

## **Starting Early: LPAA Goals in Acute Care & Rehab**

Melinda Corwin, Ph.D. CCC-SLP  
Texas Tech University Health Sciences Center, Lubbock, TX  
[melinda.corwin@ttuhsc.edu](mailto:melinda.corwin@ttuhsc.edu)

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### **Objectives**

As a result of this presentation, the participant will be able to:

1. Describe the purpose of choosing treatment goals related to optimal communication methods and health information/education for persons with aphasia and their family members.
2. List ways to increase motivation, compliance, satisfaction, and adjustment and decrease anxiety, fear, and confusion in persons with aphasia and their family members.
3. List possible goals for persons with aphasia and their family members in acute care medical settings and rehabilitation/home health settings.

### **Goal Philosophy**

- Goals should be relevant for and meaningful in the person's environment.
- Interventions should meet person's immediate needs AND make a difference in the long term.

### **Treatment Goals Can Relate to Provision of...**

- Communication access
- Health information
- Education regarding aphasia

*which lead to*

- Increased motivation, compliance, satisfaction, and adjustment
- Decreased anxiety, fear, and confusion

### **Using Best Practice Recommendations (BPRs) for Aphasia**

- Aphasia United project
  - International consensus
  - identified global set of 10 best practice recommendations for services involving people with aphasia

### **Communication Access**

- Involves some of the 10 best practice recommendations for every person with aphasia (PWA):

- #4: No one with aphasia should be discharged from services without some means of communicating his or her needs and wishes (e.g., using AAC, supports, trained partners) or a documented plan for how and when this will be achieved.
  - #5: People with aphasia should be offered intensive and individualized aphasia therapy designed to have a meaningful impact on communication and life. This intervention should be designed and delivered under the supervision of a qualified professional.
  - #6: Communication partner training should be provided to improve communication of the person with aphasia.
  - #7: Families or caregivers of people with aphasia should be included in the rehabilitation process.
  - #8: Services for people with aphasia should be culturally appropriate and personally relevant.
- Best achieved by working with PWA + family members and health care staff members
  - Can involve multiple approaches

### **Example Communication Access Goals**

#### **Goals for PWA:**

1. Will demonstrate use of call button to request care assistance.
2. Will participate in 8/10 successful communication exchanges with communication partners using any modality.
3. Will participate in completion of aphasia-friendly daily menu with minimal assistance.
4. Will communicate feelings using aphasia-friendly materials.

#### **Goals for Family Members:**

1. Will successfully use communication support strategies (e.g., natural gestures, slower speech rate, periodic pauses, simplified syntax) on 4/5 opportunities with PWA.
2. Will demonstrate use of  $\geq 3$  verbal or visual cueing techniques to improve PWA's understanding of conversation topics.
3. Will assist PWA in use of multimodal communication to make choices and express ideas on 4/5 opportunities.
4. Will independently demonstrate use of a supportive conversation strategy at least twice during a 30-minute therapy session.

### **Health Information**

- A required component of every person's health care
- Health literacy is included as part of health information
- Should be accessible to everyone
- Involves another of the 10 best practice recommendations for every PWA:
  - #10: Information intended for use by people with aphasia should be available in aphasia-friendly/ communicatively accessible formats.

## **Example Health Information Goals**

### **Goals for PWA:**

1. Will demonstrate understanding (verbally or nonverbally) of XXX (e.g., stroke/medical procedures) following aphasia-friendly explanation.
2. Will follow aphasia-friendly instructions for XXX (e.g., wheelchair transfers/safety precautions/dysphagia strategies/medication instructions).
3. Will identify 3 ways to prevent future strokes when provided with picture/key word choices.

### **Goals for Family Members:**

1. Will explain symptoms of and risks for stroke following a lay explanation by clinician.
2. Will create aphasia-friendly instructions for PWA regarding XXX (e.g., medication instructions, swallowing precautions, fall precautions).
3. Will ask 3 questions related to XXX (e.g., stroke/aphasia/medications) using aphasia-friendly techniques in the presence of PWA.

## **Education about Aphasia**

- Involves more of the 10 best practice recommendations for every PWA:
  - #3: People with aphasia should receive information regarding aphasia, etiologies of aphasia (e.g., stroke), and options for treatment. This applies throughout all stages of health care from acute to chronic stages.
  - #7: Families or caregivers of people with aphasia should be included in the rehabilitation process.
    - a. Families or caregivers of people with aphasia should receive education and support regarding the causes and consequences of aphasia.
    - b. Families and caregivers should learn to communicate with the person with aphasia.
- The word “aphasia” may be difficult to say/unfamiliar, but it is important to understand.

## **Example Aphasia Education Goals**

### **Goals for PWA:**

1. Will respond to simple questions about stroke and aphasia using aphasia-friendly materials.
2. Will ask 2 questions regarding stroke or aphasia using picture supports and key written words.
3. Will participate in selection of photos/pictures/key words to create a communication board/book/screen for use with communication partners.
4. Will participate in an aphasia-friendly communicative exchange regarding his/her plan of care and indicate agreement/disagreement and/or preferences discernibly on 4/5 opportunities.

### **Goals for Family Members:**

1. Will describe aphasia and its characteristics after completion of aphasia simulation exercise with clinician and PWA.

2. Will ask 3 questions about aphasia using aphasia-friendly/supported conversation techniques.
3. Will acknowledge PWA's competence by including PWA in conversations with health care providers using supported conversation techniques.
4. Will serve as an advocate for PWA by informing a health care professional about aphasia-friendly communication techniques.

### **Possible Measures**

- Goal Attainment Scales
- ASHA FACS scoring (adapted)
- Communication Confidence Rating Scale for Aphasia (CCRSA) (Babbit, Heinemann, Semik, & Cherney, 2011).
- Assessment for Living with Aphasia (ALA-2) (Kagan, et. al, 2007)

### **Resources**

- Goals Project by Katarina Haley & colleagues at University of North Carolina: [www.med.unc.edu/ahs/sphs/card/resources/aphasia-goals](http://www.med.unc.edu/ahs/sphs/card/resources/aphasia-goals)
- ASHA provides examples of person-centered, focus-on-function goals: [www.asha.org/uploaded\\_files/ICF-Aphasia.pdf](http://www.asha.org/uploaded_files/ICF-Aphasia.pdf)
- AphasiaAccess: Communication Access Checklist & Great Videos: [www.aphasiaaccess.org](http://www.aphasiaaccess.org)
- Aphasia Corner: Aphasia Simulation: [www.aphasiacorner.com](http://www.aphasiacorner.com)
- Australia: Aphasia Rehabilitation Pathway: [www.aphasiapathway.com.au](http://www.aphasiapathway.com.au)
- Canada: Aphasia Institute—multiple resources: [www.aphasia.ca](http://www.aphasia.ca)
- United Kingdom: Guidelines for aphasia-friendly materials: [www.stroke.org.uk](http://www.stroke.org.uk)

### **Summary**

- Aphasia treatment goals can be practical and reimbursable for PWA.
- Remember that everyone deserves access to communication, information about their health, and education about aphasia/stroke.

### **Questions/Discussion**

**Contact Information:** [melinda.corwin@ttuhsc.edu](mailto:melinda.corwin@ttuhsc.edu)