If you are viewing this course as a recorded course after the live webinar, you can use the scroll bar at the bottom of the player window to pause and navigate the course.

This handout is for reference only. Non-essential images have been removed for your convenience. Any links included in the handout are current at the time of the live webinar, but are subject to change and may not be current at a later date.
Person-Centered Care 101 for Neurogenic Disorders

Sarah Baar, MA, CCC-SLP

Moderated by:
Amy Natho, MS, CCC-SLP, CEU Administrator, SpeechPathology.com

Need assistance or technical support?

- Call 800-242-5183
- Email customerservice@SpeechPathology.com
- Use the Q&A pod
How to earn CEUs

- Must be logged in for full time requirement
- Log in to your account and go to Pending Courses
- Must pass 10-question multiple-choice exam with a score of 80% or higher
  - Within 7 days for live webinar; within 30 days of registration for recorded/text/podcast formats
- Two opportunities to pass the exam

Person-Centered Care 101 for Neurogenic Disorders

Sarah Baar, MA, CCC-SLP
Honeycomb Speech Therapy
Disclosures

- Owner of Honeycomb Speech Therapy LLC, selling person-centered therapy materials for profit at www.honeycombspeechtherapy.com
- Owner of for-profit private practice, Bright Life Therapies
- Receiving honorarium for speaking today

Learning Outcomes

After this course, participants will be able to:

- Explain how person-centered care differs from the medical model that was previously emphasized in speech-language pathology.
- Describe how to use Goal Attainment Scaling and different measurable factors to write functional, person-centered goals.
- List 5 evidence-based cognitive-communication interventions that can be integrated with personally relevant stimuli.
Same Injury, Same Problems?
We treat the symptom, not the disease.

What Is Person-Centered Care?

(Brummel-smith, et al., 2016)
WHO-ICF

- To maximize functional improvements that are important to the individual
- To optimize participation 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
Life Participation Approach to Aphasia (LPAA)

* Assessment includes relevant life participation needs
* Treatment facilitates life goals
* The PWA is at the center of decision-making
* Calls for a broadening of how treatment of aphasia was previously approached

Treatment of Language
INCOG Guidelines for Cognition

**Attention:** Strategy training focused on *functional everyday activities*, especially with mild to moderate attention deficits. Attention improves with tasks similar to those being trained.

**Memory:** Goals should be *meaningful to patient*.

**Executive Function:** Problem Solving, Planning, Organization skills; Metacognitive strategy training during *everyday activities*, so individuals understand need for strategy and context it should be used.

**Cognitive-communication:** Patient-centered goals are recommended. They should occur in *functional context* and provide opportunity for rehearsal to promote generalization. (Ponsford, et al., 2014.)

---

Treatment of Cognition

---
Medical Model

WHO-ICF Impairment Level

Decontextualized, training discrete abilities

“Bottom-up” Approach

Therapist-centered

Most standardized tests designed this way

Person-Centered Care

WHO-ICF Activity + Participation

In-context, training tasks and skills specific to activity or participation

"Top-Down" approach

Person-centered

Goals and outcomes are individualized based on what is valued and prioritized by the person

Triple Aim

1. Best Outcomes

2. Best Patient Satisfaction

3. Best Value (lowest cost to the healthcare system -- PRODUCTIVITY!)

Evidence for PCC

*Less likely to be readmitted

*More trust and motivation, more likely to adhere to treatment regimens

*Better recovery, quicker rates of generalization, improved self-awareness

*Better emotional health at follow-up

*Fewer diagnostic tests and referrals

(Hinckley & Yones, 2014) (Rutherford & Childs, 2015)
What Do Insurance Companies Say?

Assessment Process
**Medical Model**

- Standardized Assessment
- Impairment-Based Results
- Therapist-Centered Goals

**Person-Centered Care**

- Intro to SLP Team Role / Goal-Setting Process
- Needs-Based Assessment where patient / family identify goals and priorities
- Formal clinical assessment based on conversation
- Collaboratively determine treatment plan and goals

---

**Key Components of Non-Standardized Assessment**

- Needs-Based Assessment
- Understand and simulate context and environment
- Person-Centered Outcomes / Rating Scales (PCO's)
Setting-Specific Needs

Hospital or Nursing Home

*Order a Meal
*Use the TV Remote / Call Light
*Place a Phone Call
*Find orientation information
Understanding Context / Environment

*Strategies
*Background noises
*Environment / Positioning
*Peer support

Person-Centered Outcomes for Aphasia

Burden of Stroke Scale

Stroke and Aphasia Quality of Life Scale

ASHA Quality of Communication Life Scale

Communication Disability Profile

Communication Outcome After Stroke

Communication Confidence Rating Scale for Aphasia
Person-Centered Assessment

Integrate your knowledge!
* What would you change in your assessment “flow” to be more person-centered?
* Write 3 key questions or skills you can include in a Needs-Based Assessment for your setting
* Find 2 PCO’s that would work in the population you serve

Functional Goal-Setting
Medical Model Goals

“The patient will recall 5/5 unrelated words after a 5-minute delay.”

“The patient will follow 2-step commands with 80% acc.”

“The patient will organize 4-step directions with 90% acc and min cues.”

Person-Centered Care Goals

“The patient will recall +4/4 steps to work coffee maker, with visual cues developed collaboratively with SLP.”

“The patient will comprehend 4 pieces of information from a phone message, using repair skills independently, including replaying the message.”

“The patient will organize a weekly grocery list with min cues from husband, using organizational template designed with SLP.”
Real Life Is Messy!

