




## ASHA CEUs

### Information and Notes Pages

### “Incorporating Communication Partner Training into Aphasia Treatment”

<p>APPROVED PROVIDER</p>  <p>ASHA CONTINUING EDUCATION</p> <p>AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION</p>	<p>LingraphiCARE America is approved by the Continuing Education Board of the American Speech-Language-Hearing Association (ASHA) to provide continuing education activities in speech-language pathology</p>
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and audiology. See course information for number of ASHA CEUs, instructional level and content area. ASHA CE Provider approval does not imply endorsement of course content, specific products or clinical procedures.

This course is offered for 0.1 ASHA CEUs (Introductory level; Professional area).

# Complete a 0.1 ASHA CEU Course

Speech-language pathologists (SLPs) are invited to participate in a one-hour ASHA-approved course offering, "Incorporating Communication Partner Training into Aphasia Treatment." To be eligible to receive 0.1 ASHA CEUs (Introductory level), please see the guidelines below.

For more information about ASHA's most up-to-date eligibility criteria, go to the FAQ section of the ASHA CE website: <http://www.asha.org/CE/FAQs/>.

## Course Description:

This course provided information about how to optimize long-term success for clients with aphasia, by identifying and training communication partners, so that they can continue the work, once direct speech therapy ends. The course offered practical examples of identifying communication partners, demonstrating in-session training techniques, and recommending tools for continued home practice.

## Learning Outcomes:

By completing this course, participants will be able to:

1. Identify current trends in the literature which discuss the value of communication partner training in the rehabilitation of people with aphasia.
2. Develop communication partner training skills to maximize outcomes and client progress.
3. Define the strengths and weaknesses in the communication behaviors of clients and their partner(s) to offer techniques in promoting successful communication exchanges..

## Additional courses in the Communication Partners and Caregivers track include:

- Breaking Down Common Barriers to AAC Use (Introductory, 0.05 ASHA CEUs)
- What SLPs Need to Know About Training the Caregiver (Introductory, 0.05 ASHA CEUs)
- An SLPs Guide to Training Caregivers and Facilitating Use of AAC Devices (Introductory, 0.1 ASHA CEUs)

## Processing:

Online course completions are reported to ASHA quarterly. Please allow eight to ten weeks for processing. Lingraphica will issue a certificate of participation to each SLP who completes a CEU course.

For more information, or to start a device trial, contact: [continuinged@lingraphica.com](mailto:continuinged@lingraphica.com)

## Incorporating Communication Partner Training Into Aphasia Treatment



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## Disclaimer

- Brianne Kosch is an employee of Lingraphica and thereby receives financial compensation from the Lingraphica Company.
- Nonfinancial— No relevant nonfinancial relationship exists.



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## Overview

- Discuss SLP Scope of Practice
- Define communication partner training and its benefits
- Discuss why communication partner training is important
- Discuss some obstacles of communication partner training
- Identify communication partner profiles and needs
- Identify some tools and resources
- Q&A



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## SLP Scope of Practice

SLP clinical services include:

“Counseling individuals, families, coworkers, educators, and other persons in the community regarding acceptance, adaptation, and decision making about communication and swallowing.”



Scope of Practice in Speech-Language Pathology (ASHA, 2007)



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## Communication Partner Training Defined

What is communication partner training?

- Communication Partner = caregiver, conversation partner, care-partner
- Providing communication partners with the skills they need to facilitate the communication skills of their loved one
- Teaching communication partners how to be “good” communication partners
- Including communication partners in the treatment plan and process
- Providing communication partners a home treatment plan for practice



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## Communication Partner Training

What does communication partner training look like?

- Counseling
- Support - psychosocial
- Teaching specific techniques and skills
- Inclusion
- Education
- AAC Training
- Providing resources



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## Benefits of Communication Partner Training

Why is communication partner training so important?

- Carry-over
- Potential solution to therapy caps
- Increases functional communication
- Improves the relationship between communication partner and PWA
- Increases motivation
- Decreases frustration
- Improves outcomes



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## Why Focus on the Communication Partners?

More than 2/3 of the 4.6 million stroke survivors in the United States need daily assistance.

Caregivers must learn how to adjust to and manage a variety of impairments and needs, including:

- Motor
- Sensory
- Visual
- Physical
- Communication
- Language
- Cognitive
- Mental - Depression



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## Why Focus on the Communication Partners?

