

# Miscommunication or **Missed** Communication?

*The Challenges of Hearing Loss  
for Caregivers and Healthcare Professionals*

Northern Virginia Resource Center for Deaf and Hard of Hearing Persons  
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Oakton, VA 22124  
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[www.nvrc.org](http://www.nvrc.org)



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# Today's Program

- ▶ Introduction to NVRC
- ▶ Understanding Hearing Loss
- ▶ Hearing Aids: Some Limitations
  - ▶ Amplifiers, Apps and Access
- ▶ Communication Environments and Strategies
  - ▶ Wrap-up/Questions

# NVRC – Celebrating 36 Years!

- ▶ **Mission:** Empowering deaf and hard of hearing individuals and their families through education, advocacy and community involvement.



- ▶ **Services:** Information and referral, outreach and education, mentoring, weekly email news, hearing screenings, ASL interpreting program, and advocacy for deaf, hard of hearing, late-deafened, and DeafBlind residents in Northern Virginia.

- ▶ **Funding:**



- ▶ Visit [www.nvrc.org](http://www.nvrc.org) to learn more about how we have been serving the community since 1988.

*Our location:*

**10467 White Granite Drive, Suite 312  
Oakton, VA 22124**



# Device Demonstration Room

Amplified and captioned phones

Alerting systems

Personal amplifiers

TV listening systems

Apps

*(Not hearing aids!)*



Contact Technology Manager Debbie Jones at  
[djones@nvrc.org](mailto:djones@nvrc.org) for appointment

# Understanding Hearing Loss: *the invisible disability*

# Continuum of Deafness/ Hearing Loss



Hard of Hearing



Culturally  
Deaf

Oral  
deaf

Hard of hearing  
*from birth or childhood*

Late-deafened  
*gradually or suddenly*

- \* **Differences in communication preferences**, degrees and types of hearing loss, suddenness and age of onset
- \* Influencing factors: age, gender, culture, support system, financial stability, behavioral patterns and cognitive abilities, availability of resources

# Recognizing Deafness/Hearing Loss

- A *Deaf* person might:
  - Stare blankly
  - Point to mouth and ear to indicate Deaf
  - Ask for an interpreter
  - Write notes
  - *Wear a hearing aid or cochlear implant*
- A *hard of hearing* person might:
  - Seem anxious, confused, say 'huh?'
  - Ask for repetition, repetition, repetition
  - Focus on your lips/mask
  - Make an inappropriate response/comment
  - *Wear a hearing aid or cochlear implant*



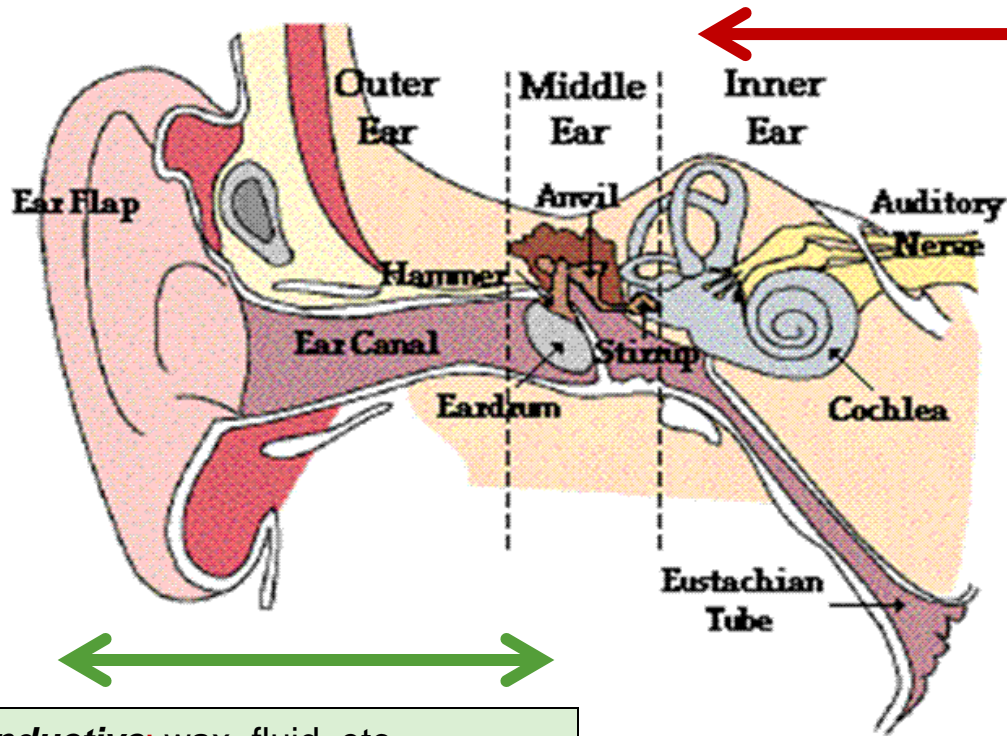
# Seniors and Hearing Loss

- ▶ One in three over the age of 65
- ▶ Two in three over the age of 75
- ▶ In seniors, hearing loss is the third most prevalent and treatable condition after arthritis and hypertension
- ▶ *Left untreated, it can contribute to balance problems, falls, anxiety and depression, and early-onset dementia*



# Types of Hearing Loss

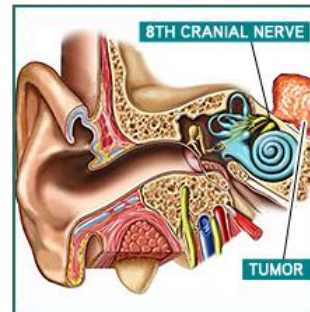
**Sensorineural:** hair cell loss, nerve damage. Permanent.



**Conductive:** wax, fluid, etc., often temporary.

**Combination** conductive and sensorineural.

# Some Causes of Hearing Loss



# Is it early-onset dementia or hearing loss: a few similarities

- ▶ Lack of responsiveness
- ▶ Easily confused
- ▶ Disinterested
- ▶ Behavioral changes
  - Easily agitated
  - Aggressiveness
  - Withdrawal

90-year-old woman admitted to memory wing of assisted living facility; she was deaf.

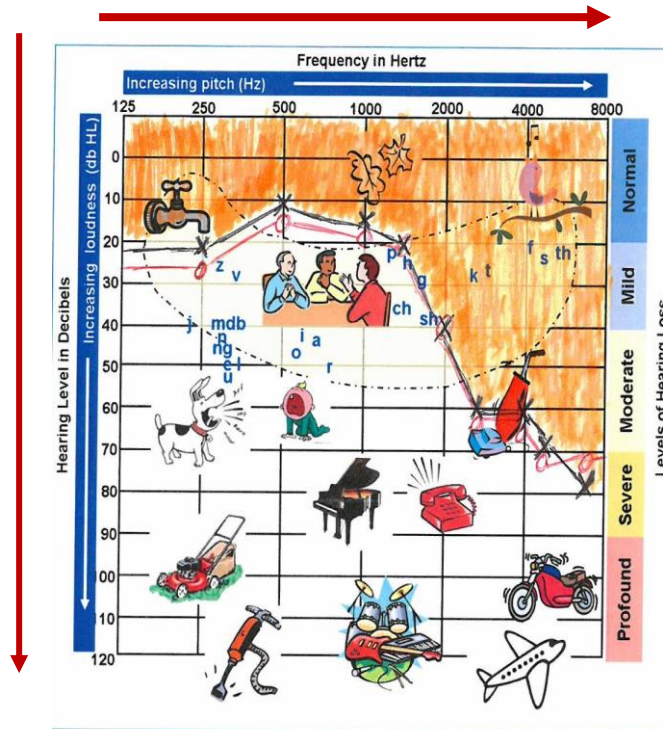
# Audiogram/Degrees of Hearing Loss

## ➤ Mild:

- Difficulty with normal speech
- Listens with extra effort

## ➤ Moderate:

- Difficulty understanding loud speech
- Will need line of sight
- Will speechread



## ➤ Severe:

- Can only understand amplified speech
- Needs to speechread
- Needs to write notes
- Might use sign language

## ➤ Profound:

- Difficulty understanding amplified speech
- Needs aural rehabilitation, speechreading, ASL

# Example of Sound Visualization

- ▶ The rest room is upstairs to your right.
- ▶ Specials today include steak tartare and fish and chips with a special house sauce.
- ▶ Can I get you fresh towels and some soaps?

Yellow letters represent sounds in the high frequencies, blue letters represent sounds in the mid frequencies.

"It's windy here."

"No, it's Thursday."

"I'm thirsty too, let's make tea."



# Impact on everyone



FATIGUE





Some  
Common  
Myths

# 1. Hearing Aids and Cochlear Implants are Like Glasses for the Ears



Limitations include:

- ❖ Distance from sound source
- ❖ Clarity of speaker
- ❖ Difficult speech patterns
- ❖ Background noise/other environmental challenges

## 2. Deaf and Hard of Hearing People can Lipread/Speechread

- *Lipreading:*

- Focus on lips

- *Speechreading:*

- Focus on lips, teeth, tongue, jaw, eyes, facial expressions, body language

- Only 30% of English is discernible on the lips.....which means 70% is not!

- Thousands of words look and sound the same

### 3. Low Background Noise will not Bother Someone who is Deaf or Hard of Hearing

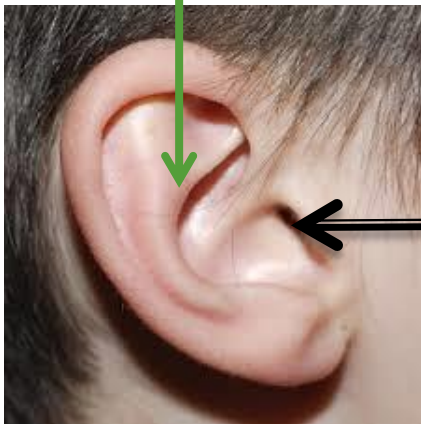


- ❖ \*any type of background noise is a distraction
- ❖ \*Someone who is deaf can often hear environmental sounds, feel vibrations

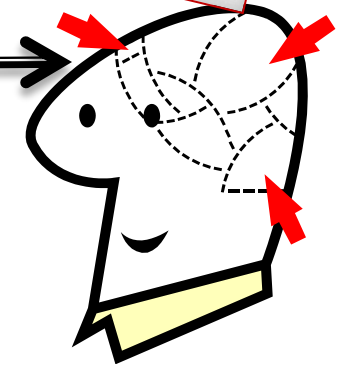
# 4. People with Hearing Loss Can Process Sounds Quickly and Easily

**Sensorineural:** hair cell loss, nerve damage. Permanent.

sound



**Conductive:** wax, fluid, etc., often temporary.



**Combination** conductive and sensorineural.

# 5. Use of Amplification Benefits People with Hearing Loss

- ▶ Speech generally sounds distorted to someone with a hearing loss
- ▶ Amplifying that speech through a PA system can make it worse by making it louder, not clearer



FALSE

- ▶ A direct feed to the ear/s can be much more helpful
- ▶ FM system, I & R, hardwired



PockeTalker Pro

TRUE

## 6. A Deaf Person should rely on a Family Member or Friend to Interpret in a Medical Setting

- ▶ Lack of impartiality
- ▶ Unfamiliar with vocabulary
  - ▶ Emotionally involved
  - ▶ Stress on relationship

## 7. Everyone with a Hearing Loss Needs an Interpreter

- ▶ Not necessarily
- ▶ Later-deafened individuals or those who are hard of hearing and never learned sign language will not benefit from an ASL interpreter
- ▶ Reading text is generally a better solution; an oral interpreter could also be beneficial



**Hearing Aids  
and Cochlear  
Implants:  
Imperfect Solutions**

“But she’s wearing a **hearing aid**, so she should be able to hear me just fine. Right?”



