



Effective Communication with Residents

When first responders are called to a long-term care facility, they may find it challenging to communicate with some residents due to physical or cognitive impairments. Hearing loss, a stroke that impacts their speech, or dementia are common examples of some of the challenges that residents could face with communication.

What Are the Most Common Challenges to Effective Communication?

Individual communication styles differ significantly, especially among older adults whose methods of communication may be influenced by physiological changes. Common changes may include vision impairment, which may be corrected with eyeglasses; hearing loss, improved with hearing aids; or a brain injury or aphasia resulting in more time needed to process what is being said, or affecting how quickly and clearly the resident speaks.

Effective communication with individuals who have dementia, Alzheimer's Disease, Parkinson's, and other cognitive impairments requires patience, empathy, and adaptability. Dementia affects concentration, mental functioning, and decision-making. A resident's abilities and communication skills may fluctuate from day to day, or at various times during the day.

Guidance

- Speak to the person as a fellow adult. Try to make them feel comfortable and do not rush the conversation.
- Talk with the person face-to-face. If they are seated or using a wheelchair, sit in a chair next to or across from them. Maintain eye contact.
- Reduce or eliminate background noises, like television or radio.
- Speak slowly, calmly, and clearly and give the resident time to absorb the information that you are sharing or to fully respond to the question asked. Avoid jargon. Repeat questions if necessary, and be patient, allowing the individual time to process and respond.
- Try using different words if the person doesn't understand.
- Don't assume, but inquire if they use eyeglasses or hearing aids, especially if you see them squinting or leaning in toward you.
- If the person has hearing loss, use of paper and pen might be helpful. Give visual clues if helpful.
- Ask one question at a time. Ask yes or no questions when possible.
- Offer clear step-by-step instructions.
- Avoid interrupting or arguing.
- If the person becomes distressed or agitated, take a break and walk away for a few minutes.
- If the person appears distressed or agitated by the presence of a staff member, family member, or roommate, offer to talk with the resident in a private space.

Tips

- Download free or low cost apps on your smartphone, such as text-to-speech or speech-to-text, language translation, or universal signs for emergencies.
- Carry a small notepad and pen for handwritten notes.
- Carry flashcards or communication boards for first responders with pictures, symbols, and simple phrases.
- Ask members of the staff what may help the resident better communicate with you.
- If EMS needs law enforcement to respond to a situation, they can contact their own dispatch by radio or onboard systems, and dispatch will coordinate directly with the police. Some EMS agencies also use direct phone numbers or priority lines to request law enforcement without calling 911.



RESOURCES

Communication Tips: alz.org/help-support/caregiving/daily-care/communications

Types of Dementia and Neurocognitive Disorders: cdc.gov/alzheimers-dementia/about/index.html

Stroke Communication Toolkit: cdc.gov/stroke/php/toolkit

Communicating with People with Disabilities

nln.org/education/teaching-resources/professional-development-programsteaching-resourcesace-all/ace-d/additional-resources/communicating-with-people-with-disabilities-e030c45c-7836-6c70-9642-ff00005f0421

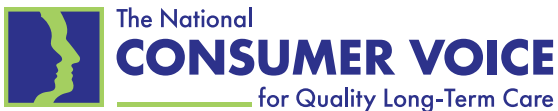
Assistive Technology:

fema.gov/about/offices/disability

acl.gov/emergencypreparedness

hhs.gov/programs/emergency-preparedness/index.html

Scan the QR code to watch the accompanying video.



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