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Simulation Scenario: Communication

Intellectual Disability Health Capability Framework Resources



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Description

This simulation scenario is part of a suite of resources designed to support the [Intellectual Disability Health Capability Framework](#). The Framework aims to equip pre-registration students studying health, allied health, dentistry and other health-related disciplines with the required core capabilities to provide quality health care to people with intellectual disability.

The simulation scenario focuses on effective communication between health professionals, people with intellectual disability, and their supporters. Set in a pharmacy, the simulation provides a brief for students to role-play a customer with intellectual disability, their support worker, and the pharmacist in the scenario. Educators are encouraged to employ an actor with intellectual disability to take part in the simulation where possible.

Two versions are provided so students can practice different communication skills.

Additional resources are also available for educators to support integration of the Framework into existing curricula. Please see the [Intellectual Disability Health Capability Framework and education resources](#) to view all available resources.

Simulation scenario: Communication

This simulation scenario focuses on effective communication between health professionals, people with intellectual disability, and their supporters. The setting is a pharmacy, where a person with intellectual disability and their support worker present with a prescription to be filled. Students work together in groups of 3, and each student in the group chooses 1 role to play – either the role of the pharmacist, the person with intellectual disability, or the support worker. There are 2 versions of the scenario. Educators are encouraged to start with Scenario A, which lets students practice communicating directly with a person with intellectual disability using verbal and non-verbal communication methods. Scenario B then focuses more on non-verbal communication and working with supporters. This simulation is a resource that supports the integration of the [Intellectual Disability Health Capability Framework](#).

Aims

1. Demonstrate effective communication with people with intellectual disability using verbal and non-verbal methods
2. Be able to explain to the person with intellectual disability, their carers or support staff the process of assessment and treatment in a clear manner.

Capabilities and Learning Outcomes

2.1 Communicate directly with the person with intellectual disability – Demonstrate strategies to engage and directly communicate with people with intellectual disability, using their support networks as appropriate.

2.2 Adapt communication – Identify how communication might be adapted to a person with intellectual disability's preferred ways of communicating and how Augmentative and Alternative Communication (AAC) resources may support this.

2.4 Communicate to reassure – Evaluate the person's understanding throughout the health care interaction and respond with appropriate information.

3.16 Health literacy for people with intellectual disability and their support networks – Provide accessible and relevant health information to people with intellectual disability and their support networks.

Simulation with a lived experience actor

There is also an option for an actor with lived experience of intellectual disability to play the role of Chris. This has the advantage of the students experiencing direct interaction with a person with lived experience and receiving more authentic feedback. The Co-education Toolkit has tips on how to engage lived experience educators (see the [Framework and education resources](#) page for a copy).

Scenario A

Facilitator guide

The aim of this simulation scenario (see below) is to have students consider how they would communicate with a person with intellectual disability and with support staff. Divide the students into groups of 3. Each group will enact the same scenario, playing the roles of Chris, Ashley, and Morgan respectively. Give the students 5 minutes to read the scenario and their briefings. Allow 15-20 minutes for them to act out the scenario. Do not comment or correct until the end, when they have finished.

Ashley (the pharmacist) needs to ask Chris (a 34-year-old with intellectual disability) if they have any allergies, give clear instructions on how to take their medication, and communicate what they should do if they experience any side effects. They also need to know how Chris will be supported to take the medication.

Ashley needs to use appropriate communication methods which can include the following:

- Speak directly to Chris and not only to Morgan. If Chris does not understand, Ashley may ask Morgan how they should communicate with them. If Ashley uses complex words, they should provide more explanation to help Chris understand.
- Short sentences with 1 concept per sentence.
- Plain English and no medical jargon.
- Ashley (or Morgan) may need to use pictures if Chris does not understand.
- Ashley should let Chris know how and when to take the medication, possible side effects, how to remember to take the medication, and what to do if they miss a dose, or take double the dose by mistake.
- Instead of saying to Chris “take the medication 3 times a day”, it is better to connect the timing of medication to daily events e.g., before breakfast, before lunch, before dinner.
- Check Chris’s understanding by asking them to repeat the instructions. It is not enough for Ashley to say, “do you understand that Chris?”, as many people with intellectual disability may acquiesce and say “yes”, even if they have not understood.
- Ashley also needs to find out from Morgan the level of their support for Chris. They only provide drop-in support, so cannot always supervise Chris taking medication.
- Ashley needs to provide the same information to Morgan (support worker), but in a written form. This includes what to do if Chris has side effects.

The above strategies can be suggested if students need prompting, or if it becomes apparent during the post-scenario discussion that common unhelpful communication methods were used (such as Ashley only speaking to the support worker, the use of jargon, or not checking understanding).

Suggested discussion points/reflections

- Ask each of the 3 students what they felt went well and what they felt was difficult.
- Ask them what they would have done differently.
- Provide feedback based on the communication methods listed above.

Simulation Scenario A – Information for students

Setting – Suburban pharmacy

Chris is a 34-year-old person with a mild range of intellectual disability. Their GP has recently prescribed an antibiotic for a chest infection. It needs to be taken 3 times a day on an empty stomach. Chris presents to their local pharmacy with Morgan, their disability support worker, to have the prescription filled and get their medication. At the pharmacy, Chris and Morgan are greeted by the pharmacist, Ashley.

