Aphasia & Supported Conversation

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HHS Annual Stroke Review – March 7 and 8, 2018
Before we begin… True or False?

1. “My patient with Aphasia did what I asked, so that means they understood what I said.”

2. “People with Aphasia are competent, intelligent adults, who want and need to engage in conversation.”

3. “Frustration is common with Aphasia, and makes it harder to communicate.”
Before we begin… True or False?

4. “Alphabet boards are always helpful in Aphasia”.

5. “They answered “yes”, so they mean “yes”.”
Aphasia: Language Impairment

Difficulty **expressing** oneself:

Difficulty **understanding/comprehending**:

20-40% of stroke patients

Tactus Therapy Solutions Inc
People with Aphasia:

- Know more than they are able to say
- Are competent adults
- Want to communicate
- Want to be spoken to, not about
- Are often very frustrated
Aphasia is frustrating…
Imagine YOU have Aphasia

Imagine KNOWING what you want to say, but:
- You aren’t able to say it
- You aren’t able to write down the words
- The words you hear don’t make sense to you
- Printed words look like a foreign language
And the harder you try...

Embarrassment
Anxiety
Stress
Frustration
Fatigue
Pain

Word-finding
Understanding
Spelling
Strategy use
Commonly heard from patients with Aphasia:

“I can’t...”

“I’m stupid”

“I can’t remember...”

“I don’t know.”

“F*#!!”

*Swearing comes out easier b/c of emotions
How about us... the team?
How about us… the team?
How about us... the team?

“Heartbreaking”

“Upsetting”

“Frustrating”

“I want to help!”
And the harder we, the team, try…

Rushed
Stressed
Frustration
Fatigued
Fast speech
Distracted

Word-finding
Understanding
Spelling
Strategy use
Stroke Distinction Standards and Communication

Many standards require that we involve, inform and educate the patient throughout the course of their care.

How do we do that if we can’t communicate well with the patient?
COMMUNICATION IS 2-WAY
Supported Conversation for Adults with Aphasia™ (SCA™)

For communicating with individuals who:

- Have EXPRESSIVE or RECEPTIVE Aphasia
- “Know more than they can say”

Tools & resources to improve communication and increase access to our services.
Stroke Distinction Standards

- Rehabilitation to improve Communication
- Staff learning about Aphasia
- Use of Supported Conversation™ techniques
- Aphasia-Friendly Patient Material
Getting started...

- Reduce distractions
- Good lighting
- Glasses and or hearing aids
- Pen & paper
- Patience
Receptive Aphasia:
Helping to get the info IN:

- Slowed rate, adult tone
- Short & simple sentences
- Expressive intonation
- Use nouns for names and places, not “he” or “there”
- Gesture and/or point to items
- Show pictures
- Write down key words
- Observe your patient (e.g. facial expression)
Your experiences: Working with patients with Receptive Aphasia
Expressive aphasia: Helping to get the info OUT:

- Show patience
- Provide pen/paper
- Provide pictures for them to point to
- Write down key words for them to point to say
- Ask YES/NO or choice questions
- Give them time to respond
- Encourage them to draw/gesture/point
- Provide pen/paper
- Say “I know you know…”
Your experiences: Working with patients with Expressive Aphasia
Try whatever works!

“Point…”

“Let’s look in your communication book…”

“Try drawing it…”

“Show me…”
**Verify:** Have you Checked to Make Sure You Have Understood

- **Reflect:** repeat the patient’s message
- **Expand:** add what you think the individual with Aphasia may be trying to say – not all verification is successful!
- **Summarize:** pull things together at the end of a longer discussion
It doesn’t always work…

- Acknowledge and share the communication breakdown.
- Acknowledge the frustration. Communicate that you will come back, and will try again.
Case Study: MN

- What is significant from his history?
- Moderate aphasia: some more detail –
  - Non fluent: can say 1-3 word phrases with effort/time
  - Some spared comprehension: difficulty with anything complex or out of context
- Reading is inconsistent for single words
- Writing is nonfunctional

What can we do to help MN communicate?
Benefits of SCA™

- **Patients:** feel valued, respected, engaged, involved

- **Staff:** improved quality of work life and satisfaction, improved efficiency and effectiveness, stronger rapport with patients
Talk to the patient, not about them

- Eye contact with your patient
- Use their name

Even when info is more directed at family, talk to the individual with Aphasia.
I have APHASIA

Tips for Communicating

A
Ask simple questions.

P
Provide choices.

H
Help communicate if asked.

A
Acknowledge frustration.

S
Speak slowly and clearly.

I
If you don’t understand, say so.

A
Allow extra time.
Resources

The Aphasia Institute has created profession specific resources:
“Talking to Your…” series:
- Physiotherapist
- Nurse
- Occupational Therapist
- Doctor

As well, the “Working Together” series:
Continence Care
- Diabetes
- Falls Prevention and more
As we leave… True or False?

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Please feel free to ask any of your SLPs or CDAs for more information!