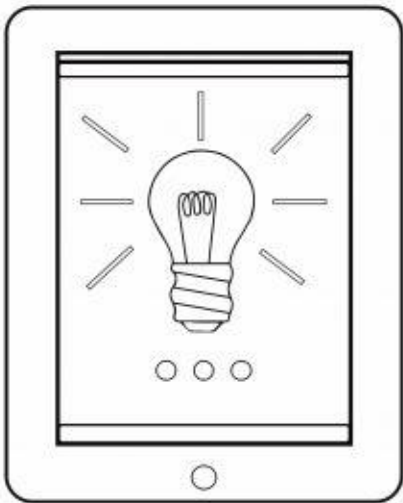


COMMUNICATION PARTNER TRAINING



Goal Examples: Rehabilitation Settings

When writing goals for communication partners in rehabilitation settings,
you may consider including goals that accomplish the following:

- Ensure that all parties involved have a thorough understanding of the aphasia in order to foster greater empathy and respect for the person with aphasia (PWA).
- Ensure communication partners are well-versed and well-practiced in employing the most appropriate strategies for supporting the PWA's communication.
- Ensure the PWA and the communication partners understand the principles underlying progression in aphasia therapy, so that they can continue creating novel therapeutic activities even after discharge from speech therapy.

Understanding Aphasia

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

- verbalize back the primary characteristics of the patient's aphasia diagnosis with 100% accuracy by the end of the second session of therapy.
- explain to 3 other communication partners (e.g., family members, friends, carers) the primary characteristics of the patient's aphasia diagnosis by the end of 4 weeks.
- explain to another communication partner within the next 2 weeks how aphasia affects the PWA's language, but not the PWA's intelligence.
- 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 3 times across 4 weeks.
- read through and/or watch recommended materials on the experience of people with aphasia and/or supportive communication strategies prior to an in-person Communication Partner Training session scheduled on _____.
- acknowledge the PWA's competence by stating sentiments such as "I know you know" at least 1 time in 100% of conversational exchanges where the PWA experiences communication difficulty across 2 consecutive sessions.
- 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 per session across 2 sessions.

Supporting Communication

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

- acknowledge the PWA's competence by using a natural tone of voice throughout 100% of conversations with the PWA across 2 sessions.
- acknowledge the PWA's competence by choosing adult or complex topics for discussion for at least 4 conversations across at least 2 sessions.
- acknowledge the PWA's competence by using a natural tone of voice 100% of the time while integrating supportive communication techniques across at least 2 conversations.
- validate and comfort the PWA by verbalizing their shared experience of being frustrated during communication breakdowns in at least 2 instances across 2 sessions.
- use short, simple sentences and an expressive voice for at least 90% of sentences stated in a 10-minute conversation.

- use gestures in at least 80% of appropriate instances to support the PWA's understanding in two 10-minute conversations across 2 sessions.
- write down keywords or topics in at least 80% of appropriate instances to support the PWA's understanding in two 10-minute conversations across 2 sessions.
- use pictures or charts to illustrate an idea in at least 80% of appropriate instances to support the PWA's understanding in two 10-minute conversations across 2 sessions.
- eliminate distractions (e.g., noises, other people, multiple visual materials) as appropriate prior to 100% of conversations with the PWA across 3 sessions.
- 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 two 10-minute conversations.
- ask one question at a time in 100% of efforts to elicit information from the PWA across a 15-minute conversation.
- 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 3 times across a 15-minute conversation.
- provide an alternative method (e.g., pointing to written words, pictures, objects, or mimicking gestures) for the PWA to be able to express themselves after at least 80% of the partner's requests for information throughout two 15-minute conversations across 2 sessions.
- ask yes/no questions in at least 80% of instances where the technique is indicated for the PWA (as judged by the training SLP) across a 20-minute conversation.
- ask the PWA a general yes/no question in 80% of relevant opportunities in a 45-minute session prior to progressing to specific yes/no questions
- assist the PWA in getting messages out by asking him/her to gesture, point to objects or pictures or write key words (e.g., "Can you show me..." "Can you write for me...") in 80% of instances where the PWA needs cuing across a 20-minute conversation.
- give the PWA sufficient time to respond to at least 80% of requests for information throughout two 15-minute conversations across 2 sessions.
- verify the PWA's message by summarizing back the information (e.g., "So let me make sure I understand"), using trained techniques, in 80% of opportunities throughout three 5-minute conversations across 3 sessions.
- use gestures and/or written key words to summarize back and verify the PWA's message in 80% of opportunities in a 15-minute conversation.
- verbally paraphrase back and verify the PWA's message in 80% of opportunities in a 15-minute conversation.
- verbally (or via alternative methods) expand on what they think the PWA might be trying to say in 80% of opportunities in a 20-minute conversation.