Caregivers have been found to exhibit:

- Depression
- Ulcers
- Higher blood pressure
- Headaches/migraines
- Fatigue
- Overall health decline
- Increased risk of mortality

Significant psychosocial adjustment for both PWA and communication partner



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## Other Communication Partner “Burdens”

- Unable to communicate with their loved one
- Role changes in the household
- Dealing with healthcare professionals
- Managing difficult behaviors
- Providing emotional support
- Social rejection/isolation
- Financial stress
- Depression




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## Research – Study 1

### Spouse attitudes

Spouses expressed significantly more negative attitudes toward their aphasic loved one.

Most prevalent characteristics:

- Demanding, temperamental
- Immature, worrying, nervous, confused

Negative spouse attitudes may severely affect treatment and the patient-clinician relationship.

Spouse attitude towards the person with aphasia (Zraick and Boone, 1991)

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## Research – Study 1

TABLE 1. Rank order of items 1–10 and 61–70 based on subjects' raw score data.

Rank order	Spouse group		
	Fluent aphasia (N = 15)	Nonfluent aphasia (N = 15)	Controls (N = 30)
1	Demanding	Demanding	Mature
2	Temperamental	Temperamental	Kind
3	Worrying	Immature	Sensitive
4	Nervous	Worrying	Good-natured
5	Emotional	Nervous	Friendly
6	Immature	Adaptable	Pleasant
7	Moody	Preoccupied	Warm
8	Impatient	Confused	Sexy
9	Confused	Intolerant	Thoughtful
10	Mannerly	Impatient	Intolerant
61	Optimistic	Self-controlled	Persistent
62	Aggressive	Optimistic	Worrying
63	Cold	Dependable	Nervous
64	Obnoxious	Affectionate	Gloomy
65	Self-confident	Thoughtful	Confused
66	Self-centered	Sexy	Cold
67	Intelligent	Intelligent	Slow
68	Mature	Mature	Obnoxious
69	Sexy	Capable	Demanding
70	Independent	Independent	Immature

(Zraick and Boone, 1991)

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## Research – Study 2

### Communication changes and SLP services

37% Interactions with the SLP were “inadequate”

- Information about diagnosis and prognosis
- Training on how to facilitate functional communication at home
- AAC training

52% More communication partner training

63% More involvement in whole process

82% More support and training overall

Communication changes and SLP services according to significant others of persons with aphasia (Blom Johansson et al., 2012)



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## Obstacles of Communication Partner Training

- Understanding each communication partner and being able to cater to their needs
- Time restraints/therapy caps
- SLP skills and confidence in counseling and communication partner training
- Limited tools and resources
- Billing



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## Communication Partner Profiles and Needs



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## Understanding Each Communication Partner and their Needs

Six types of communication partner profiles



1. Long-term communication partner
2. Well-intended communication partner
3. Newbie communication partner
4. Knack-for-it communication partner
5. Broken communication partner
6. Absent communication partner



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## Communication Partner Profiles & Needs

**Profile #1:** The long-term communication partner

- "Been around the block"
- Have accepted their spouse's condition
- Have adjusted to their new roles
- Have been exposed to many healthcare providers, SLPs, OTs, etc.
- Set in their ways

*What are the needs of this communication partner?*



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## Communication Partner Profiles & Needs

**Profile #1:** The long-term communication partner

- Some reprogramming
- Simple instruction on how to cue/prompt speech
- Help with learning how to step back
- Recommendations of home activities or a home program



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## Communication Partner Profiles & Needs

**Profile #2:** The well-intended communication partner

- Means well, but just doesn't "get it"
- May be overbearing or pushy – wants the best for their loved one
- Wants to help, but doesn't have the right tools to do so
- Thinks they know best

*What are the needs of this communication partner?*



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## Communication Partner Profiles & Needs

**Profile #2:** The well-intended communication partner

- Education on the diagnosis and prognosis
- Encourage them to observe and participate in treatment sessions
- Inclusion in decision-making
- Small skills to work on one at a time (right way to cue)
- Home program – keep them involved



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## Communication Partner Profiles & Needs

