How Aphasia Friendly is our health system? Annette Rotherham MSc. BSLT
Presentation Overview

The impact of aphasia
How it affects users of the health system?
What can be done to improve the patient experience?
What is the role of SLT?
What is the role and responsibility of all health professionals?
Now consider the following re-definition of aphasia:

*Aphasia* is... “a communication impairment that *impacts identity and relationships because of difficulties speaking, understanding, reading and writing.”
why we should care about aphasia?

Aphasia is a language problem that *masks inherent competence* and has the most dramatic impact on conversational interaction.
why we should care about aphasia?

- Conversation is core to the ability to participate in everyday life but is currently not listed as an essential ADL
why we should care about aphasia?

• Without conversation, every relationship, life role and most activities are at risk:

• Loss of self esteem

• Profound sense of social isolation – depression – negative impact on health
why we should care about aphasia?

- Aphasia results in language barriers to *accessing healthcare.*
Recommendations:

- Communication and conversation should be seen as an essential ADL.
- No patient should be discharged without an evaluation of communication and supports needed,
- Training should be provided for key family on how to communicate with that person.
Evidence:

- Majority (88%) of Patients on an ASU will have a form of communication impairment. (O’Halloran, Worrall, Hickson, 2009)

- Communication referrals will be a lower priority for SLTs (Armstrong, 2003)

- SLTs follow traditional models for assessing and managing communication disorders in the acute environment (Ferguson, 2013, Armstrong, 2003)
Evidence:

- People with aphasia have **the least interaction time** on a ward. (Godecke, 2014)
- People (staff, family, friends) who experience communication failure with a PWA will be **less likely to interact** with that person again. (for staff that also means other PWA)
- PWA are **excluded from decision making** and **providing consent** for medical interventions.
What is aphasia friendly?

- Making **information accessible** for people with aphasia
- Making the **environment accessible** for people with aphasia

(Howe, Worrall, Hickson, 2004; Rose et al, 2010)
Aphasia Friendly (Australian Aphasia Rehabilitation Pathway)

- material adapted for people with aphasia.
- simple vocabulary,
- simple syntax,
- short sentences,
- large and standard font,
- relevant pictures,
- appropriate layout
- low reading grade level.
People with aphasia will have communication success in the NZ health system

- SLT has skill set to fulfil role
- Environment facilitates communication
- IDT have strategies to communicate
- Person with Aphasia
Goal 1: Create a supportive communication environment

- Resources for IDT to use
- Training for IDT
- Aphasia friendly information about procedures
Barriers reported by patients

- Not understanding about medical procedures, not giving true consent
- Communicating with family
- Patients have passive attitude in hospital setting
Goal 1: How easy is this to achieve?

- Introducing resources is relatively simple. www.aphasiafriendly.com
- Barriers – time, funding for resources
- Needs a champion
- Caseload never sleeps
- Time to train the IDT
Creating an Aphasia Friendly environment:

• Make info about aphasia visible - posters, tips for communication etc.
• Have Aphasia Friendly info made for consents, family meetings, power of attorney situations etc.
• Have pictographic info available: menus, medical procedures, Aphasia Institute resources
• Website
• Have whiteboards available... paper gets wet!
Education of the IDT

• Need to emphasise that SLT is going to spend 30-60 minutes with a patient.
• There are 23 hours of the day left in which that person needs to communicate.
Creating an Aphasia Friendly environment:

- Make sure 2-3 key communication strategies are visible for conversational partners eg.
  
  1) speak slowly
  
  2) write key words as you speak

- Train all staff to use SCA
- Have whiteboards avail....paper gets wet!
Goal 2: Include family

- Use notebooks to communicate with family and friends, provide SLT contact info.
- Call families
- Family info sessions “communicating successfully with your family member after stroke”
Goal 2: how easy is this to achieve?

- Relatively easy.
- Families are eager for information
- Opportunity to ask questions
- Need to judge the best time/day etc

**Barriers:**

- Room availability
- Short length of stay
Goal 3: Participation and involvement in decision making

- Health and Disability Code of Rights?
- Are the rights of people with aphasia being met?
- The right to **effective communication**, 
  - The right to **informed consent**
  - The right to **receiving information**.
WHAT IS OUR ROLE?

With patients

With the IDT

SLT

With families
Role with patients

- To provide evaluation of their communication strengths and deficits
- To be an advocate for the communication disability of aphasia
- To provide support and reassurance
Role with patients continued

- To use strategies and SCA
- To provide information and education about aphasia
- To provide conversational opportunities
- To document appropriately about all these areas and ensure they are accounted for.
Role with families,

- Provide support and information about aphasia and about ongoing support in the community
- To reveal their competence. ‘I’m still me’
- To model strategies and SCA
- Provide resources to be used on the ASU
- Provide contact information about SLT and ongoing services
Role in the IDT

- To ensure the team know the best strategies to use for each patient with aphasia.
- To reveal *competence of the person*..not the disability.
- To provide resources to be used on the ward.
Role in the IDT continued

- To provide education and in-servicing
- Model strategies and advocate for PWA to be involved in decision making and family meetings as appropriate.
- Provide diagnosis and prognostic information
Have a toolbox...use it!!
• Thoughts......
• Questions??