

Dysarthria



What are person-centered functional goals?

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

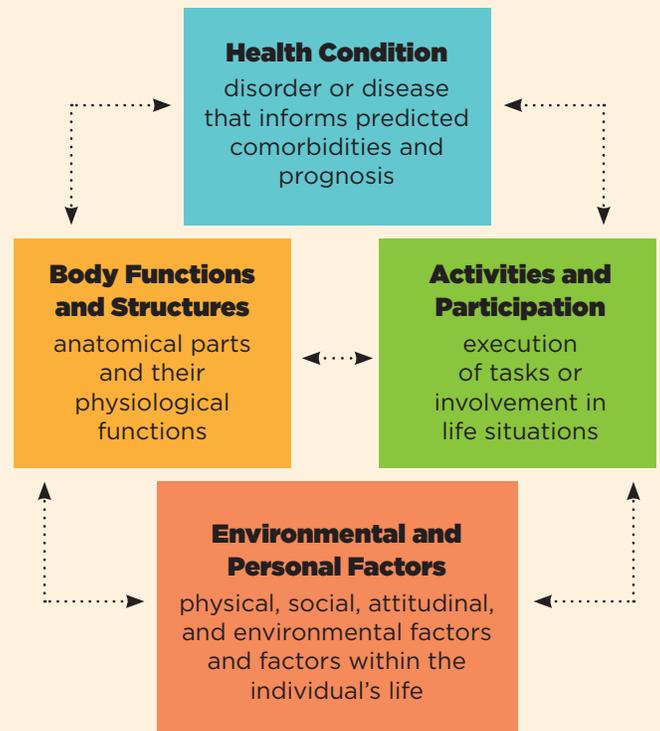
Why target person-centered functional goals?

- 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

What is the ICF, and how does it help?

The International Classification of Functioning, Disability and Health (ICF)—developed by the World Health Organization (WHO)—is 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.

ICF: International Classification of Functioning, Disability and Health



Person-Centered Focus on Function: Dysarthria

Case study

Health Condition: Parkinson's disease with hypokinetic dysarthria

Assessment Data

Body Functions and Structures

- Rigidity of articulators
- Lingual tremors
- Reduced range of motion of articulators
- Poor respiratory support
- Monopitch
- Monoloudness
- Strained, breathy vocal quality
- Imprecise articulation
- Fluctuating rate of speech
- Difficulty initiating verbal productions
- Speech intelligibility^a: 65%
- Functional hearing, vision, cognition, mobility

Activities and Participation

- Wife reports increased social isolation from frequent breakdown in communication resulting from reduced speech intelligibility.
- Patient reports^b greater difficulty conversing over the telephone than in face-to-face conversations.
- Patient reports quickly fatiguing in verbal communicative contexts.

Environmental and Personal Factors

- Age: 57
- Motivated to communicate effectively with his children who live in different cities
- Hesitant to use technology to augment communication
- Reduced motivation for social communication due to stigma associated with speech intelligibility
- Had benefitted from SLP services previously but is currently discouraged given progression of disease
- Unable to communicate well in the presence of background noise

Clinical Reasoning

What impairments most affect function, based on clinician assessment & the individual's self-report?

What activities are most important to the individual in the current or discharge setting?

What environmental/personal factors are facilitators or barriers to participation in the current or discharge setting?

Goal Setting

Person-Centered Functional Goals

Long-Term Goal:

Without external cues, Mr. J will use functional communication skills for social interactions with both familiar and unfamiliar partners.

Short-Term Goals:

- With moderate verbal cues from communication partners, Mr. J will increase respiratory support to produce intelligible phrase-level utterances.
- Mr. J will use a low-tech system with occasional cues to augment speech production in challenging environments (e.g., in the presence of background noise).
- Without cues, Mr. J will consistently initiate requests for appropriate environmental modifications (e.g., reduce background noise, use videoconferencing for phone calls) to improve communicative effectiveness.

^a Measured by sentence intelligibility subtest of the Assessment of Intelligibility of Dysarthric Speech (Yorkston & Beukelman, 1981)

^b Reported on Communication Effectiveness Index-Modified (CETI-M; Yorkston, Beukelman, Strand, & Bell, 1999)

For clinical and documentation questions, contact healthservices@asha.org.

The interpretation of ICF and examples above are consensus based and provided as a resource for members of the American Speech-Language-Hearing Association.