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# 5 Good Communication Standards; 5 Service Applications; 1000s of Opportunities for Interaction Success?

By Dr Sheridan Forster

1st July 2022 – 9-9:40am

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- 5 Good Communication Standards: 5 Service Applications: 1000s of Opportunities for Interaction Success?
  - Assessment
  - Recommendations
  - Goal setting
  - Practice guidelines
  - An underlying ethic of practice of support…

# Me: Sheridan Forster

- Speech pathologist / researcher / educator
- Interest in people with intellectual disability, particularly people with multiple disability
- Working mantra:
  - How do I need to be in order to be with you?
- Experience in disability support work, speech pathologist, education, person with acquired disability

# The Five Good Communication Standards

1. There is good information that tells you how best to communicate with someone
2. People are helped to be involved in making decisions about their care and support
3. Others are good at supporting someone with their communication
4. People have lots of chances to communicate
5. People are helped to understand and communicate about their health

# Background to the Standards: Winterbourne View Hospital

- UK scandal – Winterbourne View Hospital – Panorama, 2011
  - People with “learning disability and / or autism with complex needs”
  - Reactive and unethical practice
  - “Punishment”, abuse, and neglect
  - 11 support staff pleaded guilty to criminal offences, 6 were jailed

# Background to the Standards: Winterbourne View Hospital

- Transforming Care: A national response to Winterbourne View Hospital (DOH, UK; 2012)

*"The abuse revealed at Winterbourne View hospital was criminal. Staff whose job was to care for and help people instead routinely mistreated and abused them. Its management allowed a culture of abuse to flourish. Warning signs were not picked up or acted on by health or local authorities, and concerns raised by a whistleblower went unheeded. The fact that it took a television documentary to raise the alarm was itself a mark of failings in the system."*

# Background: Transforming Care, "A high quality service means… people will say…"

1. I am safe
2. I am treated with compassion, dignity and respect
3. I am involved in decisions about my care
4. I am protected from avoidable harm, but also have my own freedom to take risks
5. I am helped to keep in touch with my family and friends
6. Those around me and looking after me are well supported
7. I am supported to make choices in my daily life
8. I get the right treatment and medication for my condition
9. I get good quality general healthcare
10. I am supported to live safely in the community
11. Where I have additional care needs, I get the support I need in the most appropriate setting
12. My care is regularly reviewed to see if I should be moving on.

# Background to the Standards: RCSLT

- Royal College of Speech and Language Therapists, 2013
- *Five good communication standards: Reasonable adjustments to communication that individuals with learning disability and/or autism should expect in specialist hospital and residential settings*
- “a practical resource to support families, carers, staff, professionals, providers and commissioners to make a difference to the lives of individuals using specialist residential services. As a result of these standards, all stakeholders should be able to know:
  - What good communication looks like.
  - Whether good communication is happening.
  - About useful resources to promote good communication”.

# The Five Good Communication Standards

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# Without Inclusive Communication (Money, NHS)

- Lack of choices
- Limited relationships
- More vulnerable and isolate
- Less opportunities for work
- Poorer healthcare
- Diagnosistic overshadowing
- Limited access to verbally mediated programmes
- Reduced mental well-being
- More challenging behaviour
- Placement breakdowns
- Reliance of restrictive approaches
- Non-compliance with legislation
- Staff over-estimate ability

# My use of the Standards

- Not affiliated with RCSLT
- Support the Standards
- Experienced the Standards in practice
- Continued commitment to the Standards

- Exploring nuances to deepen how Standards may be approached for people who are congenitally deafblind or very unique communication

# I will present…

- The Standard
- The Standard Checklist in Easy English by RCSLT
  - Written in “first person”
- My thoughts about the Standard

