Facilitating life participation across settings for individuals with aphasia

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Disclosure

• Financial—I received an honorarium from CSHA for this presentation and receive a salary from SCSU.
• Nonfinancial— I have no relevant nonfinancial relationships.

Learner Outcomes:
After attending this presentation, learner will be able to:
• Describe ICF and A-FROM models for assessment and treatment of aphasia
• Incorporate LPAA in the evaluation process
• Develop functional life participation goals for acute care through community settings
• Identify outcome measures to examine meaningful life changes

Time-ordered Agenda
4:30-6:00: Life Participation Approaches to Aphasia (LPAA), rehabilitation frameworks, and functional assessment
6:00-6:15: Break
6:15-7:30: Setting functional goals and measuring outcomes
7:30-7:45: Questions and discussion

Life Participation Approach to Aphasia (LPAA)*

• A consumer-driven philosophy and model of service delivery- not a specific clinical approach.

Core Components of LPAA

✓ The explicit goal is enhancement of life participation.
✓ All those affected by aphasia are entitled to service.
✓ Both personal and environmental factors are targets of assessment and intervention.
✓ Success is measured via documented life enhancement changes.
✓ Emphasis is placed on availability of services as needed at all stages of life with aphasia.

The Evidence for LPAA (Simmons-Mackie & Kagan, 2015)

What is needed to live successfully with aphasia after stroke?

- Five qualitative studies collectively report results of interviews with 40 PWA, 24 family members, and 25 SLPs
- Key themes: engage in meaningful activities, have relationships, communicate with others, and feel positive
- Conclusions: Treatment should be holistic AND treatment and research should report outcomes relating to key themes

Evidence (cont.)

Patient-centered Goals

- Four qualitative studies collectively report on interviews with 50 PWA, 48 family members, & 34 SLPs
- Goals of PWA and family were related to activity and participation, SLP goals were related to impairment early in rehab and moved toward activity/participation later
- Conclusion: PWA and families should be included in goal selection in order to achieve patient-centered goals

Evidence (cont.)

Information Needs

- Three studies surveyed or interviewed 368 PWA and/or carers
- Conclusion: Accessible information should be provided at onset and throughout the continuum of care

Rationale for a focus on life participation

1. LPPA interventions have the potential to reduce the consequences of disease and injury that contribute to long-term health costs
   - Social isolation
   - Depression
   - Loss of independence
   - Loss of relationships
   - Loss of productive activity
   - Loss of pleasurable activities

Rationale for a focus on life participation

2. Improve QOL
   - Perceived QOL and social functioning are significantly restricted among individuals with aphasia—particularly severe aphasia (Hilari, 2011, Hilari & Byng, 2009)
   - Spouses also reported decreased life satisfaction at 1-year post-aphasia (Forsberg-Warleby et al., 2004).
   - Social exclusion of persons with aphasia can be helped by
     - Communication support
     - Acknowledgement and respect
     - Opportunity and access
     - Attention to the environment (Parr, 2007)

Rationale for a focus on life participation

3. Time
   - Many individuals with aphasia will not have access to long-term services
     - Need to make use of the limited treatment resources that are available to make a potentially long-term impact
     - An exclusively impairment based approach may not be the most efficient way to maximize limited treatment time (Hinkley & Carr, 2005)
4. Regulatory Compliance - JACHO

“...A hospital must embed effective communication, cultural competence, and patient- and family-centered care practices into the core activities of its system of care delivery—not considering them stand-alone initiatives—to truly meet the needs of the patients, families, and communities served.”

• Those actively involved in their care often have better outcomes. (Joint Commission International Center for Patient Safety, 2006).

• Patients with communication problems are 3 times more likely to experience a preventable adverse effect than patients with out such problems (Bartlett et al., 2008).

• Obtaining informed consent to medical procedures may be compromised in patients with aphasia (Penn et al., 2009).

