

Barriers to implementing communication care for people with dementia in B.C.: Expert speech-language pathologists' consensus

Dr. Tami Howe¹; Katharine Davies^{1,2}; Dr. Jeff Small¹; Indershini Pillay^{1,2}; Tara Chen^{1,2}

¹ School of Audiology and Speech Sciences, Faculty of Medicine, University of British Columbia, Vancouver

² Providence Health Care, Vancouver

Introduction

- Most **people with dementia** experience **communication impairments early on**, with these difficulties increasing as their dementia progresses.
- Evidence-based **communication interventions**, such as specialized communication training for family members and healthcare staff can **enhance the quality of life** of people with dementia and **reduce caregiver burden**.¹
- **Speech-language pathologists (SLPs)** have specialist knowledge in providing these types of **evidence-based communication interventions** for people with dementia and their families.
- However, SLPs face **barriers** in implementing these interventions, and individuals with dementia often **do not have access** to this type of evidence-based care.²



Aim

- To obtain a **consensus** about the most important **barriers to implementing evidence-based communication care for people with dementia and their families in B.C.** from the perspective of SLPs who have relevant expertise and background in the area.

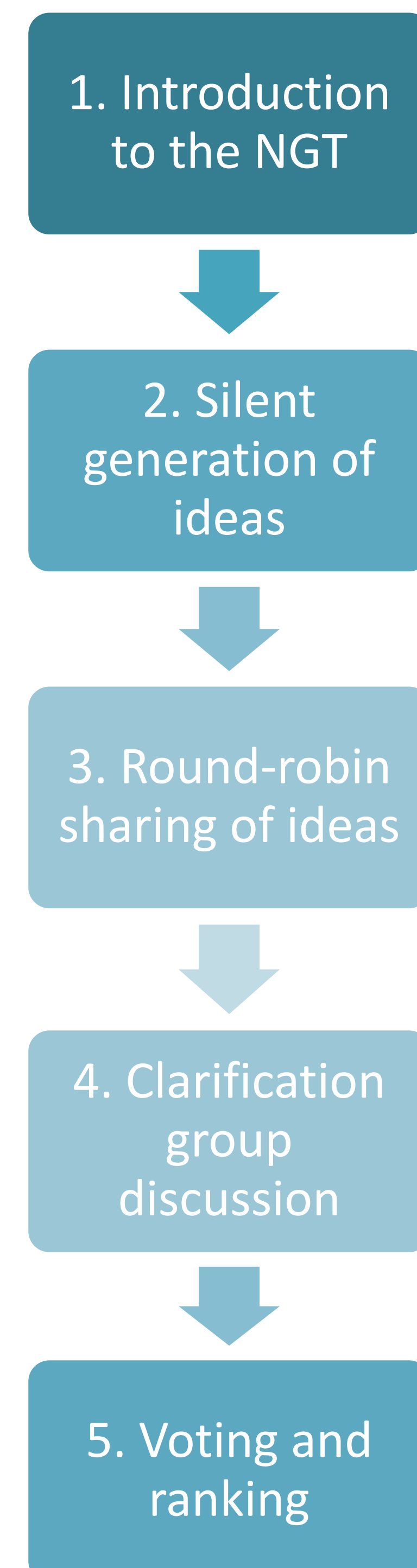
Method

Participants

- **B.C. SLPs** with **specialist knowledge** in the area were **nominated** from across B.C. to represent their respective organizations. **Nine** of these 13 invited SLPs participated in the **in-person nominal group technique** meeting at UBC in **June 2022**.

Data Collection Method

- The **nominal group technique (NGT)**³ was used to address the study aim. It involved the following five steps:



Results

The **top ten ranked barriers to implementing evidence-based communication care in B.C.** as identified by the SLPs were:

- **Inadequate SLP staffing levels** to address the communication care needs of people with dementia
- **Others' lack of understanding** and awareness of the **SLP's role in providing communication care** for people with dementia
- **Lack of a communication pathway** for people with dementia
- **Research- and data-related barriers** (e.g., **inadequate data** about the **number** of individuals in B.C. with cognitive communication disorders as the result of dementia)
- **Lack of funding** for **SLPs** to provide communication care for people with dementia
- **De-prioritization of communication care** for people with dementia (e.g., communication access/effective communication during everyday interactions with healthcare staff often not seen as a healthcare priority for people with dementia)
- **Lack of SLPs' knowledge and experience** of evidence-based practice for people with dementia (e.g., **lack of clinical training experiences** in the area for **SLP students**)
- **People with dementia** and their families having **difficulties accessing communication care services**
- **Lack of effective and strong partnerships** between SLPs and other stakeholders (e.g., reduced presence of SLPs on long-term care teams)
- **Interdisciplinary-related barriers** (e.g., health professional team members' reduced understanding of each others' scope of practice).

Discussion & Conclusion

- This study fostered the initiation of an important **collaboration between clinical SLPs and researchers** working to **improve communication care for people with dementia** in B.C.
- In October 2022, the consensus group reconvened online to identify **facilitators** for overcoming the top ten ranked barriers to implementing evidence-based communication care in B.C. Future research will **involve people with dementia and their family members** in addition to other key stakeholders. The findings of this collaboration will help to inform the implementation of improved **evidence-based communication care for people with dementia in B.C.**

References

1. Hickey E., & Bourgeois M.S. (2017). *Dementia: Person-centered Assessment and Intervention*. London, UK: Taylor and Francis.
2. Hopper T, Cleary S., Oddson B., Donnelly, M.J., & Elgar S. (2007). Service delivery for older Canadians with dementia: A survey of speech-language pathologists. *Canadian Journal of Speech-Language Pathology*, 31(3),115-126.
3. McMillan, S. S., King, M., & Tully, M. P. (2016). How to use the nominal group and Delphi techniques. *International Journal of Clinical Pharmacy*, 38(3),655-662.



THE UNIVERSITY OF BRITISH COLUMBIA

The School of Audiology and Speech Sciences | Faculty of Medicine

Acknowledgments



This research was funded by the Michael Smith Health Research BC Convening and Collaborating (C²) Program (award #18835) and the Social Sciences and Humanities Research Council of Canada, The Canada Graduate Scholarships – Doctoral (CGS D) Program (award #6567)