

# Face coverings Mask Effective Communication



**Aneesha Chauhan<sup>1</sup>, Louis J Koizia<sup>2\*</sup>, Michael Fertleman<sup>2</sup> and Cerys Morgan<sup>2</sup>**

<sup>1</sup>Imperial College Healthcare NHS Trust, Paddington, UK

<sup>2</sup>Centrale Perioperative and Ageing Group, Department of Bioengineering, Imperial College London, UK

**Submission:** January 22, 2021 ; **Published:** January 27, 2021

**\*Corresponding author:** Louis J Koizia, Centrale Perioperative and Ageing Group, Department of Bioengineering, Imperial College London, UK

## Editorial

The face of medicine has changed, and face masks are here to stay. The mandatory requirement for face coverings in care settings is likely to continue for the foreseeable future. Nearly a year of the pandemic should have given health care bodies ample time to anticipate the needs of vulnerable members of the population negatively affected by masks. In particular, older adults with hearing difficulties and/or cognitive impairment are particularly susceptible to experiencing problems with wearing masks themselves and interacting with others using them.

Those with hearing loss are more likely to struggle to communicate in healthcare settings, and this already contributes to worse health outcomes [1]. This is likely to be exacerbated by the ongoing need for mandatory face masks. Furthermore, there are communication issues for those without hearing loss, due to the loss of non-verbal cues such as facial expression. For example, wearing face masks during consultations has a significant negative impact on perceived empathy [2]. There are fears that use of personal protective equipment will hinder attempts to orientate older patients, thereby increasing the risk of delirium [3].

We surveyed healthcare professionals (HCP) and patients on a geriatric ward to gather information about their views on the impact of face masks. HCP were concerned about the effect face masks had on their ability to provide good care, with 54% reporting face masks affected their verbal communication. Furthermore, 85% felt that face masks affected their non-verbal communication to patients, with all of them agreeing that face masks affected their ability to build rapport with patients.

70% of patients felt that HCP wearing face masks affected their ability to communicate with them, exacerbated by pre-existing hearing difficulties. 65% reported they had missed non-verbal communication cues and 80% felt it more difficult to recognize members of their team.

Older adults have been disproportionately affected by COVID-19. We feel that HCP wearing masks in clinical environments leads to worse communication, increased delirium, and poorer overall care, particularly for those with cognitive impairment. Therefore, we welcome the Government's purchase of clear face masks in an attempt to improve care for at risks groups' [4]. Once available different masks should be compared to understand any benefit. We should endeavor to ensure that we do not contribute to poorer outcomes for our vulnerable patients by using a 'one size fits all' facemask policy.

## References

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DOI: [10.19080/OAJGGM.2021.06.555678](https://doi.org/10.19080/OAJGGM.2021.06.555678)

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