• Communication among patients with aphasia and hospital staff can be improved with staff training training (Jensen, et al., 2015).

Rehabilitation Frameworks

• The World Health Organization (WHO) International Classification of Functioning, Disability and Health (ICF)
  • 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.

• Aphasia Framework for Outcome Measurement (A-FROM) (Kagan, et al., 2011)
  • Based on WHO-ICF, but specifically for aphasia and addresses factors related to QOL

ICF and LPAA- more than “functional”

Activity

• Completion of a task in a structured environment (capacity)
  • Role-play a phone call to a museum
  • Fill out deposit form
  • Orally read items on a menu
  • Converse in aphasia group

Participation

• Performance of task in “real-life”
  • Make a phone call to museum
  • Go to bank and fill out deposit form
  • Order at a restaurant
  • Converse at a party
**Patient-Centered Model of Assessment and Goal Setting**

* Adapted from Leach, Fleming, & Haines, 2010

**Acute Care “Mr. F.”**
- 64 years old
- Admitted to hospital 3 days ago with left-hemisphere stroke
- Exhibits characteristics of Wernicke's aphasia
- Refuses medications
- Seems “confused”
- Angry that he does not get the food that he likes; wife concerned not getting the nutrition he needs to recover

**Activities and Participation**
- Take medication
- Communicate his food preferences

**Environmental and Personal Factors**
- Impatient nurses
- Patient frustration

Hinkley, 2018

**Inpatient Rehab- “Mary”**
- 45 years old
- Moderate-severe Broca's aphasia, AOS, and R-hemiparesis following a stroke
- 6 weeks post onset
- Admitted to rehab unit
- Two teenage girls; responsible job as a paralegal; in the process of divorce, selling her house and finding a new place to live

**Activities and Participation**
- Participate in divorce proceedings
- Find new place to live
- Support children at school

**Environmental and Personal Factors**
- Family/attorney/public unfamiliar with aphasia
- Patient need for emotional support

Kagan et al., 2007
Outpatient rehab- “Mr. L”

- 64 years old, retired
- Moderate aphasia
- Previously very social- he and wife went out to eat with friends 2-3 times /week
- Read a book each week, the newspaper daily
- Currently, socially isolated, wife often can’t understand his attempts to communicate
- Just started OP therapy- has 12 sessions

Activities and Participation
- Read
- Go out to eat

Environmental and Personal Factors
- Wife supportive but frustrated
- Friends don’t understand aphasia

Assessment

Traditional
( ICF body structures/fx)
- BDAE
- BNT
- RCBA-2
- WAB-R

LPAA
( ICF Activity-Participation)
- Informal- use stimuli in environment
- Consider multi-modal communication
- Level of participation in conversation and important discussions
- Perspective on psychosocial dimensions (control of their life, QOL, social relationships)

Acute Care

Dynamic Approach
- Capitalize on topics/objects in the environment that are personally relevant
- Steer away from explicit/didactic tasks
- Incorporate automatic/implicit tasks
- Note favored response modality
- Note clarity of responses in each modality

Tasks
- During meal:
  - Match spoken word to food item
  - Match printed word on menu to food item
  - Serve food without a utensil
  - Patient must request it
  - Read consent form, ask questions
  - Provide a form and ask for signature
  - Identify medication by attribute (white, round)
  - Identify by purpose (…for high blood pressure)

CADL-3

- Assessment of functional communication
  - Doctor’s office
  - Calendar usage
  - Grocery store
  - 0, 1, 2 point scoring
  - Full credit for fully communicative responses, regardless of modality (e.g. pointing, gesturing)

Assessment for Living with Aphasia-2 (ALA) (Kagan et al., 2007)

- Provides quantitative and qualitative data from the perspective of the person living with aphasia
- Uses pictographic approach which allows for participation across a full range of severity
- Based on Living with Aphasia: Framework for Outcome Measurement A-FROM
- Captures real-life issues for planning and evaluating aphasia treatment and making funding decisions
Communication Confidence Rating Scale for Aphasia (Babbit et al., 2011)

