

Instructions: Communicatively Accessible Hearing Screening Protocol

The communicatively accessible hearing screening protocol (CAHSP) was developed by Lisa Samson, speech-language pathologist, at the Aphasia Institute and Joanne DeLuzio, Ph.D. Audiologist, Reg. CASLPO.

What is the CAHSP?

- This package is a resource for professionals to use with people who “know more than they can say”.
- The CAHSP gives tools to help the hearing screener and person who “knows more than they can say” effectively exchange messages related to a hearing screening. Pictographic resources include:
 - Hearing vs. aphasia: Helps explain that testing is focusing on hearing vs. language comprehension.
 - Instructions for pure tone air conduction screening (for audiometers).
 - Communicatively accessible hearing handicap questionnaire (CAHHQ).
 - Results information page (this resource allows for follow up questions and information to be shared with other health care provider and or significant others. It should be given to the client post screening).
- The CAHHQ included in this protocol was modelled after the Screening Version of the Hearing Handicap Inventory for the Elderly (HHIE-S) (Ventry & Weinstein, 1983). The HHIE-S is a common questionnaire that is used in older adults to examine a person’s perspective on the negative effects of hearing loss on their life. This 10-item questionnaire yields a hearing handicap score ranging from 0–40. The higher the score on the HHIE-S, the more handicapped the person perceives they are because of hearing loss. *Research is needed to know if the CAHHQ has the predictive power of the HHIE-S.*
- All pictographic resources in the CAHSP should be paired with Supported Conversation for Adults With Aphasia (SCA™) techniques (Kagan, 1995b,1998), a method designed to facilitate conversations with PWA (Kagan, Black, Duchan, Simmons-Mackie & Square, 2001).
- For more information on training and other pictographic resources, contact the Aphasia Institute through www.aphasia.ca

Supported Conversation for Adults with Aphasia (SCA)

SCA™ is designed to ensure that people who “know more than they can say” feel as though their competence is acknowledged. Supported Conversation also ensures accurate exchange of information, opinions and feelings. The techniques include spoken and written keywords, gesture and body language, hand drawings, and sophisticated pictographs designed to support conversation on complex topics.

At the centre of SCA™ is a high-tech piece of equipment: a well-trained human being committed to enabling conversation with those who have communication barriers like aphasia. Through SCA™, people with aphasia and their conversation partners— be they doctors, nurses, spouses or old friends—are once more able to communicate.

Acknowledging competence and **revealing competence** are at the heart of Supported Conversation for Adults with Aphasia.

What is acknowledging competence?

Acknowledging competence refers to techniques that show adults with aphasia that you know they are inherently competent.

To acknowledge competence indirectly:

- Let your client/patient know that you know they have retained more cognitive and social skills than are immediately apparent
- Use a natural tone of voice that is not patronizing
- Choose adult or complex topics

To acknowledge competence directly or explicitly:

- Use a phrase such as, “I know that you know” at appropriate times.
- Acknowledge the frustration you will both share when – despite your efforts – communication breaks down. This act allows for a break in tension that often facilitates repair of miscommunications.

What is revealing competence?

Revealing competence refers to techniques that facilitate the exchange of information, opinions and feelings between you, the health care professional, and the individual with aphasia. There are three main categories of strategies to help reveal competence – IN, OUT, and VERIFY.

IN: Since individuals with aphasia may have difficulty understanding what others say, techniques to help get our information or our message ‘IN’ to the person with aphasia are beneficial. When a person with aphasia does not understand, it is not necessarily the concepts that cannot be understood; maybe our delivery is at fault. We need to modify how we communicate, so that the person with aphasia understands us. We call this getting your message ‘IN’. There are many examples, one example of an ‘IN’ technique would be to combine your talk with meaningful gestures to help the adult with aphasia to understand what you are saying. (Caution: Even people with mild aphasia can experience difficulty in understanding and may need help to get the conversation back on track.)

OUT: Individuals with aphasia may also have difficulty expressing themselves or ‘getting their message ‘OUT’. There are techniques you can use to help the person to communicate his or her thoughts to you. An example of an ‘OUT’ technique would be to

give written choices so the individual with aphasia can answer by pointing to the picture of his/her choice.

VERIFY: Finally, by making sure you 'VERIFY' the message, you are checking to make sure that you have understood the person with aphasia's message correctly. By stating what you believe the person with aphasia has told you, and checking to see if they agree, you can avoid potential miscommunications and consequently communicate in a more time efficient manner.

Materials needed to use SCA™ techniques:

- Thick black marker
- Blank white paper
- Pencil

Tips to improve communication

How does facial expression impact the success of the conversation?

Combine facial expression with the words and gestures. Any visual information you can give will increase the chance for participant with aphasia to understand.

What is the best way to incorporate the use of gesture into a conversation?

The use of gestures can help a participant to understand content, for example, miming driving for transportation and holding a telephone for talking on the telephone. TIP: Remember to always combine the gesture with the words you are saying.

How do I reduce visual distractions?

The amount of visual material presented on a single page of the resource may be overwhelming for some people with severe aphasia or visual field deficits. We suggest that you present only one or two pictured items at a time. TIP: Use a blank sheet of paper, self-adhesive notes or your hand to cover some of the page and/or material that is not currently being discussed.

What are "key words"?

Key words are the words in a conversation that establish the topic and carry meaning (e.g. nouns and verbs). Incorporate writing and drawing as you talk. We recommend that you use a thick, black marker when writing for the person with aphasia. This results in larger and bolder writing. On the other hand, most people with aphasia seem to write best with a pencil. Some may write or draw if a sheet of paper and a pencil are placed directly in front of them. (EXAMPLE: When did you have your stroke? vs. Stroke?)

What are pictographic resources and how do I use them?

The Aphasia Institute has developed many pictographic materials that illustrate complex concepts that need to be expressed. You will enhance the success of your interactions

if you use the pictographic resources together with other techniques of Supported Conversation. When you are using a page with more than one pictographic illustration to represent one concept (e.g. transportation), use a sweeping gesture to show you are referring to all areas in this topic. Specific pictographic resources have been developed for the CAHSP.

Formal Training in SCA™

Participation in formal training opportunities in the use of the Supported Conversation SCA™ approach will improve your skills dramatically. For training and resource information, please contact: Training@aphasia.ca or visit us at www.aphasia.ca

Questions:

For specific questions related to the CAHSP please contact Lisa Samson at lsamson@aphasia.ca or 416 226-3636 ext 28.

References

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- Kagan, A., Black, S.E., Duchan, J.F., Simmons-Mackie, N., & Square, P. (2001). Training volunteers as conversation partners using “supported conversation for adults with aphasia” (SCA): A controlled trial. *Journal of Speech, Language, and Hearing Research*, 44, 624-638.
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