

Aphasia



What are person-centered functional goals?

- Goals identified by the client, in partnership with the clinician and family, that allow participation in meaningful activities and roles

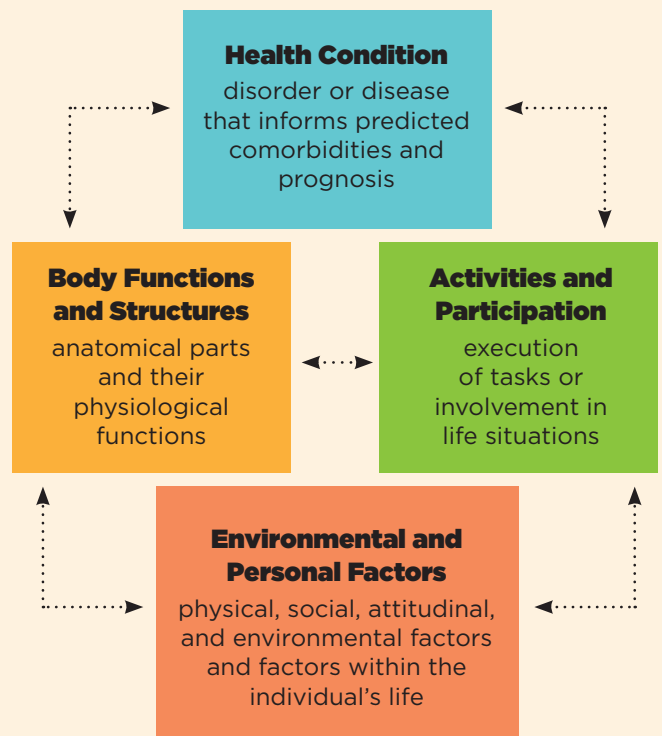
Why target person-centered functional goals?

- To maximize outcomes that lead to functional improvements that are important to the individual
- To optimize the individual's potential to participate in meaningful activities
- To facilitate a partnership that ensures the individual and family have a voice in the care received and outcomes achieved
- To demonstrate to the payers the value of skilled services

What is the ICF, and how does it help?

The International Classification of Functioning, Disability and Health (ICF)—developed by the World Health Organization (WHO)—is a framework to address functioning and disability related to a health condition within the context of the individual's activities and participation in everyday life.

ICF: International Classification of Functioning, Disability and Health



Person-Centered Focus on Function: Aphasia

Case study: Mr. L

Health Condition: Broca's aphasia post-CVA

Assessment Data

Body Functions and Structures

Spoken Language Function (WAB-R^a)

- Aphasia quotient: 67.8
- Naming: 37/60
- Word fluency: 5/20 (1- to 2-word utterances)
- Sentence comprehension: 5/10
- Responsive speech: 3/10
- Word finding: 50/100

Reading comprehension (non-standardized assessment)

- Words: 80%
- Sentences: 60%
- Paragraphs: 50%

Activities and Participation

(ALA-2^b, interview)

- Reduced participation in activities outside of the home (e.g., viewing or participating in sports)
- Difficulty engaging in preferred reading activities (e.g., reading novels or newspapers)
- Increased withdrawal from social interaction
- Wife reports difficulty understanding his attempts to communicate needs at home

Environmental and Personal Factors

(CCRSA^c, interview)

- Age: 64
- Comorbid chronic health conditions: right hemiparesis, hypertension
- High level of motivation
- Desire for greater independence in social interactions
- Reduced confidence in communication with familiar and unfamiliar speakers
- Supportive family & friends

Clinical Reasoning

What impairments most affect function in the current setting or at discharge, based on clinician assessment & the individual's self-report?

What activities are most important to the individual in the current or discharge setting?

What personal/environmental characteristics help or hinder participation in activities or situations in the current or discharge setting?

Goal Setting

Mr. L's Functional Goals

Long-Term Goal:

Mr. L will use functional communication skills for social interactions (e.g., greetings, social etiquette, and short questions/simple sentences) with both familiar and unfamiliar partners with 90% success.

Short-Term Goals:

- Mr. L will formulate 3-word utterances to communicate daily needs in response to pictures with 75% accuracy with minimal cues.
- Mr. L will increase the use of strategies for effective repair of misunderstandings during conversations 80% of the time with minimal cues.
- Mr. L will demonstrate reading comprehension of 5-sentence paragraphs with 80% accuracy with minimal cues.
- Mrs. L's skill in supporting conversation with her husband with aphasia will improve as rated on the MSC (Measure of Skill in Supported Conversation, Kagan et al., 2004).

^a WAB-R: *Western Aphasia Battery—Revised* (Kertesz, 2006)

^b ALA-2: *Assessment for Living with Aphasia – 2nd edition* (Kagan et al., 2007)

^c CCRSA: *Communication Confidence Rating Scale for Aphasia* (Babbitt, Heinemann, Semik, & Cherney, 2011)

For clinical and documentation questions, contact healthservices@asha.org.

The interpretation of ICF and examples above are consensus based and provided as a resource for members of the American Speech-Language-Hearing Association.