**Profile #3:** The newbie communication partner

- "Deer in headlights"
- Overwhelmed
- Emotional
- Angry
- Scared
- Little knowledge of diagnosis
- High expectation of loved one's recovery

*What are the needs of this communication partner?*



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## Communication Partner Profiles & Needs

**Profile #3:** The newbie communication partner

- Reassurance
- Education – just the basics
- Hope
- A friend
- Some hand-holding and guidance
- To know that someone understands what they're going through
- Information on support groups



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## Communication Partner Profiles & Needs

**Profile #4:** The “knack-for-it” communication partner

- Just seems to get it
- Is naturally a “good communication” partner and support system
- They pick up on and use techniques they see the SLP using in therapy
- Educated on the diagnosis and prognosis

*What are the needs of this communication partner?*



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## Communication Partner Profiles & Needs

**Profile #4:** The “knack-for-it” communication partner

- Not much
- Good home program
- More advanced communication partner skills
- Information on other resources/aphasia groups



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## Communication Partner Profiles & Needs

**Profile #5:** The broken communication partner

- Overwhelmed to the point of breaking down
- Frequently states "I feel like giving up"
- Very needy
- Hopeless
- Depressed

*What are the needs of this communication partner?*



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## Communication Partner Profiles & Needs

**Profile #5:** The broken communication partner

- A lot of support and coddling
- Someone to listen to them
- Their feelings to be validated
- Professional counseling – for them, not the PWA
- Encouragement to find time for themselves
- Information about support group for communication partners
- *\*\* Not a good candidate for communication-partner training*



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## Communication Partner Profiles & Needs

**Profile #6:** The absent communication partner

- Uninvolved
- Hard to get in touch with
- Doesn't follow through with SLP instructions
- Never stays for therapy sessions
- Shows little interest or concern

*What are the needs of this communication partner?*



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## Communication Partner Profiles & Needs

**Profile #6:** The absent communication partner

- Hardest of the communication partner types
- Encourage them to want to be involved
- Continue to try and include them
- Help them understand the importance of their involvement
- *\*\*Not the best candidate for communication partner training, even though they need it the most*



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## Obstacles to Providing Communication Partner Training



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## Time Restraints



- Therapy caps
- Shorter sessions
- More to accomplish
- Less time with the patients
- Communication partner time is limited

*How do we find the time to provide communication partner support and training?*



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## SLP Skills and Confidence

Limited academic and professional training in:

- Counseling
- Communication partner training
- AAC training
- Developing home programs



*SLPs need to be proactive and seek training in these areas*



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## Limited Tools and Resources

Tools for home programs:

- Lingraphica TalkPath Therapy

Caregiver inclusive intervention methods:

- Supporting Conversation for Adults with Aphasia (SCA™)
- Supporting Partners of People with Aphasia in Relationships and Communication (SPPARC)
- Communication Partners



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## Tools and Resources



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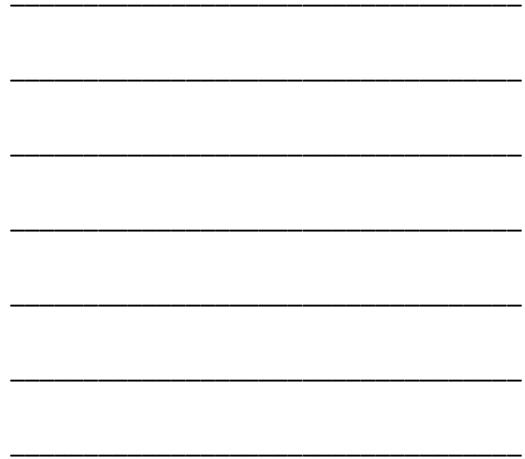
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## Lingraphica TalkPath Therapy

Help create a home program and encourage the communication partner to be proactive



<https://therapy.aphasia.com/>



## Lingraphica TalkPath Therapy

**TalkPath Therapy**

Working with Example Client

All Exercises	Example Client's Plan
<b>Listening</b>	General Knowledge
Word ID	Remote Memory - Memory
Complete the Phrase	Prescription Label
Answering Questions	Fluency Memory - ADL
Following Directions	Delayed Memory
Functional Word Repetition	Recent Memory - Memory
Functional Phrase Repetition	Complete the Phrase
Flashcard Naming	Learning
Tell Me More	Flashcard Naming
	Spelling
	Sentence Scramble
	Writing
	Describe the Picture
	Reading
	Name the Category
	Comparison - Reasoning
	Unfamiliar Items
	Innovative Memory - Memory

