

AUTISTIC COMMUNICATION TOOL (A.C.T.) FOR USE IN PRIMARY CARE CONSULTATIONS

Patient Name:		Date:	
provided to help w our consultation, ki	nical Staff: formation below. It provides essential information about my notith communication within the consultation. Please read and rendly check if everything has been covered. Please note that auterefore body language and verbal expression may not be a	eturn to pa	tient. At the end of e can express pain
Please add a 'Reas	onable Adjustment' flag to my patient record (Circle as approp	oriate)	Yes / No / N/A
Communication No	eds:		
Factors to Conside	r for Physical Examinations:		
Issue(s) to be discu	assed in consultation:	Fro	ont / Back
Further details:			
Other relevant con	ditions/medications to note:		
	Please write details here of any next steps/advice received. This will he clude details of medication or referrals. tation:	elp me reme	ember and act upon
Actions by Patient			



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Instructi	ions for	Care Nav	iaators	Recept	ion Staff:
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I would like to make you aware that I am autistic, and I sometimes find the areas designated for waiting prior to an appointment overwhelming. Where possible, please provide me with the following reasonable adjustments:

Waiting Area	Tick as appropriate
Where possible, is there a quiet place for me to wait?	
Where possible, is there an area with low lighting for me to wait?	
If an appropriate place is not available, would it be possible for me to wait in the car/alternative place nearby and you ring me on when my appointment is ready?	
I would like to use noise-cancelling headphones in the waiting room to help me cope with the environment. I will not be able to hear an auditory call when my appointment time comes. Could you please alert me by:	
Please may I be kept informed of waiting times or if the healthcare professional is running late.	
Other:	

Signs of me being overwhelmed whilst waiting:

I may become overwhelmed being here, especially if there is too much noise/light/waiting time. When I am distressed, I may:

In order to help me, I would like you to: