

Communicating with Your Hard-of-Hearing Patient

Methods of Communication • Environmental/Sensory Barriers • Communication Barriers

Culture Clues™ is designed to increase awareness about concepts and preferences of patients from the diverse cultures served by University of Washington Medical Center. **Every person is unique**; **always consider the individual's beliefs, needs, and concerns.** Use Culture Clues™ and information from the patient and family to guide your communication and your patient care.

How does your hard-of-hearing patient communicate?

- About one out of 10 people in the United States has hearing loss. Half of the people with hearing loss are
 older adults. If you think that your patient may be having difficulty understanding you, assess whether
 your patient is hard-of-hearing.
 - One strategy to assess whether hearing loss is a problem is to give a simple instruction to your patient, then ask, "Just to be sure that you understand, can you repeat back the information?"
- For patients who wear hearing aids, check to see if they are on when you are talking.
 - Adjust your communication to ensure that your patient is able to hear you by talking slower.
- Do not assume that when a hard-of-hearing patient nods their head in acknowledgment, that they have heard or understood you. Your patient may be relying on family present to explain later.
 - Use open-ended questions to make sure that the patient has understood.

How do I limit the environmental and sensory barriers to communication with hard-of-hearing patients?

- Hard-of-hearing individuals hear less well when they are tired or ill.
- Make sure that you have your patient's attention before speaking. Tap your patient on the shoulder, wave, flick a light, or use another visual signal.
- Sit closer to your patient. This will improve their ability to see you if they rely on lip reading; this will also help with voice levels and minimize the effects of distant sounds.
- Be sure to speak clearly, using your regular voice volume and lip movement. Maintain eye contact when you speak. If you turn your head, you could obscure the view of your face. Avoid standing in front of a light or a window. Position yourself so that the light is shining on your patient. Overhead lighting limits shadows.
- When speaking to your patient, don't place things such as pencils, gum, or food in your mouth.
 Remove your facemask before speaking. Be aware that mustaches can create difficulty with lip reading.
- Taking notes or writing in the chart while talking with your hard-of-hearing patient can block the view of your face.
- For patients who are hard-of-hearing, close the door to limit background noise. Be aware of equipment noises in the rooms and hallways and, when possible, find a quiet place to speak with your hard-of-hearing patient.

How can I reduce the communication barriers with my hard-of-hearing patient in our medical environment?

- When performing procedures that place you out of view of your patient, explain the procedure ahead of time. When possible, adjust your seat to improve the line of vision with your patient's face and/or make sure that there is a third person in the room who can help with communication.
- If your patient does not understand you, reword your statement. The nuance of the sounds of the words you use may be the problem.
- A small white or black board may ease communication, especially when explaining medical procedures. Be sure your patient is provided with the proper writing tools.
- Request an assistive listening device to help your patient hear. Be aware of technology available to
 assist your patients with their medical care and after being discharged from University of Washington
 Medical Center.

You can request adaptive equipment and services for your patients at UWMC:

- Call Interpreter Services at 206-598-4663 for TDDs (telecommunications devices for the hard-of-hearing), Tele-Braille/Tele-Touch machines, and printed materials in alternative formats including Braille. Sign language interpreters are available at no cost to the recipient.
- Call UWMC Disability Information Line at 206-598-6993 for additional accommodations including: flashing signals, amplified headsets, flashing light and vibrating phone alert signalers, and TV closed-caption decoders.
- ENT/Audiology has a limited number of amplified headsets for patient use. Call 206-598-4022.
- There is a TDD pay phone in the medical center's main (3rd floor) lobby for use by the general public. An additional TDD phone and a Tele-Braille/Tele-Touch machine are available in the Interpreter Services Department for patient use.
- Always have written materials to reinforce verbal information given to your patient.
- Refer anyone who might benefit from an audiogram to assess hearing loss.

Resources to Learn More about Health Care and the Hard-of-Hearing Culture	
	Association of Medical Professionals with Hearing Loss: www.amphl.org
	Animated Dictionary of the American Sign Language: www.aslpro.com/cgi-bin/aslpro.cgi
	Culture Clues and End-of-Life Care Sheets: http://depts.washington.edu/pfes/cultureclues.html
	ture Clues TM is a project of the Staff Development Workgroup, Patient and Family Education Committee atact: 206-598-7498/Box 359420/pfes@u.washington.edu
The	Hard-of-Hearing Culture Clue TM was developed with thanks to Morag McDonald, Robert S. Hammer, and Patrick Feeney.

