spider and eventually holding one.

Desensitisation can be used in many other ways, for example, slowly introducing the face covering, allow the person to see and feel it, wearing it for short periods of time in a safe and comfortable space and gradually building up to wearing while out.

Any plans to support someone to become familiar with wearing face masks must be based on a person-centred approach.

The Mental Capacity Act 2005 states that we should assume that people have the mental capacity to make their own decisions.

Where a person lacks the mental capacity to make a decision, you need to work in line with relevant legislation and guidance, including the Mental Capacity Act (2005), Deprivation of Liberty Safeguards (currently under review) and the Human Rights Act.

Best Interest decisions

Some people may lack the capacity to make a decision to wear a face covering, for example:

- They may not be able to understand the reasons for wearing one.
- They may not be able to communicate a decision about wearing one.

In addition, they may not be able to put on and take off the face covering themselves.

In these situations, a proportionate best interest decision may need to be made.

Things to know

**Best Interest Decisions**

Before deciding that someone lacks the capacity to make a decision, all practical and appropriate steps must be taken to help them make the decision themselves:

- **Provide relevant information** - including choices such as different types of face coverings.
- **Communicate in an appropriate way** - such as pictures and visual aids.
- **Make the person feel at ease** - consider the right environment, time of day, etc.
- **Support the person** - who may be able to help? Who knows the person well? Family, friends, carers?
**Best interest decision check list**
The Mental Capacity Act sets out a best interest checklist, which must be followed when making a best interest decision:

<table>
<thead>
<tr>
<th>Will the person regain capacity?</th>
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<tbody>
<tr>
<td>Involve the person: this can include using desensitisation techniques, observing the person’s response to the face covering.</td>
</tr>
<tr>
<td>Consult all relevant people: friends, family, staff, GP, Learning Disability Teams, Speech and Language Therapy, etc</td>
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<tr>
<td>An Independent Mental Capacity Advocate (IMCA) should be considered if testing is required and the client lacks compacity to consent and is un-befriended.</td>
</tr>
<tr>
<td>Consider all the information: such as different types of face coverings, places the person will be going, who they will be seeing, etc</td>
</tr>
<tr>
<td>Do not make any assumptions.</td>
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<tr>
<td>Consider past, present and future wishes.</td>
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<tr>
<td>Always choose the least restrictive option: please see next section.</td>
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<tr>
<td>Any best interest decision made must be clearly recorded.</td>
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**Least restrictive option**
If a best interest decision is made for a person to wear a face covering, you must ensure it is a proportionate decision and carefully consider the least restrictive option.

- There are some people who are unable to put on and take off a face covering themselves. They may also find it difficult to communicate how they feel about wearing one.

- It’s important to consider the type of face covering used, for example, what may be most comfortable, maybe a bandana that provides air flow, rather than a mask the loops around the ears.

- Consider when and where the person wears the face covering. For example, while inside a shop they may wear one, but remembering to help them remove it when back outside, just as we may do so ourselves.

- When removing someone’s face covering, be gentle and explain what you are doing. They may need support to dry their face around their nose and mouth after wearing a covering, ensuring this is done in a dignified manner.

- To ensure you keep a regular check on the person, recognising any subtle clues of discomfort, this may be through their vocal sounds or sometimes just subtle eye movements; keep a record of any signs of possible discomfort and ensure other support workers are aware of them.

- Keep the person informed of what you are doing, no matter what level of learning disability. Use the face covering as a visual clue (object of reference) to show the person before putting it on, explaining what you are doing and why. Provide plenty of reassurance.
Recording Best Interest Decisions
Good practice in recording Best Interest Decisions will include:

Who is the decision maker?

Note: Who the decision maker is will depend on the decision being made.

For most day-to-day decisions, this will be the person caring for the person at the time a decision needs to be made. The decision maker could be:

A social care worker proposing a support plan – if the decision involves whether or not to accept proposed care.

For medical treatment – it would be the doctor, nurse of healthcare staff responsible for carrying out the treatment/procedures.

Who was involved in the decision making process.

Is there any one most involved in this person’s care/life?

This should include any friends or family, professionals and should detail name, contact details, their role and nature of their involvement in the person’s life.

What is the decision.

What are the persons wishes (these can be expressed by a friend/relative where necessary – the source should be noted).

Views of other professionals, friends and family.

