THE ACCOUNTANT
HOW A DVD CHANGED MY SFA APPROACH

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PURPOSE

This poster describes one clinician's experience using the FOURC model (Haley, 2019) to ensure collaborative goal setting between key stakeholders. The client featured in this poster, "Mr. J.", had participated in various treatments across multiple quarters at our clinic. Despite many extensive intervention, his use of multimodal communication had not generalized outside of the treatment room. This poster focuses on the construction of person-centered goals and the implementation of two treatments: SFA discourse treatment (Boyle, 2011) and multimodal communication repair treatment (Wallace and Kayode, 2017).

MULTIMODAL COMMUNICATION STRATEGY EXAMPLES

Google search terms

Gesture

Keyword writing

Physical remnants (photos, ticket stubs, DVD)

Drawing

Speech

METHODS

FOURC PRONG	INTERVENTION METHOD	CLIENT INTERMEDIATE GOAL	CLINICIAN INTERMEDIATE GOAL
Skills and abilities	Semantic Feature Analysis (SFA)	"I want to talk about things."	Client will write 3+ features of an object using an SFA chart for two objects he brings to treatment. Client will utilize multimodal communication strategies (circumlocution, gestures, writing key words, Google search, smart phone pictures, or pointing to object) to express 3 supporting details to a conversation topic during a 20 minute conversation.
Intentional strategies	Semantic circumlocution, gestures, writing key words, Google search	"I need to share info about my life and interests."	Client and wife will track and report variety of multimodal communication strategy use during dinner conversations at home using a weekly log 5/7 days a week.
Environmental supports	Internet Searching Story Gist treatment	"I need a way to express myself when I get stuck." Articles to explain topic.	Client will bring in at least two items (such as photos or ticket stubs) brought from home to support his verbal expression.
Confidence & motivation	Client will demonstrate compensatory strategies for lexical retrieval in response to a communication breakdown three times in a therapy session.	Client and wife will develop a plan for communication support and demonstrate it independently in a therapy session	Client will introduce a conversation topic, invite others to participate, and respond to comments during 2/3 aphasia group sessions.

DISCUSSION

This seven week intervention plan focused on strengthening multimodal communication skills during conversation. Treatment targeting the use of multimodal communication strategies during communication breakdowns in unstructured conversation began during week two of the treatment plan. Conversations were approximately 20-30 minutes long and conducted during each session. Treatment focused on the explicit instruction of specific skills, including completing a semantic feature grid, searching the Internet, applying multimodal communication strategies, and establishing conversation topics. Mr. J.'s preparation and use of meaningful materials (e.g., pictures, books, other objects) to supplement his message strengthened the conversation efficiency. Socratic questioning about skill use and frequent listener requests improved message clarity when initial communication was not understood. Teaching and reinforcement was performed outside of the conversation in order to maintain its naturalness. He usually brought in a newspaper article and 2-4 physical remnants to support his topic introduction and for cohesive ties for the narratives produced. As treatment progressed, he demonstrated increased rates of independent use of strategies and persistence to repair

breakdowns. When the client focused on preparing ideas prior to session, using his personal keepsakes as anchors for giving relevant details, and building on pre-existing smart phone skills, our intervention plan generalized to other familiar communication settings including his Life Skills group and at home. In the final two sessions of the quarter, Mr. J. met and exceeded all goals, even as clinicians reduced support. When considering the data, it is important to keep in mind that it was expected that his performance from session to session would vary due to conversational topic complexity and number of concepts needed for successful task completion.

SESSION	CONCEPTS	SUCCESS
One (probe)	9	7/9 (77%)
Two (probe)	44	27/44 (61%)
Ten (treatment)	25	20/25 (80%)
13 (probe)	17	16/17 (94%)
14 (probe)	24	21/24 (88%)

CONCLUSION

After treatment, Mr. J. functionally communicated complex and multi-faceted concepts that were often abstract and intricately related. Mr. J. demonstrated a genuine interest in, and commitment to, engaging in conversations with others. Future treatment could extend the practice of these skills to situations and communication partners outside the clinic and his home in order to promote naturalness of conversation and generalization of skills. As a result of strong motivation and shared goal setting, he was a more confident communicator in a wider variety of settings. Prior to this intervention plan he reported that he usually abandoned his ideas during conversation with his wife and other communication partners. After intervention, based on checklists, participation in group, and his comments during final sessions, he used a wider variety of strategies and persisted for more conversation turns. This is consistent with data taken during treatment sessions. At the end of the quarter, these findings were synthesized and shared with Mr. J. and his wife, along with recommendations for continued practice of strategy use at home.

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ACKNOWLEDGEMENTS