<table>
<thead>
<tr>
<th>How confident are you…</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>…about talking with people?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>…about your ability to stay in touch with family and friends?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>…that people include you in conversations?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>…about your ability to follow news and sports on TV</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>…about your ability to follow movies on TV or in a theater?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>…about your ability to speak on the telephone?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>…that people understand you when you talk?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>…that you can make your own decisions?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>…about your ability to speak for yourself.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>…that you can participate in discussions about your finances?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Assessment of Language Related Functional Activities (ALFA) (Baines, et al., 1999)

- telling time
- counting money
- addressing an envelope
- solving daily math problems
- writing a check/balancing a checkbook
- understanding medicine labels
- using a calendar
- reading instructions
- using the telephone
- writing a phone message.

Measure of Participation in Conversation (Kagan et al., 2004; Togher et al., 2010)

A. Interaction

<table>
<thead>
<tr>
<th>Verbal</th>
<th>Does PWA:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Share responsibility for maintaining feel/flow of conversation?</td>
</tr>
<tr>
<td></td>
<td>- Add information to maintain the topic</td>
</tr>
<tr>
<td></td>
<td>- Use appropriate turn-taking?</td>
</tr>
<tr>
<td></td>
<td>- Demonstrate active listening?</td>
</tr>
<tr>
<td></td>
<td>- Choose appropriate topics and questions for the context?</td>
</tr>
<tr>
<td></td>
<td>- Show communicative intent, even if content is poor?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Non-verbal</th>
<th>Does PWA:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Initiate/maintain interaction with comm. partner or make use of supports offered by comm. partner to initiation/maintain interaction?</td>
</tr>
<tr>
<td></td>
<td>- Acknowledge the frustration of the CP or acknowledge their competence</td>
</tr>
<tr>
<td></td>
<td>- Give PWA feedback on their participation</td>
</tr>
<tr>
<td></td>
<td>- Ask PWA questions to continue conversation</td>
</tr>
</tbody>
</table>

B. Transaction

<table>
<thead>
<tr>
<th>Verbal and Non-verbal</th>
<th>Does PWA:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Maintain exchange of information, opinions and feelings with CP by sharing details or by inviting CP to share details?</td>
</tr>
<tr>
<td></td>
<td>- Present information in an organized way?</td>
</tr>
<tr>
<td></td>
<td>- Provide an appropriate amount of information?</td>
</tr>
<tr>
<td></td>
<td>- Ask clarifying questions when necessary?</td>
</tr>
<tr>
<td></td>
<td>- Ever initiate transaction?</td>
</tr>
<tr>
<td></td>
<td>- Use support offered by CP for purpose of transaction?</td>
</tr>
<tr>
<td></td>
<td>- Does content of transaction appear to be accurate?</td>
</tr>
</tbody>
</table>

Measure of Participation in Conversation (Kagan et al., 2004; Togher et al., 2010)
Mr. L: Health Condition: Broca’s aphasia post L CVA

<table>
<thead>
<tr>
<th>Body Functions/Structures</th>
<th>Activities/Participation</th>
<th>Environment/Personal Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Western Aphasia Battery</td>
<td>(ALA, interview)</td>
<td>(CCRSA, interview)</td>
</tr>
<tr>
<td>Aphasia quotient: 67.8</td>
<td>• Reduced partic in activities outside of the home (e.g., viewing or partic in sports)</td>
<td>• Right hemiparesis, hypertension</td>
</tr>
<tr>
<td>Sentence comp: 5/10</td>
<td>• Difficulty engaging in reading activities (e.g., novels or newspapers)</td>
<td>• High level of motivation</td>
</tr>
<tr>
<td>Naming: 37/60</td>
<td>• Withdrawal from social interaction</td>
<td>• Desire for greater independence in social interactions</td>
</tr>
<tr>
<td>Word fluency: 5/20</td>
<td>• Difficulty understanding pt’s comm. at home</td>
<td>• Reduced confidence in communication with familiar and unfamiliar speakers</td>
</tr>
<tr>
<td>Responsive speech: 3/10</td>
<td></td>
<td>• Supportive family &amp; friends</td>
</tr>
<tr>
<td>Word finding: 50/100</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reading comp (informal)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Words: 80%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sentences: 60%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Paragraphs: 50%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Goal Setting