Benefits and burdens of options (weighing up the ‘benefits and disadvantages’).

The outcome of the decision making.

Any steps to minimise risk.

If any further assessments are required.

For further information on relevant legislation and guidance:

<table>
<thead>
<tr>
<th>Description</th>
<th>Link</th>
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<tbody>
<tr>
<td>Easy-read document</td>
<td><a href="#">Document</a></td>
</tr>
<tr>
<td>The Mental Capacity Act (2005) (MCA) and Deprivation of Liberty Safeguards (DoLS) during the Coronavirus (COVID-19) Pandemic.</td>
<td></td>
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<tr>
<td>Guidance</td>
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</tbody>
</table>

Including guidance on testing someone who lacks the relevant mental capacity without their consent.
Supporting someone to understand why a face covering is important can be a good starting point with desensitisation.

### Things to try

<table>
<thead>
<tr>
<th>Communication</th>
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<tbody>
<tr>
<td>Consider who is best to have the conversation with the person; someone they know well and trust.</td>
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<tr>
<td>Consider the environment; reduce distractions and background noise.</td>
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<tr>
<td>Consider the time of day; does the person respond better at different times of the day.</td>
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<tr>
<td>Allow time for the conversation to take place – don’t rush.</td>
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<tr>
<td>Ensure the person is feeling relaxed and comfortable.</td>
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<tr>
<td>Follow communication guidance in support plans where available.</td>
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<tr>
<td>Be prepared; have everything you need to hand to have the conversation, including any pictures, objects of reference, videos.</td>
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<tr>
<td>Use accessible language; avoid jargon or long words that might be hard to understand.</td>
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<tr>
<td>Observe the person; they may tell you things by their body language and facial expressions.</td>
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<tr>
<td>Listen and respond to the person appropriately.</td>
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<tr>
<td>Take time to check the person understands you and that you understand them.</td>
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<tr>
<td>Record the conversation and outcomes and pass on to relevant people.</td>
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<tr>
<td>Be creative and adapt to each individual. Consider the person’s usual method of communication, can you find, create or adapt something?</td>
</tr>
<tr>
<td>Use any communication tools that are available to support the conversation. See the resource section for further information and examples.</td>
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</tbody>
</table>
### Different types of face coverings and adjustments

**Provide choice and make it fun!**

- Clip to a hat or headband.
- Clip the loops behind the head with hair clips.
- Tie loops around headphones.
- Tie the face covering more tightly or more loosely with knots.
- Choosing one that is the most comfortable, consider different types fabric, for example, cotton may be more comfortable than polyester.
- Choosing their preferred mask design, favourite football team or superhero for example.
- Choosing preferred fabric to make their own face covering.
- Different shapes of face masks - some sit closer or further from your face, others are more rounded, and some have elastic that goes behind your ears or around your head.
- A bandana that covers your nose and mouth but allows for more airflow from below.
- A circular scarf or headband pulled up over your nose and mouth.
- Transparent face masks that are clear around the mouth.
- Consider the smell of the face covering. Does the person have a favourite scent, maybe perfume, aftershave or a drop of scented oil, such as lavender.
- Be creative and adapt to each individual. Consider the persons usual method of communication, can you find, create or adapt something?
- Use any communication tools that are available to support the conversation. See the resource section for further information and examples.

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**REMEMBER!** Hand washing or using hand sanitiser is an important step for everyone before and after using face coverings.
The people we support have to wear masks if attending health appointments, using public transport or going into shops (unless they are exempt).

We wanted to try and encourage all the people we support to wear face coverings when out in these places, in order to keep them and others safe.

We suspected that if each person had a bespoke face covering depicting something of importance to them, that this may make it more likely that they would be happy to wear them.

Keyworkers who know each individual well searched online to see if there were any face coverings with relevance to each individual’s interests and likes.

We searched online for bespoke and unusual items. We managed to find face coverings with favourite football teams, Star Wars, The Grinch and a Skull!

They were all given as gifts for Christmas and went down a storm!

**Top tips**

**Each person is an individual** - The person-centred approach is the best approach to take in all aspects of care and support. People want to be treated as individuals and have this recognised and understood across all aspects of their lives.

**Respect people’s decisions** - This approach has meant that individuals actually get quite excited about putting on their own special face covering, and do not see it as something unpleasant.
## Desensitisation ideas: wearing a face covering

This will depend on the individual and may involve some trial and error.

