

**EDITORIAL**

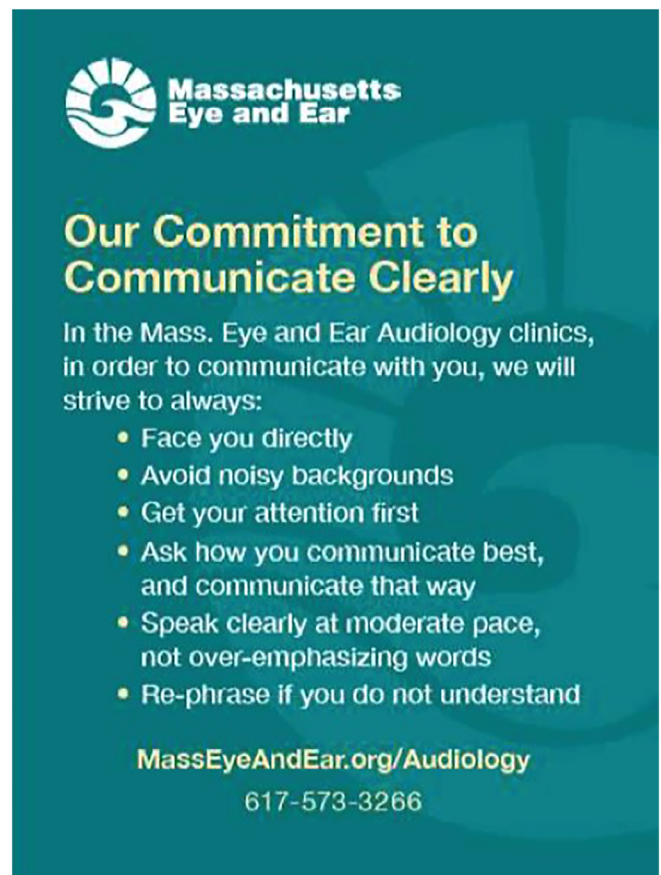
# Providing health care to patients with hearing loss during COVID-19 and physical distancing

Given that hearing loss currently affects 72.4% of persons over 65<sup>1</sup> and older individuals tend to be hospitalized when affected by COVID-19, it is likely that the global COVID-19 pandemic will impact numerous individuals with hearing loss. Based on these overlapping demographics, we should assume that communication needs will be heightened during this pandemic. The Massachusetts Eye and Ear (MEE) Audiology Leadership Council met virtually to discuss department and hospital policies during the COVID-19 pandemic. The following key points grew from this discussion to ensure optimal communication with people with hearing loss:

- Be mindful of potential negative impacts of “physical distancing” for people with hearing loss who communicate via spoken language.
- Physical distancing (rather than “social distancing”) highlights the importance of remaining socially connected while preventing the spread of the virus via reductions in physical interaction.<sup>2</sup>
  - While important for the public's health, physical distancing may be particularly harmful for people with hearing loss who communicate via spoken language, as it is associated with social isolation,<sup>3</sup> social and emotional loneliness,<sup>4,5</sup> and social withdrawal.<sup>6</sup>
- Provide all patients with information regarding commitment to clear communication (Figure 1), which includes facing people directly, avoiding noisy backgrounds, speaking clearly, and more. See excellent hearing loss association of America (HLAA) resources as well.<sup>7</sup>
- Limit audiologic care to essential newborn baby hearing screening and follow-up, urgent audiology services (eg, those who depend on their hearing devices to hear) with precautionary measures (eg, drive-up services to fix hearing aids), and other urgent pre-, peri-, and postoperative services.
- Use QR codes to share information for patients to scan and access resources upon entering the building. Access to the “COVID-19” card created by the Massachusetts Commission for the Deaf and Hard of Hearing (Figure 2) with images is excellent.<sup>8</sup>
- Be aware that protective gear hampers communication: While face masks are important measures for reducing the spread aerosolized droplets, clear face masks may assist greatly with lip reading.
- Restrictions on the number of people who can accompany or visit a patient may be difficult for people with hearing loss who

communicate with spoken language. Ensure that contact information is collected from loved ones so that patients with hearing loss who are isolated after testing positive for COVID-19 can communicate.