“He’s wearing a **cochlear implant**, so he can hear as well as I can. Can’t he?”



# Please Remember!

- ▶ *Hearing aids and cochlear implants do not provide the same result for hearing as glasses provide for vision issues such as near or far-sightedness.*

# Does the person wear hearing aids?

- ▶ Are the batteries fresh?
- ▶ Are the batteries in properly?
- ▶ Are the hearing aids in properly? If not, they are likely to whistle.
- ▶ Are the hearing aids clean, free of wax?
- ▶ Does the person have rechargeable hearing aids?



# Amplifiers, Apps, and Access

# Personal Amplifiers

PockeTalker

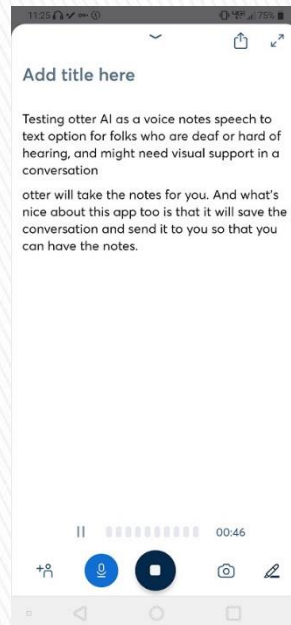


Comfort Duett

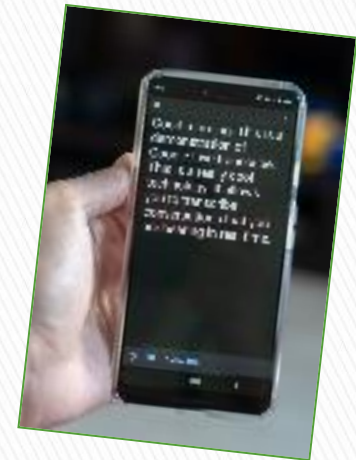
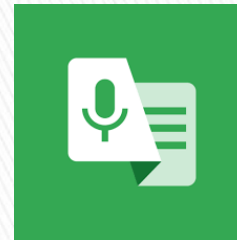


# Apps: In-Person Communications

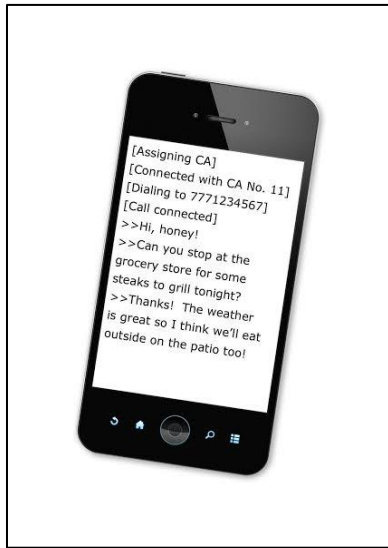
## ▶ Otter for iPhone and Android



## ▶ Google Live Transcribe for Android (80 languages)



# Captioned Calls



[www.innocaption.com](http://www.innocaption.com)