- remember to recap (via the use of verbal or multimodal means) all messages communicated after a long conversation with the PWA at least 2 times across 2 sessions.
- prepare for a conversation with the PWA by having at least some helpful materials ready (e.g., blank paper, markers, pencils, flashcards, pictures, cut out window to frame one picture at a time) prior to 100% of planned conversations across 3 sessions.
- use effective, supportive communication strategies (e.g., natural gestures, graphemic cueing, simplified syntax) on at least 80% of opportunities during a 10-minute conversation.
- acknowledge the patient's competence by including the patient in conversations on 100% of opportunities across 2 consecutive sessions.
- prepare and use appropriate aphasia-friendly print material to guide a discussion about a specific topic given minimal assistance from the treating SLP (e.g., SLT reviews material and provides minimal to no suggested edits) by the end of 6 weeks.
- take the initiative to assist the patient in the use of multimodal communication to make choices about ____ 5 times across 2 consecutive sessions (observed in session or reported completion between sessions).
- ask at least 2 "wh-" questions (e.g., What does it look like? Where is it located?) to encourage the PWA to use their training in circumlocution in at least 80% of the PWA's instances of anomia throughout 1 therapy session.
- provide at least 2 appropriate cues (e.g., phonemic, semantic, carrier phrase) in 80% of the PWA's instances of anomia in order to enable the PWA to find words as independently as possible throughout 1 therapy session.
- assist the PWA in increasing their number of content words by reinforcing, modeling, shaping and/or using "wh-" cues in 80% of the PWA's messages throughout a 45-minute therapy session.
- demonstrate use of appropriate, aphasia-friendly speech by verbalizing one idea/question at a time and using appropriate speech rate in 80% of conversational opportunities across 2 consecutive sessions.
- demonstrate use of aphasia-friendly text messages by stating one idea/question at a time and using simplified syntax as indicated in 8 out of 10 practice messages.
- use at least 2 trained, effective communication strategies (e.g., gestures, orthographic cues, drawings/charts, other visual aids) to improve patient comprehension in 80% of communication attempts throughout a 45-minute session.
- reflect/repeat back at least 80% of the PWA's messages in a 20-minute conversation, while using applicable comprehension supports (e.g., written key words, drawings/charts, gestures) in order to verify the PWA's meaning.
- verbalize back definitions and examples of perseverations and semantic paraphasias in the PWA's speech with 100% accuracy by the end of the second therapy session in order to better determine the most relevant content words in the PWA's messages.

Supporting Use of AAC

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

- Goal examples to come!

Supporting Aphasia Therapy

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

- describe and provide examples of the principles of aphasia therapy (e.g., specificity, repetition and intensity, salience and motivation, transference, interference) with 100% accuracy by the end of 8 weeks so that they can continue creating novel therapeutic activities for the PWA after discharge from speech therapy.
- demonstrate how to create a script of appropriate length and complexity (as judged by the treating SLP) by the end of 8 weeks so that the PWA can continue to learn scripts that help them better participate in life situations.
- by the end of 12 weeks, describe and demonstrate how to personally cue or set up app-based cues, and then fade those cues, so that the PWA can effectively practice and learn a new script.
- demonstrate across x3 practices how to assist the PWA in creating the visual and orthographic cues needed to better participate in an upcoming phone (or in-person) conversation.
- demonstrate across x3 practices how to scaffold the orthographic cues needed for the PWA to learn how to spell and write a new word/phrase/sentence.