- Make assistive hearing devices such as personal sound amplifiers available to patients who need them.
- Utilize technology to improve communication: Speech-to-text apps (Google Live Transcribe, AVA, Otter), phone call-to text apps (InnoCaption+), and apps that use built-in microphones (Ear



**FIGURE 1** Information card provided to all MEE Audiology patients

This is an open access article under the terms of the Creative Commons Attribution-NonCommercial-NoDerivs License, which permits use and distribution in any medium, provided the original work is properly cited, the use is non-commercial and no modifications or adaptations are made.

© 2020 The Authors. *Laryngoscope Investigative Otolaryngology* published by Wiley Periodicals, Inc. on behalf of The Triological Society.

**A DEAF & HARD OF HEARING INFO - CORONAVIRUS**

Commonwealth of Massachusetts  
<https://mass.gov/covid19>  
 Executive Office of Health & Human Services  
<https://mass.gov/eohhs>  
 call: Dial 211  
 Massachusetts Commission for the Deaf and Hard of Hearing  
<https://mass.gov/mcdhh>  
 email: MCDsafety@mass.gov

**PREVENTING ILLNESS**

WASH HANDS (20 SEC), CLEAN OBJECTS & SURFACES, DO NOT TOUCH FACE, COVER COUGH, STAY HOME, AVOID CROWDS, SOCIAL DISTANCE, AVOID TRAVEL

**GET MEDICAL HELP**

CONTACT DOCTOR, MEDICAL STAFF, AMBULANCE, HOSPITAL

**PREFERRED METHOD OF COMMUNICATION**

INTERPRETER, TEXT/ CAPTIONS, WRITING, LIP READING, GESTURES, ASSISTIVE LISTENING DEVICE

**QUICK COMMUNICATION**

YES, NO, DON'T KNOW, GO, WAIT, STOP

**TIPS FOR HEALTH PROVIDER**

- ▶ Get the person's attention and make eye contact
- ▶ Repeat, rephrase, or write down your request
- ▶ Ask and/or indicate before touching the person
- ▶ Ask the person their preferred method of communication
- ▶ Minimize the number of people interacting with the patient
- ▶ Know that hearing aids/cochlear implants may improve hearing, but a person may still benefit from an assistive listening device and still may not understand all that you say.

**FIGURE 2** Massachusetts Commission for the Deaf and Hard of Hearing "COVID-19 Card"

**B HOW DO YOU FEEL?**

0 1 2 3 4 5 6 7 8 9 10  
 NO PAIN, MILD PAIN, MODERATE PAIN, SEVERE PAIN, VERY SEVERE PAIN, WORST POSSIBLE PAIN

**SITUATION, HISTORY & SYMPTOMS**

FEVER, COUGH, SHORT OF BREATH, SORE THROAT, HEADACHE, WEAR A MASK, VOMITING, DIARRHEA, BLOOD PRESSURE, HEART DISEASE, TRAVEL HISTORY, SICK FAMILY MEMBER

**HOW LONG HAVE YOU HAD SYMPTOMS?**

MINUTES (1-7), HOURS (8-14), DAYS, WEEKS, MONTHS (Morning, Afternoon, Night), YEARS

**TREATMENT & CARE**

MEDICAL STAFF, CONTACT DOCTOR, AMBULANCE, HOSPITAL, MEDICAL TEST, OXYGEN, INHALER, MEDICINE, CONTACT FAMILY, APPOINTMENT, STAY HOME, THROW AWAY TISSUES CLEAN HANDS

▶ DEVELOPED BY THE MASSACHUSETTS COMMISSION FOR THE DEAF AND HARD OF HEARING ▶ [HTTPS://MASS.GOV](https://mass.gov)  
 Some elements of this tool were used with permission by the Wisconsin Council on Disabilities. March 2020

Machine, Sonic Cloud) are some of the ways to use apps to help people with hearing loss communicate. These resources are listed on the MEE website.<sup>9</sup>


The thought of being diagnosed with COVID-19 is a scary one but might be particularly terrifying for a person with hearing loss who communicates via spoken language, as they may be unsure of the quality of communication they will receive while being treated.