Impairment-based approach

GOALS

LPAA

Person-centered focus on function

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

https://www.asha.org/uploadedFiles/ICF-Aphasia.pdf

Why target person-centered 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

ICF Checklist

Part 2: Activity Limitations and Participation Restriction

Performance qualifier:
• Extent of Participation Restriction- actual performance of task or action in patient’s current environment
• Is patient doing the task in real-life situations?

Capacity qualifier:
• Extent of Activity Limitation. Person’s ability to execute a task or action, without assistance.
• Can patient do the task in therapy?

0 No difficulty means the person has no problem
1 Mild difficulty means a problem that is present less than 25% of the time, with an intensity a person can tolerate and which happens rarely over the last 30 days.
2 Moderate difficulty means a problem that is present less than 50% of the time, with an intensity, which is interfering in the persons day to day life and which happens occasionally over the last 30 days.
3 Severe difficulty means that a problem that is present more than 50% of the time, with an intensity, which is partially disrupting the persons day to day life and which happens frequently over the last 30 days.
4 Complete difficulty means that a problem that is present more than 95% of the time, with an intensity, which is totally disrupting the persons day to day life and which happens every day over the last 30 days.
Mr. F.

**A & P DOMAINS**

<table>
<thead>
<tr>
<th>Domain/ Activity</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>d335 Producing nonverbal messages</td>
<td>Patient will independently indicate preferences for food choices using any means</td>
</tr>
</tbody>
</table>

Mary

**A & P DOMAINS**

<table>
<thead>
<tr>
<th>Domain/ Activity</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>d760 Family Relationships</td>
<td>Patient will use multimodality communication strategies to express opinions to family members, given minimal assistance (related to purchasing a new home).</td>
</tr>
<tr>
<td>d910 Community Life</td>
<td>Cleaning the house, doing laundry, grocery shopping, going to the doctor, voting</td>
</tr>
<tr>
<td>Creative &amp; Relaxing Activities</td>
<td>Using a computer, bird watching, drawing/painting, listening to music, going to movies</td>
</tr>
<tr>
<td>Physical Activities</td>
<td>Golfing, yoga walking, swimming, fishing</td>
</tr>
<tr>
<td>Social Activities</td>
<td>Family gatherings, eating out, picnic, storytelling</td>
</tr>
</tbody>
</table>

**ICF Checklist**

**A & P DOMAINS**

<table>
<thead>
<tr>
<th>Domain/ Activity</th>
<th>Performance Qualifier</th>
<th>Capacity Qualifier</th>
</tr>
</thead>
<tbody>
<tr>
<td>d3. COMMUNICATION</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d310 Communicating with—receiving spoken messages</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d315 Communicating with—receiving nonverbal messages</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d330 Speaking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d335 Producing nonverbal messages</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d350 Conversation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**A & P DOMAINS**

<table>
<thead>
<tr>
<th>Domain/ Activity</th>
<th>Performance Qualifier</th>
<th>Capacity Qualifier</th>
</tr>
</thead>
<tbody>
<tr>
<td>d7. INTERPERSONAL INTERACTIONS &amp; RELATIONSHIPS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d710 Basic interpersonal interactions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d720 Complex interpersonal interactions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d730 Relating with strangers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d740 Formal relationships</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d750 Informal social relationships</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d760 Family relationships</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**A & P DOMAINS**