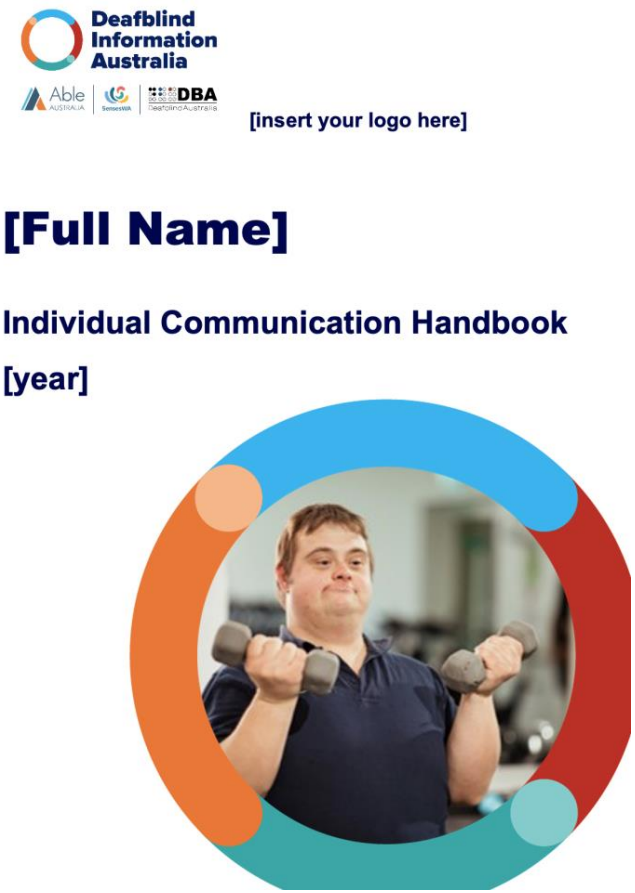
- How do you see the Standard, what do you think should be done?

# Standard 1:
# There is a detailed description of how best to communicate with individuals

# Checklist for Standard 1 (RCSLT)

| Things to check | ✓ ✘ |
|---|---|
| I have a Communication Passport, profile or guidelines. | |
| The people who know me well helped with the information about my communication, and think the information is right. | |
| The information is used to get communication right for me. For example the information is…<br>• Used in my care plans.<br>• Shared with new staff. | |
| The information is kept up to date by the people who know me well. | |

# Individual Communication Handbook – Deafblind Info Aust




- Incorporating specific information regarding sensory needs

# But first, what is communication? (Working theory…)

Typical communication

Cue…munication

Looking at cues

Two…munication

Sharing meaning

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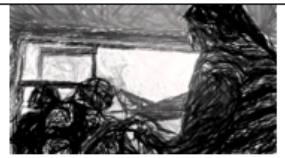
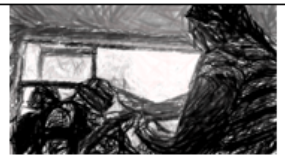
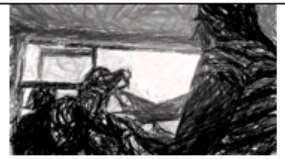
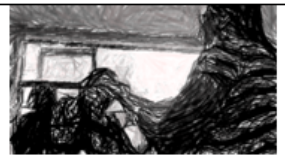
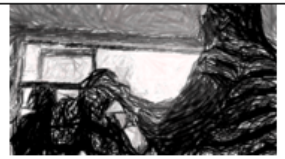
# Standard 1

- POOR
  - “The person has no communication”, “The person is nonverbal”…
- GOOD (ADEQUATE)
  - Communication passports, profiles, dictionaries, or guidelines often capturing CUE munication
  - A static document, updated annually
- BETTER
  - Videos that demonstrate how to interact with a person
  - Descriptions that capture TWO munication
  - A dynamic response of constant reflection and conversation about meaning and engagement

