

# The benefit of visual support in communication with cognitively impaired patients

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Everyone needs to make decisions on a daily basis. Some decisions are trivial, while other can be of life changing nature. In health care decisions need to be made regarding treatment opportunities or life changes, for example in discharge meetings. Individuals with cognitive impairment are not excepted from choices in health care, but their limitations in communication affect their possibility to successfully engage in this. Previous research has shown that cognitive impairment renders difficulties in medical decision-making (Tallberg, Stormoen, Almkvist, Eriksson & Sundström, 2013). In order to preserve patient autonomy, it is crucial to enhance patients' ability to understand, make decisions and express their views. One way to support decision-making is by using Talking Mats (TM), which is a communication device consisting of a frame with cards that individuals use to express views (Murphy, 2009).

The aim of the present study was to investigate how use of TM prior discharge meetings at a geriatric ward for patients with cognitive impairment compared to the usual procedure affect the ability to communicate. The research questions were: 1) How is the patients' participation perceived in discharge meetings by the participants (patients, close acquaintances, nurses, and social care workers), rated on Visual Analog Scale (VAS)? 2) Are there any differences in perceived participation between Control Group (CG, n=8), consisting of patients following the standard discharge procedure at the ward, and patients in Visual Support Group (VSG, n=12), who utilized TM framework?

Patients in VSG used TM to express their opinions regarding their own abilities to take care of themselves. The usual standard for the CG did not include any standardized interview prior discharge meeting. After a discharge meeting, all participants rated the patient's communication on VAS. The VAS was formulated in-house using established questions for evaluating the communication abilities and participation in daily life activities of patients with cognitive impairment. Similar questions have previously been used in research evaluating TM (Murphy, Gray & Cox, 2007).

Results showed in a comparison between ratings of the different groups of participants (patients, close acquaintances, nurses, and social care workers) that the perceived levels of communication functioning and participation differed. The patients' ratings were higher compared to other participants. Close acquaintances and nurses, who knew the patients since earlier, showed similar patterns to each other in their ratings while social care workers who had not met the patient previously differed from this. Participants in CG discharge meetings rated on average the patients' communication somewhat higher than participants in VSG. A reason for this could be that a communication-supporting device drew attention to the fact that communication skills might be affected, thereby stimulating critical reflection in the participants.

However, a majority of participants in VSG rated on VAS that TM had been beneficial during the discharge meeting, indicating that TM can be a valuable tool in geriatric care and discharge planning. Further studies are needed to explore TM's value as a facilitator for communication, participation and transition between hospital and home in geriatric care for patients with cognitive impairment.