Buttons: View Reports, Change Settings, Run as Client



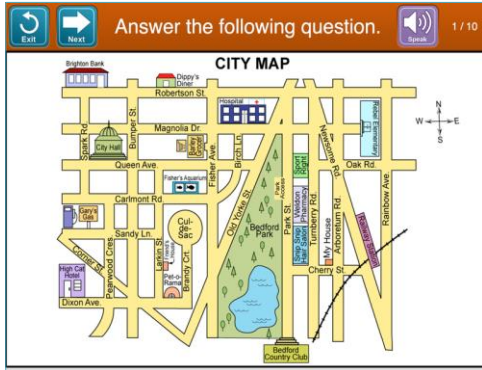
## Lingraphica TalkPath Therapy Reports

Start: 10/07/2013 | End: 03/15/2017 | Last 7 Days | Last 30 Days | All Time

Client Name	Accuracy	# of Tasks	Task Time (HH:MM:SS)	Options
- Example Client	30%	641	10:08:12	
- Cognition	29%	178	00:36:29	
+ ADL	35%	111	00:24:14	
+ Memory	30%	20	00:04:38	
+ Reasoning	15%	47	00:07:36	
+ Speech	0%	3	00:00:58	
+ Language	40%	198	01:39:06	
+ News	48%	262	07:51:37	
- Bob Smith	41%	46	00:29:55	
+ Cognition	47%	32	00:17:58	
+ Language	29%	14	00:11:50	
+ Jim Smith	38%	92	01:28:44	



## Lingraphica TalkPath Therapy Activity



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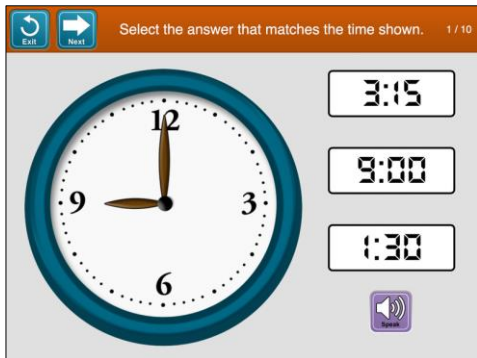
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## Lingraphica TalkPath Therapy Activity



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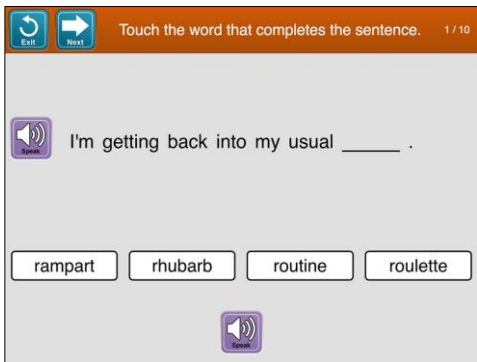
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## Lingraphica TalkPath Therapy Activity



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## Other Resources

### Supported Conversation for Adults with Aphasia (SCA)

SCA = Provides conversation partners with methods and materials to support successful conversation

- Emphasis not on individual communication
- Opportunities for real, everyday conversation & interactions
- Autonomy – partner helps carry communication load
- Keywords, gestures, writing, drawing, yes & no questions



<https://aphasia.ca/>

Supported conversation for adults with aphasia: methods and resources for training conversation partners (Kagan, 1998)



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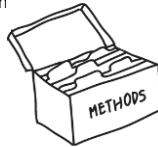
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## Other Resources

### Supporting Partners of People with Aphasia in Relationships and Conversation (SPPARC)

- Conversation training program – Coping and communication
- Help couples become aware of conversation patterns
- Identify and use strategies to change negative patterns



Supporting partners of people with aphasia in relationships and conversation, SPPARC (Lock et al., 1997)



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## Other Resources

### Communication Partners

- Aim – To restore a sense of purpose, direction and control to daily life of both patient and communication partner
- Includes patient, communication partner, and community volunteer
- Enhances communication and well-being in the natural environment
- Results: Increased active participation in daily life



Communication partners (Lyon et al., 1997)



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## Thank you!

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## Questions?