**TABLE 8.2** Example excerpts of transcript from 36-minute interaction, as presented in communication report (*Continued*)

| *Still shot* | *My interpretation/intention* |
|---|---|
| 4 | |
| | X's hand rests very comfortably on mine. Sometimes, he seems to look away, pause and be thinking about something. |
| | I place my hand out to see if X will grab it again. I wait 10 seconds and he doesn't, so I reach his hand again. |
| | X's eye gaze towards me is becoming longer (2 seconds). I see this as using his communication skills. |
| | X has now begun smiling.<br>This is so exciting to me. Smiling is a great skill. It is an indicator of quality of life. |
| 5 | |
| | I'm finishing off our interaction, writing some notes, still seated next to him. We are making small humming sounds to each other.<br>I feel like I'm being rewarded with interest from him. |

| | | | |
|---|---|---|---|
| 8:15 |  | I watch and feel as C continues to lift his hand up and down | I'm not sure what it means for C, but I see it as a new topic in conversation. With my hands under his, I hope he knows that I am "listening" to his movement |
| 8:18 |  | I do a similar extension and release motion with C holding onto my thumb | I hope he can feel that I am doing something like what he did |
| 8:21 |  | C releases my hand and brings it up | I feel he is about to hit himself but I allow him to do it |
| 8:22 |  | C hits/taps his nose once. I bring up my hand to his | I hope he knows that my hand is still available for conversation |
| 8:24 |  | I say "what's that?" | I'm saying what I'm thinking. I'm not sure if he understands the word, but feel he might understand the tone |
| 8:25 | | I touch C's nose where he hit it giving it a little rub. C's hand is on my arm. | I am trying to say to C that "I saw you touch your nose here". I wonder if he is pausing to think about it? |
| 8:30 | | I keep going until C moves my hand away | I'm glad that C can see that he can control my movements too. It is a sign of his self-determination. |
| 8:35 | | pping my down but still holding onto it. I say "hmm?" and pause | He is still directing here. |

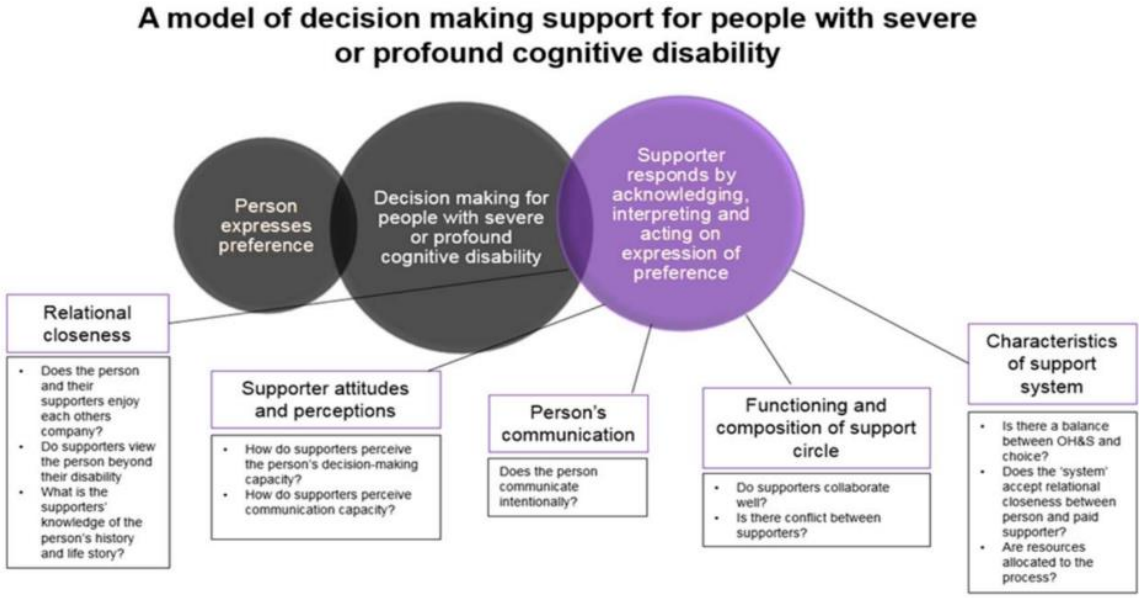
# Standard 2:
# Services demonstrate how they support individuals with communication needs to be involved with decisions about their care and their services