*Goal Attainment Scaling
*Goal Mapping
*Self-Anchored Rating Scales
*Broaden What You Measure

Goal Attainment Scaling

Situation: Baking Bread (Attention/Memory)

1. Ability Worsened
   - Mix ingredients incorrectly for bread dough.

2. Current Status
   - Mix ingredients correctly but unable to complete more steps.

3. The Goal
   - Make 1 loaf each month with 2 reminders from wife for attention to multi-step task.

4. Exceed the Goal
   - Make 2 loaves each month with 1 reminder from wife each time for attention to multi-step task.

5. Hit it Out of the Park!
   - Make 2 loaves per month with 0 reminders to assist with.
Broaden What You Measure!

Goal-setting is the launchpad for person-centered care, and should be focused on activity or participation. Depending on your patient’s situation, you may choose to address **skill**, **efficiency**, **strategy use**, **family support**, **education / knowledge**, or **environment modification** as brilliantly outlined in the following reference:


---

Skill

The patient will explain steps for a frequently used recipe of her choice, using word-finding strategies to convey 100% of ingredient list.
Strategy

Pt and SLP will collaboratively determine compensatory strategies to assist with increasing cooking (recipe modification, timers for recall, grocery list organizer, meal planning graphic organizer) and implement 2 in the next 2 weeks.

Education / Knowledge

The patient will demonstrate carry-over of skills and strategies developed in speech therapy by reporting success with making 1 meal per week with min cues from husband, per family report.
Efficiency

The patient will make a weekly grocery list independently in 20 minutes or less with use of graphic organizer and strategies as collaboratively determined with SLP.

Family Support

Family will understand how to use supportive communication for aphasia specifically for creation of grocery list, demonstrated by patient/family creation of list with 10+ items in 7 minutes or less.
“In Order To”

“The patient will increase verbal fluency to 13 animals/minute”

TRANSFORM→

“The patient will use complete sentences in order to explain help needed for a transfer or bed positioning in 1 minute or less.”

Person-Centered Goal-Setting

Integrate your knowledge!

*Use Goal Attainment Scaling to practice writing a goal for a person with a goal of improving call light use.

*Transform 2 medical model goals you typically use so they are person-centered (“In order to”)
Evidence-Based Language Interventions

**Personally Relevant Stimuli for Words and Pictures**
Cherney et al. (2015), McKelvey et al. (2010).

**VNEST (Verb Network Strengthening Treatment)**

**Script Training**
Youmans, G. et al. (2005).

**Semantic Feature Analysis**

**Communication Supports (High tech and low tech AAC)**

**Semantic & Phonemic Cues**
Wambaugh, Doyle, Martinez, & Kalinyak-Fliszar (2002)

**Communication Partner Training (SCA, PACE)**

**RET (Response Elaboration Training)**

**Copy and Recall Treatment (CART)**

**Personally-Relevant Stimuli**

What do people with aphasia want to say?
(Palmer, Hughes, & Chater 2017)
Sarah’s Language Launchpad

SOCIAL:

HOBBY:

PLACE/SETTING-SPECIFIC:

WORK:

MEDICAL:

HOME:

Sarah’s Language Launchpad

SOCIAL: Craft Beer
Place / Setting: Casino
MEDICAL: Diabetes
Hobby: Golf
WORK: Geography, School supplies, student names, coworkers
HOME: Lawn care, food network shows
Copy and Recall Treatment (CART)

---

Script Training for Aphasia & Apraxia

WORK:

“Welcome to 7th grade.”
“Please take a seat.”
“Make sure you write down the homework assignment.”
“No talking during the test.”
“Raise your hand if you have a question.”
Semantic Feature Analysis

SOCIAL: Craft Beer
WORK: Geography, Maps, School Supplies
HOME: Lawnmower, Food Network
HOBBY: Casino,
PLACE: Golf Course, Campground

External Language Supports

The Usual
English Muffin
Hard-boiled egg
Cereal
Fruit

Money
1 One Dollar Bill
2 Two
3 Three
4 Four
5 Five Dollar Bill
6 Six
7 Seven
8 Eight
9 Nine
10 Ten Dollar Bill

Communication
- Help me talk
- Give me a choice
- Give me words to help conversation
- Say back what you think I said
- Ask me Yes/No questions
- 1 person at a time is best
+ I CAN understand!
Communication Partner Training

*Conversational Coaching
*PACE
*SCA
Person-Centered Intervention

Integrate your knowledge!
*Practice filling out a “Language Launchpad” for yourself! This list of vocabulary should be a launchpad for choosing personally-relevant words in an evidence-based language treatment.

Person-Centered Home Programs
What’s The Goal of a Home Program?

*Mass Practice

*Relevant, Meaningful

- Continue / Apply strategy or skill that was introduced in speech therapy.
- Receive feedback from patient on how things are working at home
- Adjust plan as needed.

Medical Model Home Program

“What does this have to do with anything?”
Person-Centered Home Program

“It was just like we practiced!”
Challenges / Solutions

PRODUCTIVITY
*Documentation
*Props / Materials
*Setting doesn’t prioritize

No Goals By Patient
*Motivational Interviewing
*Counseling in Communication Disorders: A Wellness Perspective by Dr. Audrey Holland
*Optimizing Cognitive Rehab by Sohlberg & Turkstra
*Family input / rating scales
Questions? Comments?

Let’s get REAL! Toss the workbooks and join the person-centered care movement today!

Sarah@honeycombspeechtherapy.com

References

References