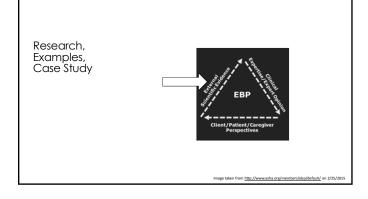
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		ports and Dementia: raction and Participation
	Presenter: Kristin J. Whitfie Moderated by: Amy Natho, M.S., CCC-SLP, CEU Adm	
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Visual S	upports and Dementia: ng Interaction and Participation
	stin J. Whitfield, MA, CCC-SLP ommunication Unlimited, LLC
C	ommunication Unlimited, LLC Engage. Connect. Now.
	 Describe how receptive and expressive visual supports can
Learning	benefit people with dementia. 2. List three different areas in which
Objectives	visual supports can be developed for people with dementia.
As a result of this Continuing	Identify at least two types of visual supports that would benefit
Education Activity, participants will be able to:	specific patients on their caseloads.
able 10.	

Agenda	Introductions & overview Research review & background Examples of supports for communication, memory, & participation in daily activities Case study Conclusion & questions	
		_
Overview	Share some of the common characteristics of dementia.	
Overview	Characteristics of dementia Difficulty with memory Short-term Communication Challenges Word finding Reduced vocabulary Perseveration Limited participation in everyday activities and events Decreasing over time	

Overview	Difficulty with memory Short-term Long-term New learning Communication challenges Speech intelligibility Expressive language Receptive language Pragmatics Limited participation in everyday activities and events Routines Social interaction Activities of daily living Play/recreation	
		1
Overview	 We see characteristics common to Autism Cerebral Palsy Aphasia Brain Injury ALS 	
	Why not with dementia??	
Overview		

Background Visual Supports vs. AAC What kind of dementia?



Research Review

- Bourgeois (1991, 1992)
- Silverman and Schuyler (1994)
- Bourgeois et al. (2001)
- Small et al. (2003)
- Murphy et al. (2007)
- Dementia Training and Education Program (2008)
- Mihailidis et al. (2008)
- Fried-Oken (2009)
- Murphy et al. (2010)
- Brush et al. (2011)
- Fried-Oken (2012)
- Jimmo v. Sebellius (2014)

	 Reviewed 20 years of ASHA journal articles 	
	 No mention of treatment options for dementia 	
	let alone the use of visual supports	
Research	 Reviewed 100 studies from other disciplines 	
Review	to find many interventions that fostered	
11011011	social interaction and participation. For	
	example,	
Bourgeois (1991)	 Environmental changes increased opportunities and topics for communication 	
	Written/graphic information decreased	
	perseveration and increase appropriate	
	responses	
	 Training family and caregivers to use techniques 	
	Conclusion: Interventions using visual supports can	
	improve communication	
	Can people with dementia use memory	
	wallets to self-prompt during conversation?	
	Yes, to	
Posograh	 Initiate conversation 	
Research	 Respond to questions 	
Review	 With little or no training 	
	 Following introduction, subjects 	
Bourgeois (1992)	 Were more detailed 	
	 Maintained skills after 24 months 	
	 Nursing staff appreciated the increased 	
	independence	
	Conclusion: Successful memory wallet use can be achieved	
	with little or no systematic training	
	*	
	Can AAC help persons with dementia?	<u></u>
	 Comprehensive review of AAC literature 	
	through 1993	
Docograh	- Four papers	
Research	 All by Michelle Bourgeois (including the two we 	
Review	just reviewed) - Why such little interest?	
	 Surveyed 100 SLPs in medical settings. 	
Silverman and	 28 people responded 	
Schuyler (1994)	 4 reported using AAC with patients with dementia 	
	Conclusion: AAC intervention can be helpful to at least	
	some people with dementia and their family/caregivers.	
	More SLPs specializing in AAC must systematically address	
	dementia	

Can memory books improve conversations between nursing aides and residents with dementia? Yes, they facilitated Research - More frequent communication Review - Longer interactions - More informative conversations Bourgeois et al. (2001) - Higher quality interactions Nursing aides reported Decreased depressive symptoms/increased quality of life) They continued to use new communicative styles beyond the study Conclusion: AAC techniques designed to enhance information sharing and social closeness also improved quality of life Asked three questions What are the most commonly recommended communication strategies? What strategies are actually used? What strategies are successful? Reviewed caregiving literature to find the 10 most commonly recommended. Research Review communication strategies Surveyed people with AD and their Small et al. (2003) spouse caregivers to determine which of the 10 strategies they use and how successful they are - Some decreased communication breakdowns - Some had no effect Conclusion: None of the commonly recommended strategies included AAC or visual supports Can Talking Mats help people with dementia express their views? Yes, it es, II - Improved the ability of people at all stages of dementia to communicate - Reduced repetitive behavior - Helped to keep participants engaged in conversation Research Review Murphy, Gray, and Cox (2007)

Conclusion: Talking Mats can play an important role in improving quality of care for people with dementia

		_
Research Review and Background Dementia Training and Education	How can caregivers improve communication with patients with dementia? Provided a list of 22 communication tips in a brochure entitled Communication Tips When Interacting with Dementia Patients	
Program (2008)	Conclusion: Clear verbal and non-verbal communication is a part of any quality interaction, using the 22 tips will improve interactions, none of the tips include AAC or visual supports	
Research Review Mihailidis et al. (2008)	Can individuals with dementia use an audio or audio/video prompting system to perform handwashing more independently? COACH system was used to monitor handwashing and provide prompts for the next step as needed Results showed that Individuals with dementia performed more independently Caregivers workload decreased	
	Conclusion: People with dementia can benefit from audio and video prompts for activities of daily living (ADLs).	
Research Review Fried-Oken et al. (2009)	Will voice output AAC improve conversation in people with moderate Alzheimer's Disease (AD)? Participants were randomly assigned an AAC device during two conversations One device had no voice output one device had no voice output When voice output was used, participants Stopped talking to press symbols over and over Used less connected speech Elaborated and initiated less Used shortened utterances	
	Conclusion: Voice output AAC distracted people with moderate AD and depressed conversation.	

