



North Carolina Department of Health and Human Services  
Division of Mental Health, Developmental Disabilities and Substance Abuse Services  
**Caswell Center**

2415 West Vernon Avenue • Kinston, N.C. 28504-3321 • Courier 01-21-04

Michael F. Easley, Governor  
Carmen Hooker Odom, Secretary

Beverly Vinson, Center Director  
(252) 208-4222

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For more information contact:

Sherri Scharf, (252) 208-3778

**Communication Specialists Give a Voice to the Hearing & Speech Impaired**

He sits in his recliner in front of the TV, studying her facial expressions, watching her hands and fingers move, and waiting for his turn. Slowly he absorbs what he has just seen, leans forward in his chair, and uses hand gestures and sign language to respond: *I am fine. It was dark and rained hard here. Are you OK?*

Hervey, from his room at Caswell Center in Kinston, is communicating with Margaret, his sister (and legal guardian) who lives in Wake Forest. Each week Nancy Galambush sets up Hervey's video phone for a family visit, staying close by to assist if needed in the back-and-forth conversation. This vital link shrinks the distance between them, allowing them to feel close.

At Caswell Center, Hervey is the only individual with a video phone. As a child, he attended the NC School for the Deaf where he learned American Sign Language. Hervey is one of 97 Caswell individuals who are either deaf or hearing impaired. Many have motor control problems making it impossible to use traditional sign language, so Hervey is fortunate to be able to sign. But when Galambush and Denise Parks observed Hervey struggling with the typing function of his telecommunications device (TTD), they advocated for a video phone. (The equipment was obtained through Relay North Carolina, which provides full telephone accessibility to people who are deaf, hard of hearing, deaf-blind, and speech disabled.)



Hervey and Margaret, his sister in Wake Forest, use sign language over a video phone to communicate with each other.

## Freedom of Expression

“Everybody has a right to communicate and express their needs,” states Sally Simpson, director of Caswell Center’s Communication Services Department. In addition to Galambush (an audiologist), Simpson coordinates the service delivery of eight licensed speech-language pathologists, a sensory-impaired resource consultant (Parks), and two symbol-board technicians. Using a person-centered approach, these communications experts work as part of an interdisciplinary team to provide diagnostic, therapeutic and consultative services to 430 adults with mental retardation and/or developmental disabilities living at Caswell Center. “We really love what we do,” Simpson adds, the pride evident in her voice. What they do significantly enhances these individuals’ quality of life.

Speech-language pathologists evaluate individuals to assess their understanding of language, how they communicate their needs, how they interact with people and things in their environment – even how they swallow their food. Observing individuals in their homes and consulting with other professional staff such as occupational therapists, psychologists, and nurses helps speech-language pathologists understand an individual’s specific needs and develop strategies to teach them how to cope with their speech and language problems. Living more independently with the freedom to express themselves is the ultimate goal.

## Can We Talk?

Of the 430 adults currently living at Caswell Center, more than half have communication deficits which make it difficult for them to adequately express their feelings, needs, and desires. Although many can understand basic conversational speech (about one-third of the population), only 39 have communication skills that function at the near-normal level.

People with severe speech or language problems like Caswell individuals rely on non-verbal communication systems to supplement existing speech or replace ineffective speech. Unaided communication systems include body language, sign language or universal gestures. Aided communication systems include boards that display written words, letters, numbers or pictures and electronic devices or adaptive switches that typically provide voice output to simulate speech. Caswell individuals use the communication boards by pointing to objects or pictures to express themselves to someone who is present. (The words that accompany the pictures also help promote literacy.) Some of Caswell’s individuals use the electronic devices, often attached to a wheelchair, to issue a pre-recorded message such as: *I want to watch TV*. The Center’s two symbol-board technicians are responsible for maintaining and repairing over 150 adaptive switches, communication devices, and hearing aids.

Tackling this challenge and providing a system that works well for both the individuals and the staff who serve them every day is the mission of the Communication Services Department. In keeping with the Center’s person-centered philosophy, the speech-language pathologist develops a customized plan that summarizes each individual’s communication skills, preferences, hearing/vision status, and necessary adaptations and assistive devices. These written documents are filed in each individual’s chart so that any team member can quickly learn the best practice for communicating with that specific individual. Galambush explains: “Our clients develop their own language. You have to get to know them, their interests, and their families to really understand what they are telling you. Learning to be an active listener is the first step.”



Adapted for a wheelchair, this electronic communications device issues prerecorded messages.



Various communication devices used by Caswell individuals with speech and hearing impairment.

## **Dysphagia: A Swallowing Disorder**

Megan Bland, one of the Center's speech-language pathologists, is passionate about how her clients eat. "One of the few pleasures they have is food and the socialization around it," she states. However, swallowing disorders, also called dysphagia, are fairly common in adults with mental retardation and/or developmental disabilities. Frequent choking or coughing episodes, weight loss, and refusal to take maintenance medications are warning signs that an individual may be experiencing a swallowing problem.

To address this concern, Caswell Center developed a swallowing team consisting of a speech-language pathologist and an occupational therapist who work together to evaluate dining and swallowing skills. Watching individuals eat, they observe how they get the food to their mouths, how they chew the food, and how they swallow it. The root cause behind a swallowing problem might be an improper diet texture, a decline in oral motor skills, a medical disorder such as acid reflux disease, or side effects from medications such as extreme dry mouth or nausea.

If the problem appears to be related to a medical complication, a physician referral allows the Caswell Speech-Language Pathologist to request an evaluative test known as a modified barium swallow. The patient drinks liquid containing barium and the swallowing process is viewed on an X-ray machine. Caswell Center has peer relationships with speech pathologists at Lenoir Memorial Hospital and Pitt County Memorial Hospital who conduct these tests and collaborate with Caswell's speech pathologists on their findings. Bland or another speech-language pathologist will accompany the individual on this outpatient visit. As always, the individual's parent or guardian is kept apprised of all findings and treatment recommendations.

## **Can You Hear Me (or See Me) Now?**

Nancy Galambush, the Center's audiologist, conducts hearing tests and determines the need for hearing aids or other adaptive devices such as a videophone. She assists direct care staff in learning to communicate with people who are hard of hearing or deaf and assists individuals with caring for and using their devices. The average Caswell client is 54 years old. As the Center's population continues to age, the use of current technology will play an increasingly important part in making communication easier for those with hearing loss.

Denise Parks, the Center's consultant for individuals with dual sensory loss, focuses her attention on people who are experiencing both hearing and vision impairments due to the aging process. As a member of each individual's team, Parks works closely with physicians to represent the unique needs of each person during eye examinations. Her findings and recommendations are presented to the team so that issues related to mobility, environmental modifications, and sensory adaptations can be resolved.

Working in such a challenging environment, one has to wonder: what keeps these people coming to work every day? Sally Simpson wouldn't hesitate to say: "Our individuals give back so much more than we give them. They really make you learn to appreciate the simple things in life."