<https://hamiltoncaptel.com/mobile-apps-for-smartphones-and-tablets.html>



# Interpreters

## Sign language



## Oral transliterator



## Cued Speech



## Tactile interpreter



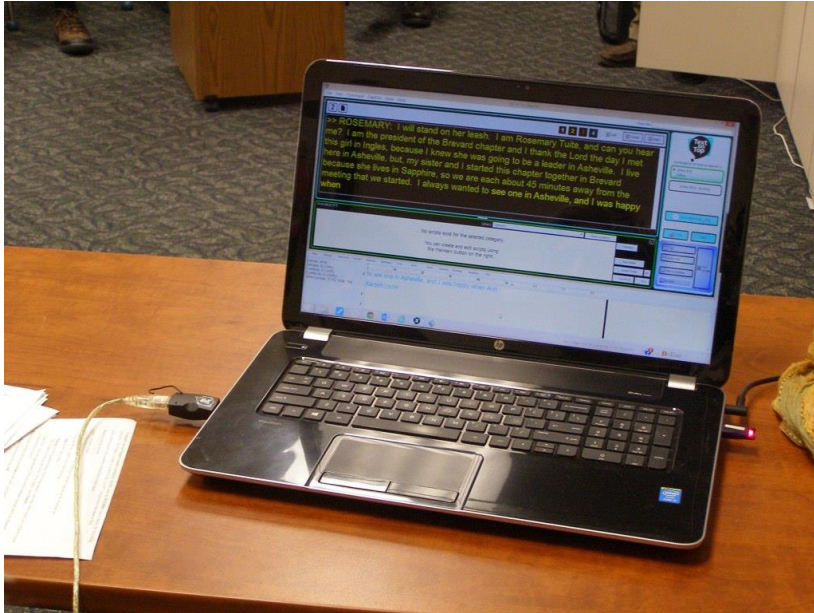
Registry of Interpreters for the Deaf – advancing the profession of interpreting: [www.rid.org](http://www.rid.org)

Learn how to work with an interpreter:

<http://www.vitalsigns.cc/newuseservices.htm>

# C.A.R.T.

Communication Access  
Realtime Translation



Seek certified CART writers or  
Captioners: National Court Reporters  
Association [www.ncra.org](http://www.ncra.org)

Word-for-word transcript of what is being said

Can be set up remotely – live/in-person vs. remote.

**For Major Communication Needs  
of Patients at any time:  
Interpreters, Captioners, Hearing Assistive Technologies,  
Languages**

**Please Contact:**



**Language and Disability Services**



- **Page 98824** (call 703-889-2280 or visit [XTend Paging](#))
- If you don't receive a call back within 15 minutes, please call the **Hospital Operators** and ask to be connected via our emergency numbers, listed under **Interpreter Scheduling**.

# Communication Environments and Strategies

# Communication situations are complex

Hearing loss may be compounded by problems with:

- The speaker
- The listener
- The environment
- The message

# Speaker Challenges

- ▶ Speaks too fast
- ▶ Looks down or covers face while reading a chart
- ▶ Has an accent
  - Anywhere in the US
  - Overseas
    - Ask them to speak more slowly
    - Write it down if necessary
    - Ask another team member to 'interpret' if necessary

# Listener Considerations

- ▶ Feeling great!
- ▶ Feeling ill, tired, not up to much?

## Environments: Continuing Care Facilities

- Large rooms, high ceilings
- Limited lighting
- Low maintenance floor and wall surfaces
- Little sound absorption

**Challenging**

- Smaller rooms, low ceilings
- Good lighting
- Carpeted floors, drapes
- Good sound absorption

**Better**



# Can you Change the Environment?

- ▶ TV or music on in background
- ▶ Room too hot or cold
- ▶ Too much light behind the speaker
- ▶ Too many people talking at the same time

*Problem*

- ▶ Can you turn it off?
- ▶ Can you open or close the window/door?
- ▶ Can you close drapes or move the speaker away from the light?
- ▶ Can you ask group to be quieter?

