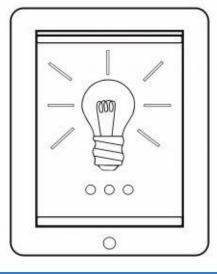
COMMUNICATION PARTNER TRAINING



Goal Examples: Acute Care Setting

When writing goals for communication partners in the acute care setting, you may consider including goals that accomplish the following:

- Ensure that all parties involved have a general understanding of aphasia in order to foster greater empathy and respect for the person with aphasia (PWA).
- Ensure communication partners can implement some strategies to support the PWA's communication upon discharge.

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Understanding Aphasia

The patient's communication partner(s) will...

- engage in a discussion with the SLP regarding the patient's aphasia diagnosis and verbalize back the primary characteristics of the aphasia with 100% accuracy given written literature to refer to prior to discharge.
- explain to at least 1 other communication partner (e.g., family member, friend, caregiver) the primary characteristics of the patient's aphasia diagnosis prior to discharge.
- explain to at least 1 other communication partner (e.g., family member, friend, caregiver) prior to discharge how aphasia affects the PWA's language, but not the PWA's intelligence.
- engage in a discussion with the SLP regarding the emotional side effects associated with aphasia (e.g., withdrawal, depression, anger, increased irritability) and verbalize back the main points of the discussion with 100% accuracy given written literature to refer to prior to discharge.
- demonstrate an ability to identify the emotional side effects associated with aphasia (e.g., withdrawal, depression, anger, increased irritability), as evidenced by the communication partner reporting to the SLP examples of witnessing these side effects in the PWA at least 1 time prior to discharge.
- read through or watch at least 1 recommended resource related to _____ (e.g., what is a phasia, prognosis for aphasia recovery, supportive communication techniques) either with the SLP or on his/her own prior to discharge.
- acknowledge the PWA's competence by stating sentiments such as "I know you know" at least 1 time in a conversation where the PWA experiences communication difficulty as observed by the SLP prior to discharge.
- acknowledge the PWA's competence by attributing communication breakdowns to their own limitations as a communicator (e.g., "You know I'm not good at explaining these things clearly!") during at least 1 communication breakdown as observed by the SLP prior to discharge.
- validate and comfort the PWA by verbalizing their shared experience of being frustrated during communication breakdowns in at least 1 instance as observed by the SLP prior to discharge.

Supporting Communication

The patient's communication partner(s) will...

- participate in at least 1 joint session with the PWA and the SLP to complete communication partner training prior to discharge.
- prior to discharge, review together with the SLP the available visual communication supports that have been supplied and engage in a discussion about how to implement them during communicative

interactions, and then verbalize back the main points of the discussion with 100% accuracy given written instructions to refer to.

- provide salient information and/or photos about the PWA via hard copy or email in order for the SLP to create customized communication supports (e.g., pictures, keywords) prior to discharge.
- independently acknowledge the PWA's competence by using a natural tone of voice when conversing with the PWA for the duration of at least 1 session prior to discharge.
- acknowledge the PWA's competence by using a natural tone of voice 100% of the time while integrating supportive communication techniques in a 10-minute conversation, given guiding verbal cues from the SLP.
- write down keywords or topics in at least 80% of appropriate instances to support the PWA's understanding in a 10-minute conversation given guiding verbal cues from the SLP.
- pause and attend to the PWA's facial expression, eye gaze, body posture or gestures to determine their level of comprehension after at least 80% of communicated messages across a 10-minute conversation, given verbal reminders from the SLP.
- ask one question at a time in 100% of efforts to elicit information from the PWA across a 10-minute conversation given verbal reminders from the SLP.
- ask appropriate fixed choice questions (e.g., "Do you want water or coffee?") to determine patient preferences, employing the necessary supportive techniques (e.g., written keywords, gestures) at least 2 times across a 10-minute conversation.
- ask the patient at least 3 questions related to his/her health information (e.g., safe transfers, aspiration precautions, dysphagia strategies, etc.) within a session using trained supportive communication techniques given guiding verbal cues from the SLP.
- ask the patient at least 3 questions related to his/her needs and/or wishes within a session using trained supportive communication techniques (e.g., written keywords, pictures, gestures) given guiding verbal cues from the SLP.
- use effective communication strategies (e.g., natural gestures, graphemic cueing, simplified syntax)
 during at least 80% of opportunities during a 10-minute conversation with the patient about his/her goals of care and discharge recommendations given guiding verbal cues from the SLP.
- develop a plan for communication support (e.g., compiling relevant pictures, graphics, text, materials) for a specific conversation, given guidance from the SLP, and implement the plan in a session prior to discharge.
- serve as an advocate for the patient by informing another friend/family member about effective and supportive communication strategies (e.g., asking yes/no questions, using pictures/drawings, simplified syntax) on 2/2 opportunities independently.
- acknowledge the patient's competence by including the patient in conversations on 100% of opportunities throughout at least 1 entire session prior to discharge.
- assist the patient in using visual communication supports to effectively make choices about ______ (e.g., TV channel, beverage choice, meal options, bed position, seating arrangement) at least 3 times as observed by SLP prior to discharge.