# Checklist for Standard 2 (RCSLT)

| Things to check | ✓ ✘ |
|---|---|
| Staff know how I communicate…<br>• Yes / No<br>• Like / Do not like<br>• I am OK / I am not OK | |
| This information is used to get support right for me. For example the information is used…<br>• In my care plans.<br>• To check how things are going. | |
| Staff know how to support me with making choices and decisions and can show how they have done this. | |
| When there is a problem staff make sure I get the help I need to sort it out. | |

# Standard 2: Services demonstrate how they support individuals with communication needs to be involved with decisions about their care and their services

- www.enablingriskresource.com.au – Latrobe
- https://waindividualisedservices.org.au/resources/supported-decision-making/ - Michelle Browning
- Jo Watson




(Watson, 2016)

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## Standard 2: Services demonstrate how they support individuals with communication needs to be involved with decisions about their care and their services

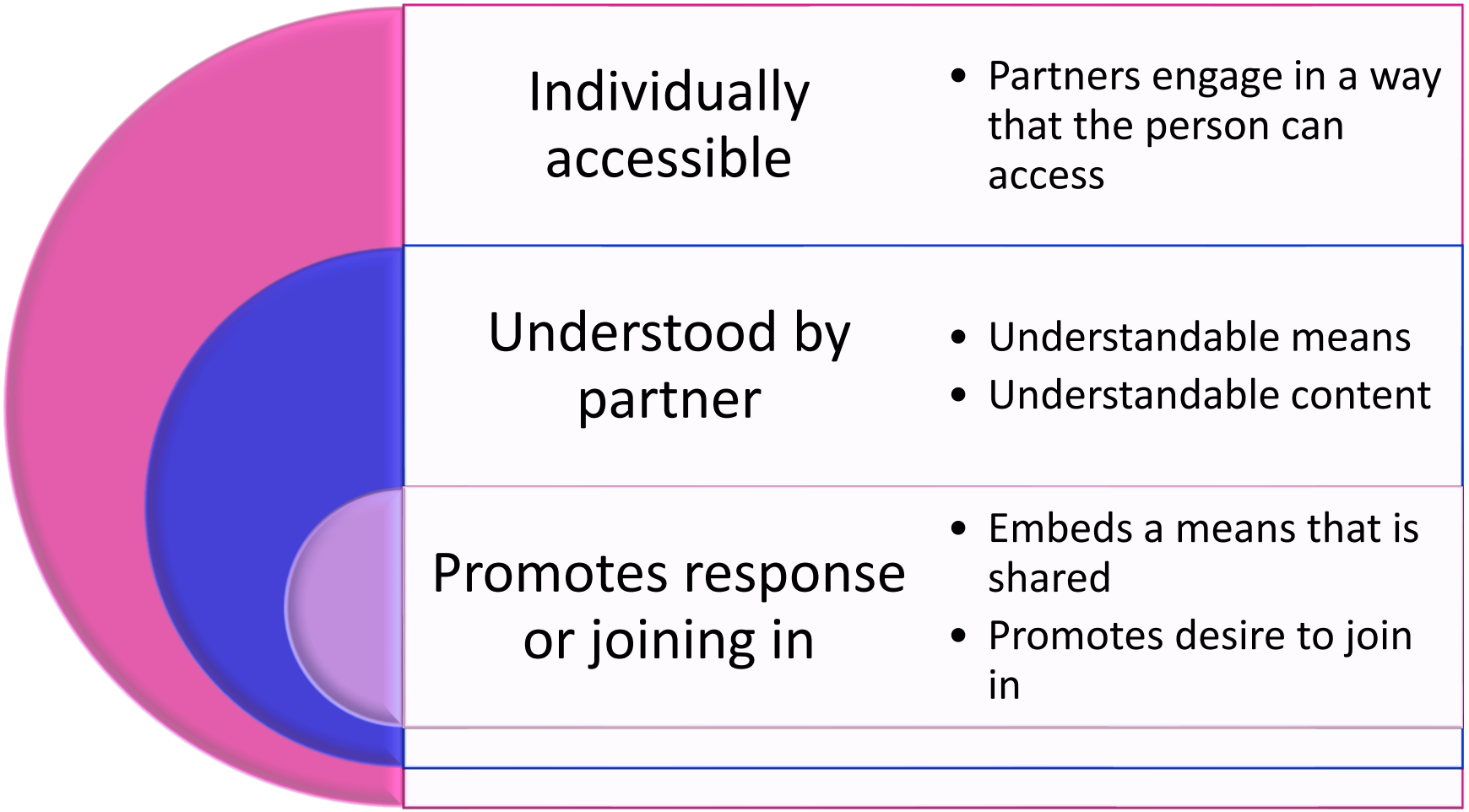
- Environments of constantly considering AGENCY with partner responsibility
  - In all interactions, consider pausing to wait for the next step from the person
  - Presenting of options from accept or reject, to a choice of two or more
  - Cultures that support acting on agency
- Nuanced understanding of potential abuse/misuse of “agency”