It can be helpful to break tasks down into manageable steps,
- making time between each step, ensuring the individual feels comfortable before moving on to the next step. For example:
- holding the face covering
- bringing it towards the face
- touching the covering to their face
- fitting the elastic over one ear
- then over the other ear.

<table>
<thead>
<tr>
<th>Things to try</th>
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<tbody>
<tr>
<td>Looking at pictures / videos of people wearing face coverings.</td>
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<tr>
<td>Holding the face covering, feeling the fabric.</td>
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<tr>
<td>Bringing the covering towards their face.</td>
</tr>
<tr>
<td>Rubbing the fabric on their cheek.</td>
</tr>
<tr>
<td>Slowly fitting the elastic over the ears – try one side at a time.</td>
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<tr>
<td>Keeping it on for specified amounts of time; start with a short amount of time, even if only a few seconds.</td>
</tr>
<tr>
<td>Once it is on, a visual timer may help to indicate how much time remains (start with just a few seconds and work up).</td>
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<tr>
<td>It may help if the support worker does the same throughout the process.</td>
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<tr>
<td>It might be useful to practice with the person in front of a mirror.</td>
</tr>
<tr>
<td>Wearing the face covering during a favourite activity such as watching TV, playing a video game, using an i-pad, baking, etc.</td>
</tr>
<tr>
<td>Make the first outing outside wearing a face covering short, such as a walk around the block.</td>
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</table>
Peter (not his real name) had previously spent time in an assessment and treatment unit as his behaviour had been very challenging due to anxiety about changes to routine. He is an autistic man, and has 24-hour support in a supported living service.

He was very keen to go to the hairdressers. His support staff recognised that he was motivated to learn what he needed to do in order to be able to go to the hairdressers. Staff who support Peter considered how he liked to learn. They knew he would prefer one to one support from staff whom he got on with.

Staff explained to him that there were germs around and that he would have to do things differently than before.

The staff explained all the steps needed in order to go to the hairdressers. They showed him each of the steps needed how to put the mask on and take it off. They explained about when he would need to wear the mask, and when he could take it off. This included travelling on the bus as well as going into the hairdressers.

In order to make sure that Peter understood what he needed to do, staff asked him to explain when he would need to put on his mask. They reinforced this with him every day up until the appointment. He was able to tell people exactly what he needed to do. Staff praised him and gave him positive feedback about how well he was doing.

The staff also role modelled using hand sanitiser and encouraged Peter to copy what they were doing.

Staff ensured that there wouldn’t be any last-minute problems at the hairdressers. They did this by checking with the hairdressers in advance of the appointment to make sure that they were complying with sanitising and screening guidance.

**Top tips**

**Repetition and praise** - by repeating what was needed, Peter became used to the process, and often reminded himself, and others, of what needed to be done, in order to stay safe.

**Find motivators** - The trip to the hairdressers was the motivation Peter needed in order to wear the mask and keep his hands clean.
# Things to try

**Desensitisation ideas: seeing others wear face coverings**

This will depend on the individual and may involve some trial and error

<table>
<thead>
<tr>
<th>Activity</th>
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<tbody>
<tr>
<td>Allow the person to see the family member / staff put on the face covering.</td>
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<tr>
<td>Sit opposite each other and make a game of putting them on and off.</td>
</tr>
<tr>
<td>Wear a laminated photograph of yourself; maybe a lanyard with a photograph and ‘this is me’ or name printed below. The person you are supporting may also want to do the same.</td>
</tr>
<tr>
<td>Try clear masks – there are lots of different designs to be found online.</td>
</tr>
<tr>
<td>Remind the person who you are; this may have to be done frequently.</td>
</tr>
<tr>
<td>Remind the person why you are wearing a face covering, for example, “I know I look funny but I’m wearing this to protect us from bugs and germs”.</td>
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</tbody>
</table>
Before Covid, Simon (not his real name) used to go to a day centre 4 days a week and visit his sister each week. Unfortunately, due to Covid, many of Simon’s routines changed, and this change often meant that Simon felt frustrated and angry. Simon’s support staff were concerned that the lack of his usual routine would cause an increase in behaviours that challenge. They wanted to achieve stability for him and a sense of safety for him.

