

PATIENT SAFETY FOR AUDIOLOGISTS AND SPEECH-LANGUAGE PATHOLOGISTS DURING THE COVID-19 PANDEMIC

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— ABSTRACT —

To keep patients safe during the COVID-19 pandemic, changes are being made to clinical environments, service delivery is being provided via telepractice, and wearing personal protective equipment (PPE) is now part of the norm. This article will focus on maintaining the safety of patients, speech-language pathologists and audiologists during evaluation and treatment sessions. Necessary changes to clinical spaces will be highlighted, as well as issues that should be addressed or considered that will reduce medical errors and adverse patient safety events.

Keywords: Safety, Patient Safety, COVID-19, Coronavirus, Medical Errors

Introduction

The COVID-19 pandemic requires audiologists and speech-language pathologists to ensure the safety of patients during a time when knowledge about the virus changes frequently. Patient safety includes preventing, reducing, reporting and analyzing medical errors that lead to an adverse health care event that affects patients (Donaldson, 2008). During this COVID-19 pandemic, concerns regarding how clinics will operate safely and efficiently, how institutions will protect employees, and how clinicians will safely deliver services to individuals are paramount.

Considerations for modifications and enhancements span physical spaces, personal protective equipment (PPE), as well as assessments of the physical and mental health status of service providers.

This article will focus on the parameters of patient safety while delivering services via in-person and telepractice formats. Several barriers to clinical service delivery that impact patient safety will be discussed. These challenges require modifications to clinical environments, using interpreters, new born hearing services, feeding assessment and treatment, administration of standardized assessment tools,

cultural humility, and provider mindfulness and wellbeing.

Discussion

The ever-changing information about COVID-19 challenges institutions to be adequately prepared to deliver services safely. The information that follows describes seven issues that impact patient safety and strategies to address them.

Issue: Clinical environments need to be safe and clean.

Patient Safety Challenge: Keeping the environment safe and clean between patients is a requirement. There are new guidelines, and regulations for patient safety during the COVID-19 pandemic issued in all 50 states. Safety is at the center of patient care during this pandemic experience. Maintaining health and safety is paramount to the clinical process for the patient and the clinician.

Clinicians can use the following strategies to maximize effective safe service delivery:

- Stay updated on COVID-19 guidelines from the Infectious Disease department or Occupational Health department;
- The use of appropriate PPE (i.e., N95 masks, goggles, face shields or powered air purifying respirators (PAPR) is very important. Practice universal precautions and wear N95 masks and goggles for all evaluations, given the risk of assessing an asymptomatic COVID-19 patient;
- Modify waiting rooms to accommodate social distancing; and
- Clean and disinfect equipment, toys, clinical materials and all exposed surfaces between patients.

Issue: Interpreters are needed in-person and via telehealth to aid appropriate service delivery.

Patient Safety Challenge: Clinicians, patients and interpreters are each in different places using a telehealth platform.

Clinicians can use the following strategies to ensure that services are delivered efficiently and effectively:

- Calibrate the interpreter's and provider's roles to ensure consistency in this venue;
- Monitor discussions and treatment activities to maintain patient centered care;
- Minimize miscommunication by coordinating turn-taking during interpretation;

- Recognize that wearing a mask reduces the ability to see faces and read lips. Messages may need to be repeated and/or paraphrased to maximize understanding; and
- Create an environment in which everyone involved is comfortable restating what was heard and checking for clarification.

Issue: Audiologists need to provide newborn hearing screening services.

Patient Safety Challenge: During the COVID-19 Pandemic, regulations regarding newborn hearing screenings are not waved. Stay home orders greatly influenced parents' compliance with follow-up.

Audiologists providing newborn hearing screenings can use the following strategies to maximize effective service delivery.

- Develop a plan with social distance and infection control measures in place;
- Ensure that parents and providers adhere to social distancing and PPE requirements;
- Communicate with parents to ease discomfort with bringing newborn babies into health care settings; and
- Minimize negative impact on quality of life by informing parents about the value of early detection and management of hearing loss.

Issue: Feeding assessment and treatment are essential during the Pandemic.

Patient Safety Challenge: Evaluation and treatment of feeding difficulties during the COVID-19 Pandemic are essential services. Individuals who present with feeding and swallowing problems need to have their skills assessed.

Clinicians will implement the following strategies to ensure safe service delivery:

- State clear recommendations regarding intervention and diet modifications;
- Execute clinical services safely and expeditiously;
- Conduct bedside clinical evaluations using appropriate PPE and observing social distancing requirements;
- Avoid conducting feeding and swallowing evaluations remotely;
- Administer instrumental assessments while wearing appropriate PPE. Protecting the clinician is particularly important while executing aerosol generating procedures in which the patient emits droplets (ASHA, 2020).