Roles

Briefing for Chris

- You live independently and Morgan, your support worker, comes on Monday, Wednesday and Friday afternoons to help you with shopping, banking, and meal preparation.
- You can understand others if they speak clearly and in plain English. If someone speaks to you using complex words, you should ask for more explanation to help you understand.
- You speak in short sentences, cannot read, write, or tell time.
- You do not take regular medications. You are able to go independently to your GP for minor complaints and have any blood tests that need to be done.
- You have a chest infection, and your GP has given you a prescription for an antibiotic.
- If Ashley (the pharmacist) is speaking in long sentences, using big words or jargon, you need to tell them that you do not understand.
- Think about what questions you might ask Ashley about the medication (e.g., how and when to take the medication, side effects, how to remember to take the medication, whether it matters if you miss some doses, or take double the dose by mistake).

Briefing for Ashley

- You are a pharmacist, started working at this pharmacy recently and have not met Chris before. Chris has been prescribed an antibiotic for a chest infection.
- Before dispensing the antibiotic, you need to find out from Chris what other medications they take; if they have taken this antibiotic before; and if they have had any side effects or have allergies.
- You also need to tell Chris clearly when and how to take the medication; what side effects to look out for, and what to do if they happen.
- Chris speaks in short sentences and understands plain English. They cannot read or tell the time.
- Chris lives independently with drop-in support from Morgan, their support worker.
- Think about how you will communicate this information to Chris. How will you check that they have understood the information you have given them?
- What information does Morgan, Chris's support worker need to have to support Chris, and how will you communicate this to them?

Briefing for Morgan

- You are Chris's support worker and have been working with them for about 2 years. You see Chris for 2 hours on 3 days a week to take them food shopping, do their banking, and help them prepare meals that they can put in the fridge or freezer to eat on the other days.
- Chris can understand others if they speak clearly and use plain English. Chris speaks in short sentences, cannot read, write or tell time. They have been prescribed an antibiotic for a chest infection. They do not take regular medications.
- You can remind the pharmacist to talk directly to Chris if they speak only to you. What communication strategies would you suggest to Ashley if they are having trouble communicating with Morgan?
- Think about how you can support Chris to take the medication. You will need to relay this information to the pharmacist.

Scenario B

Facilitator guide

Scenario B (see below) is an additional version of the simulation scenario that focuses more on non-verbal communication and working with supporters.

In this version, Chris has a more significant level of intellectual disability, in the moderate range, with greater communication difficulties. Chris lives in supported accommodation (a group home) with full time staff support. Chris can shower, toilet and dress with some staff support. Chris requires staff support to go to medical appointments and take medication. Chris understands routine short phrases and has no speech. They communicate with sign language, gestures and a picture communication board.

Ashley will need to adjust their communication methods accordingly with Chris and recognise the greater level of support worker involvement in supporting Chris. Even though Chris does not speak and has limited understanding of verbal communication, it is important that Ashley still asks questions and communicates information to them. Ashley will need to ask Chris and Morgan about the best ways of communication.

Simulation Scenario B – Information for students

Setting – Suburban pharmacy

Chris is a 34-year-old with a moderate range of intellectual disability. Their GP has recently prescribed an antibiotic for a chest infection. It needs to be taken 3 times a day on an empty stomach. Chris presents to their local pharmacy with Morgan, their disability support worker to have the prescription filled and get their medication. Morgan is carrying Chris's picture communication board. At the pharmacy, Chris and Morgan are greeted by the pharmacist, Ashley.

Roles

Briefing for Chris

- You live in a group home with full time staff support. You can eat, shower, toilet and dress yourself with some support, but staff give you your medication and take you to medical appointments.
- You can understand routine short phrases, such as “let’s go” or “time for dinner”, but not long or complex sentences. You have no speech, and communicate with gestures, sign language, and a picture communication board.
- You have a chest infection, and your GP has given you a prescription for an antibiotic.
- If Ashley (the pharmacist) only talks to Morgan (your support worker) and not you, or starts to talk to you to explain about the medication, shake your head and point to the picture communication board.

Briefing for Ashley

- You are a pharmacist, started working at this pharmacy recently and have not met Chris before.
- Chris has been prescribed an antibiotic for a chest infection. Before dispensing the antibiotic, you need to find out from Chris what other medications they take; if they have taken this antibiotic before; and if they have had any side effects or have allergies.
- You also need to tell Chris when and how to take the medication; what side effects to look out for, and what to do if they happen.
- Chris does not speak, and Morgan (their support worker) tells you that Chris understands only routine short phrases and uses gestures, sign language, and a picture communication board.
- Think about how you will ask the questions and communicate the information to both Chris and Morgan. What information does Morgan need to support Chris, and how will you communicate this to them? How will you check their understanding of what you have told them?

Briefing for Morgan

- You are Chris's support worker and have been working with them for about 2 years in the group home. You give Chris their medication, take them to medical appointments and shopping. You support Chris with personal care activities.
- Chris can understand routine short phrases, but not when people speak in long or complex sentences. They have no speech and communicate with gestures, basic signing and a picture communication board.
- Chris has been prescribed an antibiotic for a chest infection. They do not take regular medications.
- You should remind the pharmacist to communicate information to Chris if they speak only to you. What communication strategies would you suggest to Ashley if they are having trouble communicating with Chris?
- Think about what questions you need to ask Ashley and how you can support Chris to take the medication. You will need to relay this information to the pharmacist.

Resources

There are further education resources that can be downloaded for free from the [Framework and education resources](#) collection page.

- Co-educating with Lived Experience Educators to enhance students' capabilities in intellectual disability health — A Toolkit for Tertiary Educators
- 'Introduction to Intellectual Disability Health Care' and 'Communication' lecture plans, lecture reference book, and tutorial activities
- Case studies on each of the 6 capability areas in the [Intellectual Disability Health Capability Framework](#), and case study films on communication and supported decision-making
- Example assessment questions
- Supporting intellectual disability placement opportunities for future health professionals: Connecting with the disability sector information sheet

Health.gov.au

All information in this publication is correct as at May 2025