Physical distancing is necessary still, but may be very challenging for people with hearing loss as they cope with technological challenges to maintain social connection. By employing the communication tips and strategies discussed in this letter, we hope to raise awareness of the challenges faced by people with hearing loss during this global pandemic and to provide means to address them. For more information, visit the HAAA guidelines for communicating with health care workers during COVID-19.<sup>10</sup>

**CONFLICT OF INTEREST**

The authors declare no potential conflict of interest.

Jessica S. West MPH<sup>1</sup> 

Kevin H. Franck PhD, MBA, CCC-A<sup>2,3</sup> 

D. Bradley Welling MD, PhD<sup>2,3,4</sup> 

<sup>1</sup>Department of Sociology, Duke University, Durham, North Carolina, USA

<sup>2</sup>Harvard Department of Otolaryngology Head and Neck Surgery, Boston, MA, USA

<sup>3</sup>Otolaryngology Head and Neck Surgery, Massachusetts Eye and Ear, Boston, MA, USA

<sup>4</sup>Otolaryngology Head and Neck Surgery, Massachusetts General Hospital, Boston, MA, USA

**Correspondence**

D. Bradley Welling, MD, PhD, FACS, 243, Charles Street, Boston, MA 02114.

Email: brad\_welling@meei.harvard.edu

**ORCID**

Jessica S. West  <https://orcid.org/0000-0001-8320-8998>

Kevin H. Franck  <https://orcid.org/0000-0002-2721-1276>

D. Bradley Welling  <https://orcid.org/0000-0002-9963-469X>

**REFERENCES**

1. CDC. Table A-6a. Age-Adjusted Percentages (with Standard Errors) of Hearing Trouble, Vision Trouble, and Absence of Teeth among

Adults Aged 18 and over, by Selected Characteristics: United States, 2017. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Health Statistics. Summary Health Statistics: National Health Interview Survey, 2017. [https://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/NHIS/SHS/2017\\_SHS\\_Table\\_A-6.pdf](https://ftp.cdc.gov/pub/Health_Statistics/NCHS/NHIS/SHS/2017_SHS_Table_A-6.pdf). Published 2017. Accessed March, 2020.

2. World Health Organization. COVID-19. [www.who.int/docs/default-source/coronaviruse/transcripts/who-audio-emergencies-coronavirus-press-conference-full-20mar2020.pdf?sfvrsn=1eafbff\\_0](http://www.who.int/docs/default-source/coronaviruse/transcripts/who-audio-emergencies-coronavirus-press-conference-full-20mar2020.pdf?sfvrsn=1eafbff_0). Published 2020. Accessed March, 2020.
3. Grimby A, Ringdahl A. Does having a job improve the quality of life among post-lingually deafened Swedish adults with severe-profound hearing impairment? *Br J Audiol*. 2000;34(3):187-195.
4. Pronk M, Deeg DJ, Smits C, et al. Prospective effects of hearing status on loneliness and depression in older persons: identification of subgroups. *Int J Audiol*. 2011;50(12):887-896.
5. Pronk M, Deeg DJ, Kramer SE. Hearing status in older persons: a significant determinant of depression and loneliness? *Am J Audiol*. 2013; 22(2):316-320.
6. Mick P, Kawachi I, Lin FR. The association between hearing loss and social isolation in older adults. *Otolaryngol Head Neck Surg*. 2014;150 (3):378-384.
7. Hearing Loss Association of America. Tip Cards. [www.hearingloss.org/wp-content/uploads/TipCards.pdf?pdf=Tipcards](http://www.hearingloss.org/wp-content/uploads/TipCards.pdf?pdf=Tipcards). Accessed March, 2020.
8. Massachusetts Commission for the Deaf and Hard of Hearing. Covid-19 Card. [www.mass.gov/service-details/covid-19-card](http://www.mass.gov/service-details/covid-19-card). Published 2020. Accessed March, 2020.
9. Massachusetts Eye and Ear. Audiology Appointments and Resources. [www.masseyeandear.org/specialties/audiology-resources](http://www.masseyeandear.org/specialties/audiology-resources). Published 2020. Accessed March, 2020.
10. Hearing Loss Association of America. How Do I Communicate with Doctors, Nurses, and Staff at the Hospital During COVID-19? [www.hearingloss.org/communication-access-recommendations-hospitals-covid-19/](http://www.hearingloss.org/communication-access-recommendations-hospitals-covid-19/). Published 2020. Accessed March, 2020.