

ATiA 2021

**Interactions with Healthcare Professionals:
Experiences of People who use AAC**

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Speaker Disclosures/Session Disclosure ATiA 2021

Financial Relationships

- David Chapple and David McNaughton
RERC on AAC

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Learning Objectives ATiA 2021

- Identify 4 key activities to support improved communication between people who rely on AAC and healthcare professionals during medical appointments
- Describe 3 examples of the positive impact of the 4 key activities for people who require AAC
- Describe 3 steps that people who rely on AAC, significant others, and AAC professionals can take to prepare for interactions with healthcare professionals

WHAT IS MY PROGNOSIS?
WHAT WILL HAPPEN NEXT?
I'M IN PAIN.
WHAT ARE MY OPTIONS?
I WANT TO DISCUSS MY OPTIONS.
I HAVE ANOTHER QUESTION.

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Session Evaluation and CEUs ATiA 2021

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Interacting with Healthcare Professionals

- Almost 20% of admissions result in harm
 - Over 60% were preventable
- Patients with communication challenges are 3x more likely to experience an adverse event

WHAT IS MY PROGNOSIS?	
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Communication Breakdowns


- Pain and suffering
- Financial cost
 - \$ 6.8 Billion per year



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- The ability to express one's wants and needs, to engage with friends, family, and caregivers, and to participate in decision-making processes is a basic human right that is most important during times of a medical crisis.
- Hurtig et al , 2019



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Joint Commission's Hospital Accreditation Standards (2010)

- all patients must have access to their preferred mode of communication and that hospitals must address any communication barriers.
- hospitals must find ways to enable their patients to summon a nurse or another care provider and to effectively communicate with the provider they summoned.

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PACT (Bruns, Baylor, & Yorkston, 2016)

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- Prepare for the visit
- Ask questions
- Create a plan
- Take away material

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Prepare for the visit

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Be ready to

- Discuss the key goals
- Use your AAC system
 - Inform your healthcare provider how you want to communicate.
 - Summarize concerns and
 - Ask questions

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Kate Chapple

- Austin, Texas
- Austin Independent School District
- Natural speech, Accent 1400 with Unity 144


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Tracy Rackensperger, Ph.D.

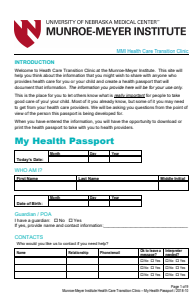
- Athens, Georgia
- University of Georgia
 - *Institute on Human Development and Disability*
- Natural speech
- iPad with Proloquo2go
- Google Pixel Slate
- ECO with Unity.

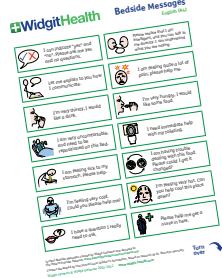


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Communication Passports





These things are important to me

How to communicate with me:

I can hear fully and understand people (no need to speak loud, yell or talk slowly). I can understand to answer questions and/or no. However please make sure I have access to my communication device at all times and allow me time to answer or respond myself at my own pace. The device needs to be powered on completely and set at my level. In order for me to use my communication device I need my glasses because they have a reflective dot which is the camera eye to operate. The dot on my glasses needs to be in direct sight with the camera on top of my communication device.

How I take medication (crushed tablets, injections, syring, etc):

I can swallow the pills with a drink from my sports bottle. Place the pill in back of my tongue and squirt liquid from the sports bottle in my mouth. Pills may be cut in half if needed but usually not to need necessary.


How you know I am in pain:

I can feel it hurt and pinpoint the pain to better communicate to my attendants or medical personnel when and how it hurts.

Moving around (posture in bed, walking aids, etc):

Personal wheelchair that is controlled with my head and knee.


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Ask questions

Prepare in advance

- Mini-display with questions written out?
- Common questions
 - Diagnosis
 - Test
 - Treatment
 - Medication
 - Procedures for taking, side-effects





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Josh Ford

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- Cleveland, Ohio
- Cuyahoga Community College
- Dynavox



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David Chapple


For the most part, the hospital staff treated me with respect and dignity.

Everybody that was involved with me wanted to make me as comfortable as possible.

The majority of people realized right away that I was an intelligent adult.



They were comfortable while talking to me and tending to my needs because I was able to give them instructions.