Research Review

Murphy, Oliver, and Cox (2010)

Can Talking Mats help people with dementia participate in decision making regarding everyday life?

- Yes, subjects reported

 - es, subjects leptored

 Significantly more involved in discussions when using Talking Mats

 Significantly more satisfied with the discussion when using Talking Mats

 Talking Mats framework clarified their
 - thoughts and enabled them to express their views





Conclusion: Talking Mats is a technique that can meaningfully involve people with dementia and family caregivers in decisions about care

Research Review

Brush et al. (2011)

Can environmental assessment and modifications benefit people with dementia?

- Yes—if the assessment and modifications are personalized with regards to
 - Type: signs, labels, sequencing cards, objects of reference, verbal instruction
 Design: large, simple, contrast
 Placement: bottom 3 feet of the wall/door

 - Materials: personal objects and

 - photographs

 Organization: group like items together, limit signage

Conclusion: It is important to assess the connection between dementia and the problems that people can experience during daily activities

Research Review

Fried-Oken et al.

- The authors made three assumptions
 - Paring external support with familiar/spared skills should maximize successful communication
 Skills based on memory that is intact

 - (procedural, autobiographical) are stronger Supports are relevant to ADLs
- Review of various studies from 2004-2012 indicated
 - Low-tech AAC (with training) provides meaningful support during structured conversations
 - Low-tech AAC (with training) significantly reduces scaffolding provided by the conversation partner

Conclusion: This approach should be part of the standard treatment protocol

Research Review

Jimmo v. Sebellius Settlement Agreement (2014)

Alleged that Medicare contractors were inappropriately applying the "Improvement Standard"

- Agreement asserts that such a standard cannot be universally applied.
 Instead, "restoration potential of a patient is not
- the deciding factor in determining whether skilled services are needed. Even if full recovery or medical improvement is not possible, $\boldsymbol{\alpha}$ patient may need skilled services to prevent further deterioration or preserve current capabilities."

Conclusion: Therapy to facilitate interaction and participation can be covered by Medicare!

Research Review

Summary

• Overall, studies show that the use of communication and other visual supports can result in

- Improved interactionsImproved quality of life
- Preserved independence

- Participation in decision making
 Increased social closeness
 Enhanced information sharing
- But, studies also show that communication and other visual supports are not among the top interventions recommended for people with dementia

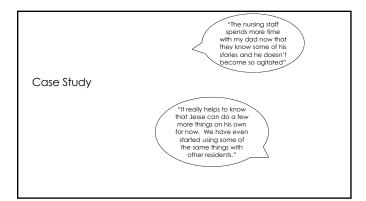
Research, Examples, Case Study

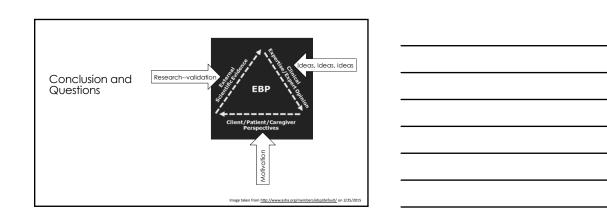


Examples	 How can the research findings be used in "real-life" settings? What do successful visual supports look like? How do people with dementia use these supports? 	
Examples	Supports in three areas Memory Communication Participation in daily activities	
Examples	Variety of supports Communication boards Communication books Memory books Signs/schedules Sequencing tools Made with different tools PowerPoint Photo albums Boardmaker Apps	

Research, Examples, Case Study	Client/Patient/Caregiver Perspectives broage taken from http://www.asha.org/members/inhaldefault/ on 2/25/2015	
Case Study Meet Jesse and Eleanor		
Case Study Long-term goal A Short-term goals	Jesse will utilize compensatory strategies to communicate wants and needs effectively, maintain safety during ADL's, and participate in facility activities. Jesse will demonstrate the ability to choose between 2 items on a list (written words or drawings) in order to communicate wants/needs related to meal, self-care, and leisure in 8/10 trials with minimal gestural cueing. Jesse will use memory aids to increase engagement in interactions 80% of the time given moderate cues. Jesse will use a visual memory aid to complete ADLs with moderate cues 80% of the time. Caregiver will participate in training/education on using communication strategies and memory aids.	

Jesse will maintain functional cognitive-linguistic skills to maximize safety and community re-entry. Jesse will use memory aids to recall recent events 80% of the time given moderate cues. Jesse will participate in planning an activity one time per week with moderate assistance. Jesse will read and follow written scripts to participate in telephone conversations to improve interaction with family and friends in 8/10 trials with minimal verbal cueing. Caregiver will teach back the use of visual supports to assist Jesse in recalling personal and safety information.





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Conclusion and Questions	nclusion and estions		
Conclusion and Questions			
		,	
	Communication Unlimited, LLC		
Thank you!	Engage. Connect. Now. Kristin J. Whitfield, MA, CCC-SLP		
	Kristin@engageCU.com		
	engageCU.com		