# Standard 3:
# Staff value and use competently the best approaches to communication with each individual they support

# Checklist for Standard 3 (RCSLT)

| Things to check | ✓ ✗ |
|---|---|
| Staff know how to get communication right for me and know how to help when there is a problem. | |
| Staff communicate with me in a positive way. | |
| Staff use the things that support me to understand and express myself, for example…<br>• Objects<br>• Photos, pictures, symbols<br>• Signing<br>• Writing<br>• Communication board, book or aid | |
| Staff ask for help from the Speech and Language Therapy service when they need it. | |

# Standard 4: Services create opportunities, relationships and environments that make individuals want to communicate



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# Standard 3: Staff value and use competently the best approaches to communication with each individual they support

- Communication strategies for staff
  - Knowledge of what is best
  - Training
  - Coaching
  - Supervision
    - Is it then typical practice?
- Individual staff monitoring for communication skills
- Team reflective practice and training

# Organisational responsibilities…

- "Have a designated member of staff (preferably a Communication Support Worker (CSW)31) responsible for exploration based on observations and trials to find the most appropriate communication systems for individuals. This must include continuous assessment and review of each services users' preferred form(s) of communication, including the development of functional communication (the ability to communicate needs) and the introduction of assistive technology."

https://nationalautistictaskforce.org.uk/wp-content/uploads/RC791_NAT_Guide_to_Quality_Online.pdf 2019

# Standard 4:
# Services create opportunities, relationships and environments that make individuals want to communicate

# Checklist for Standard 4 (RCSLT)

| Things to check | ✓ ✘ |
|---|---|
| Staff listen to me and make time to communicate with me. | |
| I enjoy spending time with staff. | |
| Staff use the things that help me to join in, for example…<br>• Interactive approaches like Intensive Interaction<br>• Switches<br>• Communication board, book or aid<br>• Planners and timetables<br>• Who is working board<br>• Talking Mats<br>• Social Stories | |
| Staff involve me as much as possible. | |