He had a good relationship with his keyworker, Charles. Charles immediately involved Simon in activities around the home to ensure that he was engaged and distracted. One day, Simon and Charles were chatting, and Charles asked Simon if he would like to wear a mask, just like he did.

This created a bonding and connection between Simon and Charles, and he was very happy to wear the mask. They now had a common purpose in wearing a mask. Simon and Charles have now been able to go out more.

Simon has found that he feels safe and comfortable wearing the mask. During this uncertain time, and he likes to put the mask on in the morning, and wear it all day, just like his staff team do.

Top tips

Be a role model - We learnt that, with the right support and understanding, we could help Simon feel safe. The modelling and routine of wearing a mask has really helped him understand why all of his staff team are wearing masks.

Don’t prejudge people’s reactions - We were expecting challenges with the change to routine and the fact that everyone was at home all day long. However Simon proved us wrong and there have been no incidents of him being angry.

Create trust - This experience has taught us that it’s the relationships with people that really matter.
**IMPORTANT!**

Don’t rush.

Try each step slowly – this could be a long, slow process for some people.

Observe the persons reactions carefully.

Keep anxiety to a minimum.

Try and make it a fun experience/activity.

Don’t leave the practice until absolutely necessary, such as going to hospital.

Keep a record of what steps you have taken and progress.

Ensure that everyone is working in the same way with the individual.

Always take The Mental Capacity Act 2005 and best interest decisions into consideration (see legislation section).

Remember the exemption rule!

This may not work for everyone! You may try lots of different approaches and the person may still find it very difficult to tolerate a face covering.

Remember the exemption rule, you mustn’t put anyone under undue pressure to wear a face covering.

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**Recording**

**Things to know**

**Recording**

Recording is an important part of any support you provide. For support provided around supporting individuals to wear face coverings and other COVID-19 related challenges, you will need to consider recording:

- A person centred approach to risk: Risk assessments
- Support plan, including what needs to happen, how, when and by who.
- Monitoring of progress, including what’s working/not working.
- Best Interest Decisions (See Best Interests section in this framework for further details).
Swab testing—desensitisation ideas

The nasal/oral swab can induce significant anxiety and stress for anyone, but particularly for individuals with learning disabilities and autistic people. Preparing individuals in advance for what to expect can help the process go more smoothly.

The principles of desensitisation can also be used for swab testing.

**Things to try**

<table>
<thead>
<tr>
<th>Desensitisation ideas: swab testing</th>
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<tbody>
<tr>
<td>Consider the environment; is the person comfortable.</td>
</tr>
<tr>
<td>Take thing slowly and gently.</td>
</tr>
<tr>
<td>Explain why the test is needed; consider the persons’ communication methods. See the resource section for easy read materials such as social stories and videos which explain the process.</td>
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<tr>
<td>Explain that it may be a little bit uncomfortable but give the person tools or ideas on how to stop the process, such as raising a hand or pointing to a stop symbol.</td>
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<tr>
<td>Explain that you (or the person carrying out the test) will be wearing a mask, an apron and gloves. Show the person what you will look like.</td>
</tr>
<tr>
<td>Use a clean cotton bud to demonstrate on a doll or teddy bear. Allow the person to hold a cotton bud to feel it. Encourage them to try it on the doll.</td>
</tr>
<tr>
<td>Complete the test when the person is relaxed; if possible, encourage relaxation techniques such as taking 3 deep breaths; breathe in through the nose and blow out of the mouth.</td>
</tr>
<tr>
<td>Distraction methods may help; provide the person with headphones for music, a tablet or phone playing their favourite film or game.</td>
</tr>
<tr>
<td>Provide a favourite item they can focus on, such as a ribbon that they like to twiddle.</td>
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<tr>
<td>For some autistic people, especially those with high levels of anxiety, deep pressure stimulation may have a calming effect. This can be done through a weighted vest or blanket; consider what usually has a calming effect on the person.</td>
</tr>
<tr>
<td>Give clear instructions, such as: “open your mouth” “stick out your tongue” “say ‘ahhhhh’”</td>
</tr>
<tr>
<td>Provide lots of reassurance and praise throughout.</td>
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</tbody>
</table>

The Mental Capacity Act (MCA) is at the heart of good, empowering practice in health and social care. This quick guide aims to help people across social care and health settings to apply its provisions about making best interests decisions for or on behalf of people who lack the relevant capacity in the context of the COVID-19 pandemic.