Issue: Administration of standardized assessment tools in-person and via telepractice.

Patient Safety Challenge: The conditions under which the assessment tools were developed did not include SLPs wearing masks, engaging in social distancing nor were they administered via telepractice.

Clinicians can employ the following strategies when administering standardized assessment tools:

- During in-person interactions, the clinician and patient need to be protected, so each should wear PPE and maintain safe social distancing during the appointment;
- Recognize that masks reduce visibility of the mouth and face as well as facial expressions – increase speech sound distortions and miscommunications;
- Administration of assessments via telepractice require clear audio and visual connections;
- Document all behaviors exhibited by the patient/ client and any modifications made by the clinician;
- Make clinical decisions regarding which parts of the assessment will be omitted and conducted later under different circumstances, documenting the rationale for these clinical decisions;
- Avoid misdiagnosing the patient due to nonstandard administration of tests;
- Maintain confidentiality when others are present in the clinician's work/home environment; and
- While most states and health insurance providers have waived HIPPAA prosecution for telehealth during the pandemic, clinicians must maintain patient privacy.

Issue: As service delivery changes, clinicians need to exhibit appropriate cultural humility with patients.

Patient Safety Challenge: During the COVID-19 Pandemic, clinicians are providing services in new venues with unfamiliar restrictions. Delivering services without considering patients' culture can lead to misdiagnoses, mistreatment, and less than ideal patient outcomes.

Clinicians can use the following strategies to maximize culturally appropriate service delivery:

- Use culturally appropriate programs, materials, and techniques;
- Verify any cultural practices that are valued by the family that may impact outcomes;

- Explicitly discuss cultural and linguistic differences; and
- Be knowledgeable about cultural and linguistic differences as well as interactions that impact communication.

Issue: The mindfulness and wellbeing of audiologists and speech-language pathologists is important for service delivery.

Patient Safety Challenge: Mindfulness is compromised by factors such as stress and fatigue, which contribute to patient safety, resulting in the likelihood of adverse health care events (Scott, Roger, Hwang & Zang, 2008; Robinson, Ambrose, Gitman, & McNeilly, 2019). Clinicians work long hours and are anxious about how the virus can affect them and their families. The COVID-19 pandemic has led to increased stress, fatigue and anxiety in all health care providers, including audiologists and speech-language pathologists.

Clinicians can use the following strategies to maximize wellbeing to render safe and effective service delivery:

- Participate in counseling and support services offered by employers;
- Take self-care seriously and recognize when breaks, meditation and/or mindfulness is needed;
- Reduce prolonged hours when working remotely; and
- Engage in activities to create a work-life balance.

Summary

Patient Safety is always a priority for health care providers and the COVID-19 pandemic added several additional challenges to maintaining safety as audiologists and speech-language pathologists delivered services to individuals. The challenges and strategies for effective and safe clinical service delivery addressed in this article include modifying clinical environments, using interpreters, newborn hearing services, feeding assessment and treatment, administration of standardized assessment tools, cultural humility, and provider mindfulness and wellbeing. Audiologists and speech-language pathologists that employ these strategies will experience safe and effective service delivery facilitated by appropriate use of PPE and infection control procedures. Clinician's will gain knowledge of strategies that maximize successful patient outcomes with cultural humility, and awareness of mindfulness and strategies to reduce stress and fatigue, which are exacerbated during this pandemic.

References

American Speech-Language-Hearing Association (2020). ASHA guidance to SLPs regarding aerosol generating procedures. Available at: https://www.asha.org/slp/healthcare/asha-guidance-to-slps-regarding-aerosolgenerating-procedures/. Accessed June 15, 2020.

Donaldson, M.S. (2008). An overview of To Err is Human: Re-emphasizing the message of patient safety. In R.G Hughes (Ed.) Patient safety and quality: An evidence-based handbook for nurses. Rockville: Agency for Healthcare Research and Quality.

Robinson, T., Ambrose, T., Gitman, L. and McNeilly, L. Patient Safety in Audiology. (2019). Otolaryngologic Clinics in North America, Patient Safety and Quality Improvement. 52.1.

Scott, L.D., Roger, A.E, Hwang, W.T. & Zang, Y. (2006). Effects of critical care nurses' work hours on vigilance and patients' safety. American Journal of Critical Care, 15 (1), 30 – 37. http://ajcc.aacnjournals.org/content/15/1/30.full.pdf+html. Retrieved June 22, 2020.

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