The Right to be Heard and Take Risks

This story was shared by a Speech-Language Pathologist. Kate is not the woman's real name.

Kate is a 40-year-old woman who suffered a traumatic brain injury as a result of a car accident. She communicates using a combination of strategies including eye gaze for yes/no/something else, writing with her non-dominant hand, spelling words by pointing to letters on a letter board and occasionally whispering or mouthing words. Kate's mother says that Kate wants to leave the long-care facility where she lived since her accident and return to her family home with support services from the community. Kate's healthcare team want to make sure that this is Kate's wish, that she understands the risks of living outside the long-term care facility and that she is not unduly influenced by what her mother wants. They also have informed Kate and her mother that due to her complex medical needs, their advice is that she should continue to live in the long-term care facility.

Kate's healthcare provider engaged an independent, arms-length Speech-Language Pathologist to assist Kate and them communicating about the issue because they felt her mother was biased in her interpretation of her daughter's message.

The Speech-Language Pathologist provided the following supports:

- Arranged appointments to avoid side effects of Kate's medications.
- Arrange to meet in a quiet, distraction free space to support Kate to focus on the issues being discussed.
- Ensured that Kate had access to her communication methods at all times.
- Facilitated Kate's comprehension of information as presented by the healthcare provider rephrasing information using simplified language structures, pausing between sentences, showing visuals such as pictures, photos, diagrams, gestures, and calendars.
- Supported the healthcare provider in understanding Kate's questions, and opinions.
- Requested that the healthcare team solicit input from a social worker and personal support services in the community in order to ensure that Kate had the information she needed to make an informed decision.
- Supported the healthcare provider to assist Kate in thinking through the decisionmaking process by using <u>Talking Mats</u> to explore Kate's preferences for living at home, staying in the long-term care facility and exploring other options and arrangements.
- Repeated the process on separate occasions to see if her decision and reasoning remained the same.

Kate communicated that she understands the risks involved, but wants to live in the family home.

More information: Webinar 4