<table>
<thead>
<tr>
<th>Domain/ Activity</th>
<th>Performance Qualifier</th>
<th>Capacity Qualifier</th>
</tr>
</thead>
<tbody>
<tr>
<td>d9 COMMUNITY, SOCIAL AND CIVIC LIFE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d910 Community life</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d920 Recreation and leisure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d930 Religion and spirituality</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d940 Human rights</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d950 Political life and citizenship</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**ICF Checklist**

<table>
<thead>
<tr>
<th>Category</th>
<th>Examples of Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home &amp; Community Activities</td>
<td>Cleaning the house, doing laundry, grocery shopping, going to the doctor, voting</td>
</tr>
<tr>
<td>Creative &amp; Relaxing Activities</td>
<td>Using a computer, bird watching, drawing/painting, listening to music, going to movies</td>
</tr>
<tr>
<td>Physical Activities</td>
<td>Golfing, yoga walking, swimming, fishing</td>
</tr>
<tr>
<td>Social Activities</td>
<td>Family gatherings, eating out, picnic, storytelling</td>
</tr>
</tbody>
</table>
Life Interests and Values (LIV) cards

1. Do you do this now?
   - No
   - Yes

2. Do you want to START doing this?
   - Yes

3. Do you want to do this MORE?
   - Yes

Life Interests and Values (LIV) cards

Mr. L's Functional Goals

<table>
<thead>
<tr>
<th>A &amp; P Assessment Results</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Difficulty engaging in preferred reading activities (e.g., reading newspapers)</td>
<td>Mr. L will demonstrate reading comprehension of 5-sentence paragraphs with 80% accuracy with minimal cues.</td>
</tr>
<tr>
<td>Wife reports difficulty understanding his attempts to communicate needs at home</td>
<td>Mr. L will increase the use of strategies for effective repair of misunderstandings during conversations 80% of the time with minimal cues. Mrs. L’s skill in supporting conversation with her husband with aphasia will improve as rated on the Measure of Skill in Supported Conversation (MSC: Kagan et al., 2004).</td>
</tr>
<tr>
<td>Increased withdrawal from social interactions</td>
<td>Mr. L will use functional communication skills for social interactions (e.g., greetings and short questions/simple sentences) with both familiar and unfamiliar partners with 90% success.</td>
</tr>
</tbody>
</table>

Outcome Reporting

- LPAA calls for the use of outcome measures that assess quality of life and degree of life participation.
  - Increased participation in activities or roles of choice
  - Enhanced social connections
  - Improved feelings/attitudes

Patient Satisfaction

- The Affordable Care Act made many changes to Medicare, including linking part of hospital pay to “patient experience and satisfaction.”
  - Sample questions from survey:
    # 2/6. How often did nurses/doctors listen carefully to you?
    # 3/7. How often did nurses/doctors explain things in a way you could understand?
    # 16. Before giving you any new medicine, how often did the hospital staff tell you what the medicine was for?
    # 17. Before giving you any new medicine, how often did hospital staff describe possible side effects in a way you could understand?
    # 20. Did you get information in writing about what symptoms or health problems to look out for after you left the hospital?

ICF Checklist

<table>
<thead>
<tr>
<th>Goal</th>
<th>Capacity Qualifier</th>
<th>Performance Qualifier</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr. F. will independently indicate preferences for food choices using any means</td>
<td>2= Mod. diff/ No diff</td>
<td>4= Complete diff</td>
</tr>
<tr>
<td>Mary will use multimodality communication strategies to express opinions to family members, given minimal assistance (related to purchasing a new home).</td>
<td>3 = Sev. diff/ 1 = Mld diff</td>
<td>4 = Complete diff</td>
</tr>
<tr>
<td>Mary will use verbal phrases to express opinions and concerns at parent-teacher meetings (role-play/script training)</td>
<td>3 = Sev. diff/ 1 = Mld diff</td>
<td>4 = Complete diff</td>
</tr>
</tbody>
</table>
### Life Interests and Value Cards