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Create a plan

How and when will patient

- State concerns
- Ask questions
- Identify follow-up steps, after the visit completed

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Rosemary Musachio

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- Web Accessibility Specialist
- Chief Accessibility Officer
 - Ruh Global Impact
- Word Board
- Eyegaze system



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Kevin Williams

- Kent State University
- Chief Technology Officer of United States Society for Augmentative and Alternative Communication
- Accent 1000



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Create a plan

- How and when will patient
- State concerns
- Ask questions
- Identify follow-up steps, after the visit completed

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Anthony Arnold

- Arizona
- Remote Trouble Shooter
 - Prentke-Romich Company
- Training and Dissemination Team
 - RERC on AAC
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Chris Klein

- Hope, Michigan
- Training and Dissemination Team
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Take away material

Format that is appropriate for

- Patient
- Communication partners

- Clear instructions





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Children	Adults
Parents coordinate care	Individuals are responsible for managing their own health care, including identifying service providers and advocating for needed services
Children’s rehabilitation facilities often provide “one-stop” coordinated services	Individuals may need to interact with and coordinate information between <ul style="list-style-type: none"> •general practitioners, • medical specialists and •habilitation / rehabilitation specialists
Government guarantees of health and rehabilitation services	Individuals need to be able to advocate for adult services


(McNaughton, Balandin, Kennedy, & Sandmel, 2010)

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Needed skills

1. Introduce oneself and one’s communication system;
2. Use appropriate vocabulary and language to communicate concerns and needs;
3. Use appropriate communication strategies to ensure that previous health care and current health concerns are understood by the health professional.




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Self-Determination


- How AAC equipment should be set up and why it is important
 - Ask for AAC device
 - Make sure it is charged
- Develop access to a wide range of vocabulary
 - literacy skills
- Use appropriate communication strategies to ensure that care needs are understood by care providers
 - Develop “care plans”



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- Younger individuals
- Individuals with more significant cognitive support needs
- Individuals with a wider variety of disabilities

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Supported Decision-Making

I am autistic. Please do not assume that I do not have mental capacity.

The Human Rights Act means that staff in the NHS must respect and protect my human rights when making decisions about my care even in the times of Covid-19.

All decisions must be made in line with the Mental Capacity Act.

The Mental Capacity Act has five key principles:

1. Every adult has the right to make his or her own decisions and must be assumed to have capacity to do so unless it is proved otherwise.
2. People must be supported as much as possible to make a decision before anyone concludes that they cannot make their own decision. If a lack of capacity is established it is still important to involve the person as far as possible in making decisions.
3. People have the right to make what others regard as an unwise or eccentric decision. Everyone has their own values, beliefs and preferences which may be different to other people. They should not be treated as lacking capacity for that reason.
4. Anything done for, or on behalf of, a person who lacks capacity must be done in their best interests.
5. Anything done for, or on behalf of, people without capacity should be the least restrictive of their basic rights and freedoms.

Information on the Mental Capacity Act is available from www.publicguardian.gov.uk

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Experiences from Doctors

Dr. W Austin, Texas

- **FAMILIARIZE** "By patients providing a brief narrative prior to the appointment, I become familiar with the patient prior to the appointment."

Dr. Joe Urquidez Austin, Texas

- **ENGAGE** "I attempt to interact with the patient themselves as well as the family and/or caregiver in every situation."

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Familiarize Themselves with Patient's Communication Strategies

- R** Reduce Speaking Rate
- A** Assist with Communication
- M** Mix Communication Methods
- E** Engage the Patient

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Additional resources

- Speaking with Professionals Alternatively
 - <https://speakingwithprofessionalsalternatively.wordpress.com>
- PACT (Burns, Baylor, & Yorkston, 2016)
 - <https://leader.pubs.asha.org/doi/10.1044/leader.FTR3.21032016.52>
- FRAME (Yorkston, Baylor, & Burns, 2016)
 - <https://leader.pubs.asha.org/doi/10.1044/leader.FTR2.21032016.46>
- AAC Learning Center Moodle
 - <https://aac-learning-center.psu.edu/moodle/>
- Communication Passports
 - <https://www.communicationpassports.org.uk/Home/>
 - <https://www.autism.org.uk/advice-and-guidance/topics/physical-health/my-health-passport>
- RERC on AAC
 - <https://rerc-aac.psu.edu/>

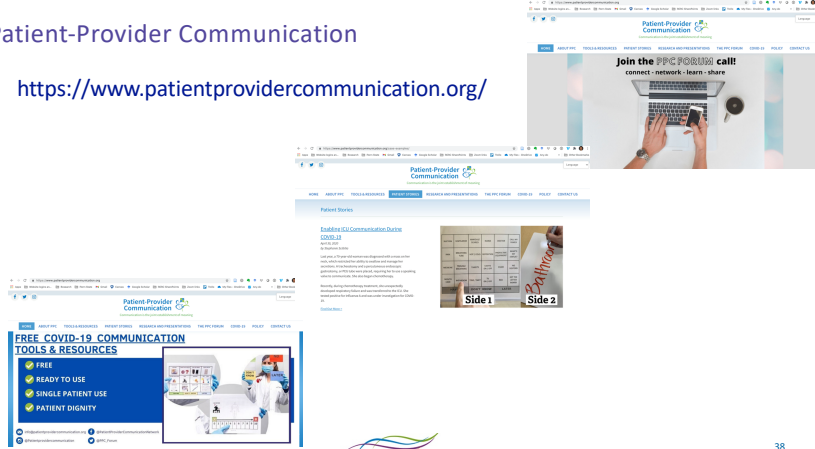



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Patient-Provider Communication

<https://www.patientprovidercommunication.org/>

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