*Solution?*

# If not, Change Environment**S**

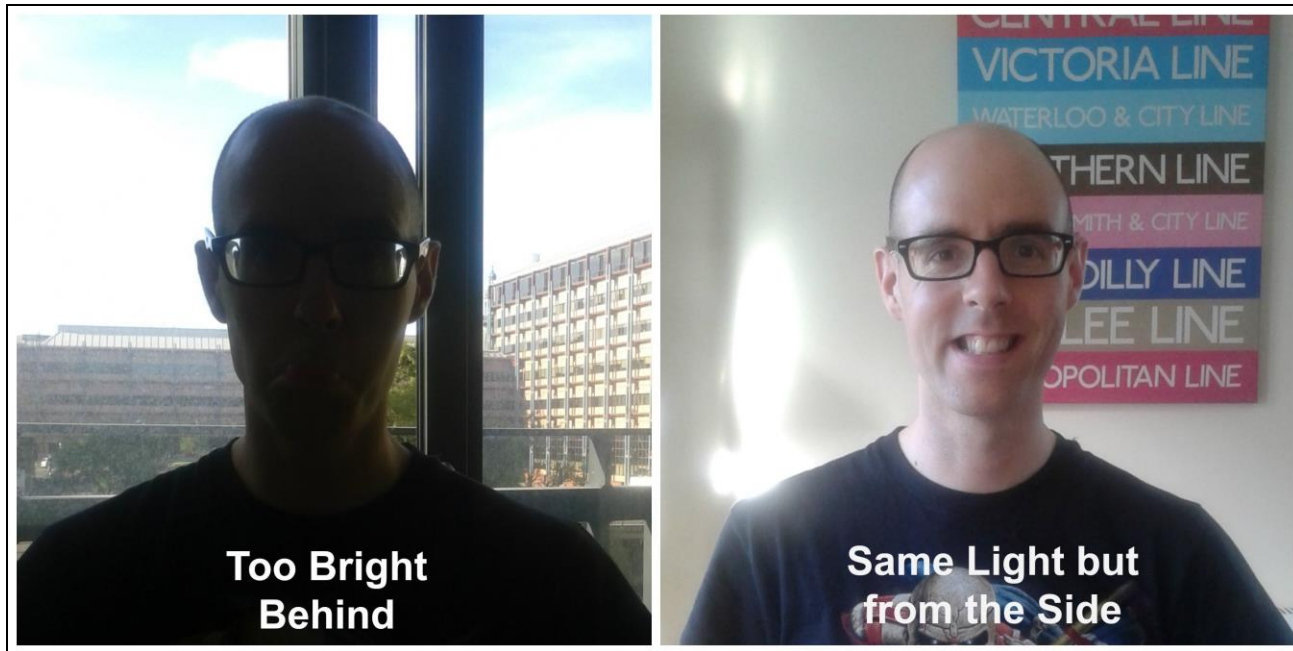
Too much echo?



Find a quieter setting



It's important to see your face which is hard with sunlight or other light behind you.





Where would you sit and why?

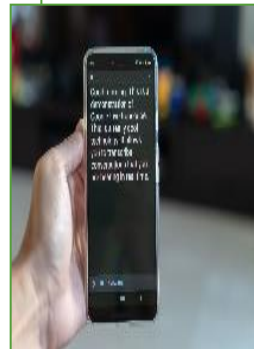


# The Message

- ▶ What are we talking about?
  - Medications?
  - Exercises?
  - Snacks or food choices?
- ▶ The brain does its own Google search for vocabulary that fits the topic

# One-on-one Communication

- ▶ Face the person
- ▶ *Rephrase* rather than repeat
- ▶ Speak at a comfortable pace
- ▶ Light should be on you
- ▶ Don't look down or walk away when you are still talking
- ▶ Consider having apps on your phone





It can be helpful to give instructions first while facing the person if you have to be behind them for the therapy exercise.



# The Mask – An Impenetrable Barrier

- ▶ Impossible for lipreading
- ▶ Speech sounds are:
  - Blurred
  - Eliminated



For people who are deaf and hard of hearing, it's like ***living in a foreign language film without subtitles***



# If Someone is in a Wheelchair...



# What would be helpful in a hospital room?

Can TV be muted if it's on?



Can you close curtains if you have to stand on that side of the bed?

Better to stand on this side of bed so light is not behind you.

# Intercom to Nurse's Station



aaowodogoeeo  
boodoowoodod  
odoooieuee...

Perhaps a note at the nurses' station that informs the shift about a patient in Room \_\_\_\_\_ who is deaf or hard of hearing? If they ring for help, do not answer, just go to their room?

# Writing Notes can Help



When all else fails, write it or type it!

Questions?

Would you like a copy of this PowerPoint,  
or have a virtual meeting?

Contact me at

[boleary@nvrc.org](mailto:boleary@nvrc.org)

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