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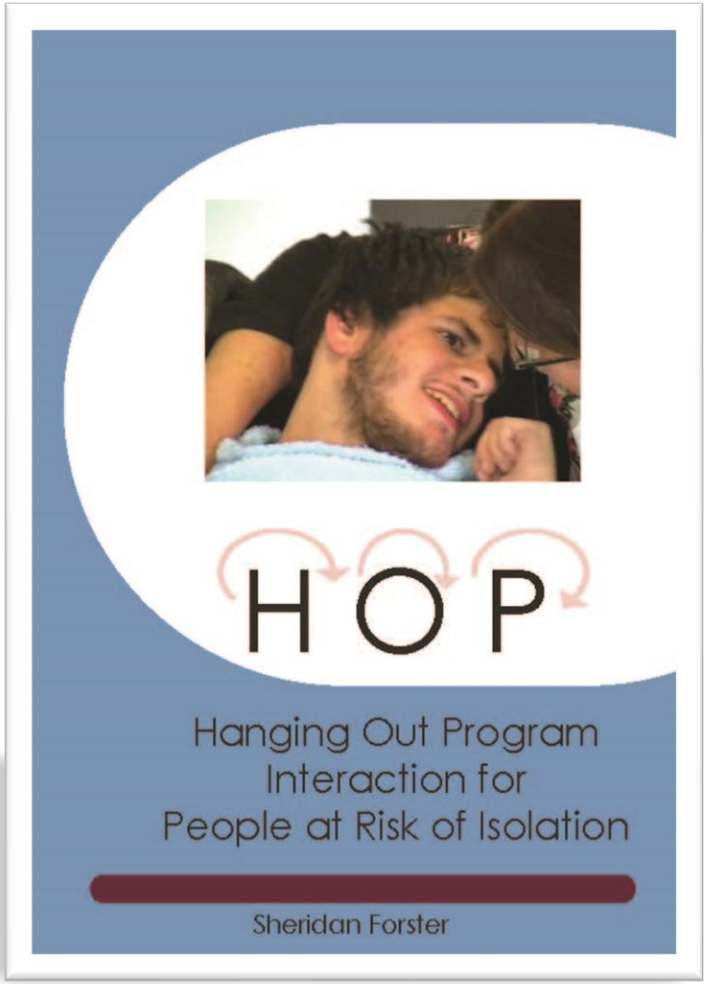
# Hanging Out Program




- Spend 10 minutes (at least) in interaction with the person
- Write down what happened
- A part of the role – not an optional extra
- Promoting an environment of engagement

# HOP: An attitude and approach

- Approach
  - To spend 10 minutes with a person giving them total attention in the interaction
  - To briefly write down what happened in the interaction
- Attitude
  - All people benefit from interactions
  - All people want to connect with another person—but this is hard for some people
  - Enjoying the company of another person is one of the most fundamental communication skills that needs to be supported
  - Part of our role in supporting people with multiple disabilities is engaging with them
  - Engagement must be meaningful to the person with a disability and the interaction partner
  - If the person can not understand the “language” of the support person, then the support person must adapt their language. It should match the language of the person with a disability and what is meaningful to them
  - Communicating with people with multiple disabilities is everyone’s job, including managers, all staff, and even other service users!

# Standard 5:
# Individuals are supported to understand and express their needs in relation to their health and wellbeing

# Checklist for Standard 5 (RCSLT)

| Things to check | ✓ ✘ |
|---|---|
| There is good information about my health and support needs. The information is kept up to date and used with health staff. | |
| Staff know how to tell if I am ill or in pain. | |
| Staff know how to support me with making choices and decisions about my health. | |
| Staff make sure I get the right help with communication when I go to health appointments or hospital. | |

# A Lifethreatening Issue

- Health inequalities for people with intellectual disability
  - 2.5 times the number of health problems
  - 38 to 50% of deaths are potentially avoidable
  - Under-diagnosis of chronic and acute health conditions
  - Dying many years earlier – 27 years earlier according to one large Australian study. (InclusionAustralia)

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# Standard 5: Individuals are supported to understand and express their needs in relation to their health and wellbeing

- CUE munication approaches
  - Records of behaviours showing health and wellbeing status
  - DisDAT
  - Knowledge of what to do when someone expresses distress (and potential cycle of powerless if you don't know how to respond)
- TWO munication approaches
  - Sharing mutual language of emotions and health
  - Emotional literacy – validation and acknowledgment of feelings rather than placation

- "How do they know that you know what they know?"

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- 5 Good Communication Standards: 5 Service Applications: 1000s of Opportunities for Interaction Success?
  - Assessment
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  - An underlying ethic of practice of support…

# 5 Good Communication Standards Facebook Group

- How would your service / work / life measure up to the Standards?

https://www.facebook.com/groups/5goodcommunicationstandards/