



Course Module: The Evidence for a Life Participation Approach to Aphasia (LPAA)

NOTE: The relationship to standards contains information relevant to the US and Canada. If you would like to let us know about relevant standards from other countries, please email: info@AphasiaAccess.org.

<p>Relation to standards</p>	<p>ASHA Standard for CCC in SLP Standard IV-F: “The applicant must have demonstrated knowledge of processes used in research and of the integration of research into evidence-based clinical practice.”</p> <p>American Stroke Association (ASA): Scientific statement: Evidence for Stroke Family Caregiver and Dyad Interventions. Does not directly address LPAA, but states that Interventions that combine skill building (eg, problem solving, stress management, goal setting) with psycho-educational strategies should be chosen over interventions that only use psycho-educational strategies and that dyadic intervention is preferable to caregiver interventions when survivor outcomes are most desired. http://stroke.ahajournals.org/content/45/9/2836.full.pdf+html</p> <p>Scientific Statement on Interdisciplinary Rehabilitation of the Stroke Patient: A variety of aphasia treatment approaches may facilitate improved resumption of daily communicative activities and interactions. Specifically mentions group treatment and communication partner training (p. 2425). http://stroke.ahajournals.org/content/41/10/2402.full.pdf</p> <p>Aphasia United Best Practice Recommendations:</p> <ul style="list-style-type: none"> • No one with aphasia should be discharged from services without some means of communicating his or her needs and wishes • People with aphasia should be offered intensive and individualized aphasia therapy designed to have a meaningful impact on communication and life.
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	<ul style="list-style-type: none"> • Communication partner training should be provided to improve communication of the person with aphasia. • Families or caregivers of people with aphasia should be included in the rehabilitation process <p>https://shrs.uq.edu.au/aphasia-united http://www.aphasiaunited.org</p> <p>Canadian Partnership for Stroke Recovery:</p> <ul style="list-style-type: none"> • Participation in group therapy may result in communicative and linguistic improvements. • Community-based language therapy programs provide a setting for improved language functions taking into account limitations and constraints of the “real-world”. • Supported Conversation for Adults with Aphasia improves conversational skill. In addition, training communication partners may result in improved access to conversation and increased social participation. <p>http://ebsr.com/sites/default/files/Chapter14_Aphasia_FINAL_16ed.pdf</p> <p>Canadian Stroke Best Practices Recommendations: All team members should be trained in supported conversation to be able to interact with patients with communication limitations such as aphasia. Tools should be adapted for use in patients with communication differences or limitations due to aphasia. Treatment to improve functional communication should include supported conversation techniques for potential communication partners. All information intended for patient use should be available in aphasia-friendly formats. Families of persons with aphasia should be engaged in the entire process, from screening through intervention, including family support and education, and training in supported communication.</p> <p>http://www.strokebestpractices.ca/</p> <p>JCAHO “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. The recommendations in the <i>Roadmap for Hospitals</i> do not encompass every aspect of these three areas, but they do represent key issues that hospitals should consider to meet the unique needs of each patient.”</p> <p>http://www.jointcommission.org/assets/1/6/roadmapforhospitalsfinalversion727.pdf</p>
Learning objectives	Students will demonstrate knowledge of the evidence that supports the need for LPAA.

	<p>Students will demonstrate knowledge of the evidence that supports the efficacy of LPAA in goal setting and interventions for people with aphasia.</p> <p>Students will demonstrate the ability to apply the research evidence to activities that involve selecting goals and treatment approaches for individuals with aphasia.</p>
<p>Learning materials</p> <p>(Available at aphasiaaccess.org/modules)</p>	<p>Video: “Research Evidence Supporting Life Participation & Social Model Intervention in Aphasia” by Nina Simmons-Mackie & Aura Kagan, presented at the AphasiaAccess Leadership Conference, Boston University, March 2015.</p> <p>PowerPoint presentation: “The Evidence for a Life Participation Approach to Aphasia”. This PowerPoint contains substantially the same information as the video listed above, but since it is not narrated it may be faster to download and easier to navigate to find specific information.</p> <p>Reference list of research studies</p>
<p>Assessment activities</p>	<p><i>Sample test questions:</i></p> <ol style="list-style-type: none"> 1. You work in the outpatient department of a rehabilitation hospital. You are trying to convince the administration to start a program of psychological support for people with stroke-induced aphasia and their care partners, but they are resistant. What information from research studies could you present to strengthen your case? 2. Early in the rehabilitation process are the goals of SLPs similar to goals of PWA and their families? Explain. <p><i>Sample case study</i></p> <p>Ms. A is a 26-year-old right-handed African-American native-English speaking woman who suffered a left CVA that resulted in Broca’s aphasia approximately 1 year ago. She completed college and worked as a nutritionist in a hospital prior to the stroke, but has been unable to return to work. She lives with her very supportive family (mother, sister, brother-in-law) but has become depressed by her loss of independence and her inability to return to work. Her profile of language strengths and challenges is consistent with classical stroke-induced Broca’s aphasia. Her expressive language is nonfluent and agrammatic, characterized by the production mostly of nouns in 3-4 word utterances. She is adept at using facial expression, prosody, and gestures to enhance her spoken</p>

production. Auditory comprehension is relatively good for most conversational exchanges but breaks down as material becomes longer or more complex. A course of individual speech-language therapy focused on improving the production of syntactically accurate active declarative sentences resulted in improvement on targeted sentences but little generalization to other sentences or to spontaneous speech. Ms. A was recently discharged from treatment because of very slow progress and concerns that the third-party payer would no longer reimburse for treatment. Ms. A and her family would like Ms. A to be able to communicate better in specific situations that she'd like to resume (shopping online, going to her local coffeeshop and ordering/paying independently, getting out of the house to meet other people, etc.)

Develop two LPAA-based goals that might be appropriate to explore with Ms.A and her family. Discuss the evidence that exists to support the goals that you choose.

Writing Activity

This assignment is meant to allow you to demonstrate your ability to integrate your knowledge of research evidence that supports LPAA with a specific clinical activity.

You work on the stroke team in an in-patient rehabilitation hospital. Although you've been doing your best to train the team members to communicate with people who have aphasia on a case-by-case basis, you think it would be more efficient and better for all patients if you could start a training program for all hospital staff. You need to convince the physician who is the stroke team leader. Using the research evidence, outline a script that you could use when you meet with the physician.