<table>
<thead>
<tr>
<th>Activity</th>
<th>Initial</th>
<th>Discharge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Go out to eat</td>
<td>Occasionally</td>
<td>Frequently</td>
</tr>
<tr>
<td>Talk on phone with friends</td>
<td>Never</td>
<td>Frequently</td>
</tr>
<tr>
<td>Participate in AA meeting</td>
<td>Never</td>
<td>Consistently</td>
</tr>
<tr>
<td>Send email</td>
<td>Occasionally</td>
<td>Frequently</td>
</tr>
</tbody>
</table>

### Key Life Activities (Simmons-Mackie, 2001)

<table>
<thead>
<tr>
<th>Pre-Onset</th>
<th>Initial Assessment</th>
<th>Outcome Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teaching 3rd grade</td>
<td>Church on Sunday</td>
<td>Church on Sunday</td>
</tr>
<tr>
<td>Church on Sunday</td>
<td>Church on Sunday</td>
<td>Church on Sunday</td>
</tr>
<tr>
<td>Cook for church</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carnival club secretary</td>
<td>Carnival club attendee</td>
<td></td>
</tr>
<tr>
<td>Walk 2 miles daily</td>
<td>Walk with friend daily</td>
<td></td>
</tr>
<tr>
<td>Prepare family dinner</td>
<td>Host family dinner</td>
<td></td>
</tr>
<tr>
<td>Babysit grandchild</td>
<td>Babysit grandchild</td>
<td></td>
</tr>
<tr>
<td>Garden Club Gardening</td>
<td>Some gardening</td>
<td>Some gardening</td>
</tr>
<tr>
<td>Reading</td>
<td>Reading (some)</td>
<td>Reading (some)</td>
</tr>
<tr>
<td>Television</td>
<td>Television</td>
<td>Television</td>
</tr>
</tbody>
</table>

### Participation in Conversation

<table>
<thead>
<tr>
<th>Behavior</th>
<th>Initial</th>
<th>Discharge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initiates transactions</td>
<td>Seldom</td>
<td>Often</td>
</tr>
<tr>
<td>Uses support offered by CP</td>
<td>Seldom</td>
<td>Frequently</td>
</tr>
<tr>
<td>Content of transaction is accurate</td>
<td>Occasionally</td>
<td>Frequently</td>
</tr>
</tbody>
</table>

### ASHA Quality of Communication Life Scale

Quality of communication life is defined as: “...the extent to which a person’s communication acts— influenced by personal and environmental factors, and filtered through a person’s own perspective—allow meaningful participation in life situations.”

### ASHA QCLS

- Socialization/Activities
  - I get out of the house and do things
  - People include me in conversations
  - I meet the communication needs of my job or school
  - Confidence/Self-Concept
  - It’s easy for me to communicate
  - I speak for myself
  - I like myself

- Roles & Responsibilities
  - I make my own decisions
  - My role in the family is the same
  - General
    - In general, my quality of life is good

6. I stay in touch with family and friends.
18. In general, my quality of life is good.
Aphasia Impact Questionnaire

Communication
- During the last week, how easy was it to:
  - talk to someone close to you?
  - talk to someone you didn’t know?
  - understand someone close to you?

Emotional state/Well Being
- During the past week, have you felt:
  - frustrated?
  - worried?
  - unhappy?

Participation
- How easy is it for you to do the things you have to do (e.g. health appts., paperwork, shopping)?
- During the past week, did you have enough positive things to do (e.g. see friends, hobbies, going out)?
- During the past week, how were things with your friends?

Conclusions
- There is strong evidence to support the LPAA
- LPAA is a natural fit with the ICF and A-FROM models for assessment and treatment of aphasia
- LPAA can easily be incorporated into the assessment and treatment process
- LPAA is associated with meaningful life outcomes